Staying Close Suffolk

Evaluation report

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The evaluation team would also like to thank all those staff members – Staying Close support workers, personal advisors, social workers, housing officers and other professionals – who contributed through being interviewed and/or completing the stakeholder surveys.

Finally, we would very much like to thank the young people accessing Staying Close in Suffolk who were involved in this evaluation. This evaluation would not have been possible without the input of those who participated in the evaluation design co-production work, who were involved in the peer interviews, and who contributed to the implications, conclusions and recommendations outlined in this report.
Young person-friendly summary

What is Staying Close and does it work?

Staying Close is a new project, which tries to improve the lives of young people when they are moving out of children’s homes and do not have the support they need in areas including independent living, education, jobs and training, stability, safety, health and wellbeing, having enough money and using it well. To understand if Staying Close is helpful, we interviewed staff and young people about their feelings towards Staying Close. We spoke to young people at three different time points in different ways, including workshops, interviews, surveys, and peer interviews.

What we found in interviews

How does Staying Close help young people?

Young people get help with looking after their money, housing, and are offered emotional support. Suffolk Staying Close has links to other people who sort out housing. This gives young people choice around where they live and who with.

What do young people want from Staying Close?

Young people want flexible support from Staying Close so they can have more practical and emotional help when they need it and less when they don’t. This support has been good for young people, but it can be difficult balancing being flexible to what the young person wants, with having boundaries. Young people sometimes need to adjust to having less support than in their children’s home. Support from Staying Close workers is flexible but they may not be available all of the time as the aim of Staying Close is to support young people to become more independent. Young people want choice in housing for when they move on from their children’s home – but they need help from staff to be realistic in what they accept as the type of property or where they would like to live might be too expensive or not available. Young people would also like to choose who they live with or if they live alone.

Successes and Challenges of Staying Close

Staying Close has encouraged young people to take part in deciding how Staying Close works. Young people decided that they did not want a communication app as they prefer texting Staying Close workers and using WhatsApp. Some young people could have more than one Staying Close worker – to get support from different members of staff for different needs. Most young people were able to choose where they lived, but could not always choose which other young people they lived with.

Relationships with Staying Close workers

Young people may be closer to Staying Close workers than Personal Advisors, as they spend a lot more time with them. If young people need to contact other people such as housing staff, Staying Close workers can help them so they learn how to contact the
people that they need to. Different members of staff working together have increased understanding of the needs of young people leaving care.

Main points and the future

Interviews with staff and young people, and their reports about how young people are doing, show Staying Close has improved the lives of young people leaving children’s homes in Suffolk. Interviews with young people showed that their relationships with Staying Close workers were continuous, strong, and reliable. Young people said that the relationships they have with staff are important. Staying Close has changed to fit the local needs in Suffolk and provide young people with safe and comfortable housing. They have a voice in deciding what type of support they get to help them slowly get more independence.
Key messages

1. **Being close** to key workers emotionally and being close to key workers geographically was more important to the young people than ‘staying close’ to the children’s home. Young people wanted accommodation that was close to all of their social networks. This included staff at the children’s homes, but also family and friends.

2. **Guaranteed tenancies** have actively stopped some of the young people becoming evicted when they did not pay their rent. This has provided a safety net as young people learn valuable lessons around budgeting and independent living.

3. **Partnership** with housing and other support agencies and collaboration with Personal Advisors has enabled new approaches to supporting young people. This is a more holistic model including shared work to support young people in maintaining tenancies.

4. **Sharing accommodation** with peers helps to alleviate feelings of isolation, especially immediately after transition, which some young people reported as being a difficult time. There were some issues around young people not getting along in these situations, but most were positive and agreed that it helped them to become better at managing social relationships.

5. **Having a choice** of key workers was important for maintaining relationships through Staying Close. They also enjoyed the autonomy they had over increasing and decreasing the support as needed. However, not all young people interviewed reported having a choice of key worker.

6. Staff felt that being able to work on the **transition to independence** earlier in the young person’s life made a positive difference to outcomes. Initially this was six months prior to leaving the children’s home but staff are now beginning preparation work with young people at the age of 15 and 16.

7. The project has adapted in relation to feedback from the young people, and the staff associated with the programme. The continued development has involved a significant amount of **co-production** with all people involved, including future users of the programme.

8. Staff felt that young people need to be **realistic in their expectations** about the type and location of accommodation they can access through Staying Close given the cost and availability. Staff also raised that future work is needed to implement some boundaries around the availability of staff and the level of support young people expect from them. Ongoing work to extend preparation and develop clearer messages for young people around expectations and boundaries is being developed in Suffolk to address this issue.

9. The collection of **data should clearly measure development** towards local and national outcome objectives and should be implemented across innovations and
interventions to support young people leaving care to enable an evaluation that is more conclusive.
Executive summary

Introduction

Staying Close is intended to address the ‘cliff edge’ that is faced by young people leaving children’s homes. Although the 2017 Children and Social Work Act requires local authorities to provide advice and support to all care leavers until the age of 25, aspects of financial, housing and practical support remain inconsistent. As a result, Heerde et al (2018) conclude that for young people leaving the care of a children’s home, there can be substantial variability in the provision of support. For many young people, the experience of leaving care can be marked by loss (Quinn et al, 2017). Confronted with a complex process of legally becoming an adult, young people also have to accept the loss of their key workers, such as children’s home staff or their social worker. These workers, depending on individual circumstance, could be some of the closest people to the young person.

Staying Close was funded through the Department for Education’s Children’s Social Care Innovation Programme (Innovation Programme hereafter). Staying Close aims to radically improve the outcomes for young people transitioning to independent living. It is intended to address the ‘cliff edge’ faced by young people leaving children’s homes by improving and extending the support provided by local authorities during the transition to independent adulthood. In this report, we consider the progress and findings from an evaluation of the Staying Close pilot in Suffolk. We report on the design and objectives of the Suffolk scheme, its implementation, and the experiences and expectations of staff, stakeholders, and the young people who access the service. We also report on the outcomes achieved by young people that access Staying Close, and the costs of the pilot along with potential costs saved due to the existence of the project.

The project

Suffolk County Council is a two tier county, with an upper tier county council (with social services responsibilities) and several district councils, consisting of district and boroughs. The project is working with young people leaving residential care in the county from 5 council and 3 privately run children’s homes. Fifty-seven young people leaving care received support from Staying Close during the evaluation period. However, support is flexible so the level of contact could vary considerably. The project is aimed at young people who have recently left or are preparing to leave, residential care. Young people from outside the county can also be placed in Suffolk and be supported by Suffolk Staying Close¹, where agreements are in place with their local authority.

¹ Known as ‘out of borough placements’
The Staying Close offer in Suffolk consists of accommodation through options that have been developed in partnership with the private rental sector, local authority housing and registered housing providers over the lifetime of the pilot. This offer includes Staying Close acting as a guarantor for tenancies. The options allow young people to have a choice in where they live and with whom they live. One option is a three-bedroom house, re-purposed for Staying Close by a housing partner. This option enables young people leaving children’s homes to share accommodation close to one of the children’s homes. Flexible, practical, and emotional support is provided by a team of Staying Close workers who also work in the local authority children’s homes. This allows young people to choose who supports them, which can either be a Staying Close worker or a member of staff from their children’s home. Staying Close staff can fill in for children’s home staff to allow them to provide this support. This continuing relationship-based support for the young people who have left or are leaving children’s homes complements training in tenancy and living skills. Social support groups are facilitated every other month and are used as an opportunity for young people to give feedback and suggestions about the service.

The evaluation

The evaluation uses a mixed-method, theory-based examination of process and experience through workshops, interviews, focus groups and online surveys with young people (including some young people who have already left the council’s care), key practitioners and managers at three time points over two years. The evaluation comprises five elements.

The implementation and process evaluation includes interviews with staff and stakeholders in understanding the experiences of implementation and providing support. It also involves young people, who have left, or are leaving, children’s homes both as service users and as peer researchers, to understand the experience of young people accessing Staying Close. The outcomes evaluation aims to provide descriptive, before and after data analysis of key outcomes (drawn from project monitoring data), both for distance travelled analysis, and also to understand the contribution made by Staying Close to the changes in observed outcomes experienced by young people accessing the pilot. A break-even cost analysis examines the costs associated with the programme and the potential cost savings.

Key findings

The key findings in relation to implementation, outcomes, and cost are:

1. The evaluation has found that Staying Close in Suffolk has been successfully implemented. Key factors of this success were identified by participants in this research as being the establishment of an operational group, a hybrid staff team to deliver continuing relationship-based support and partnerships with private, local
authority and registered housing providers. In addition, the importance of collaborative work with Social Workers and Personal Advisors has been highlighted to provide tailored, holistic support for each young person. The offer has been young person led through formal co-production, informal feedback and personalised support. Young people in receipt of Staying Close are positive about the support and accommodation offer.

2. The evaluation has found that Staying Close in Suffolk could have contributed to positive outcomes in relation to their identified areas of ‘feeling safe and supported’ and ‘maintaining independent living’. However, there was not sufficient outcomes data to evidence this for the outcome of ‘achieving wellbeing’. In contrast to traditional models of support for young people leaving children’s homes, outcomes are facilitated by the opportunity for the young people to experience a more gradual transition to independence. Flexible and relationship-based support from Staying Close workers, who are often familiar workers from the young person’s children’s home, reflect genuine concern, availability, and consistency. Along with being more supported in accommodation, this enables Staying Close in Suffolk to work with others to fence off the ‘cliff edge’ that is so often associated with the experience of leaving care and also provide a ‘safety net’ to catch those young people who find themselves at risk of falling into crisis.

3. The break-even analysis undertaken as part of this evaluation suggests that the intervention could break even (that is to say, that the economic benefits estimated might at least be equal to the exchequer costs incurred). However further research is required to determine the actual scale of the impact achieved and the benefits generated. As with all such interventions, it is not always possible to capture and monetise all benefits, particularly second order, longer term, and benefits that accrue to the individual but not the public purse. It should also be stressed that there is a difference between economic benefits and cash savings.

**Lessons and implications**

The following lessons and implications are informed by the evaluation findings as summarised above.

1. Continued practical and emotional support was provided by workers. Building on established and trusted relationships, or providing a new worker to develop this relationship, helps to smooth the transition from children’s homes and improve outcomes for young people.

2. Young people’s voice was a key feature of the implementation of Staying Close in Suffolk through co-production activities from the conception of the service through to regular opportunities for young people to share their views. Young people valued the choice around accommodation and support. As the evaluation identified that not all young people felt they had choice, for example in key workers or involvement in co-production activities, opportunities to act on their views and wishes should be
widened out to all young people accessing Staying Close. The evaluation highlights the importance of young people’s voice from implementation to choice about support and housing suggesting this should be a key feature of similar services for young people leaving care.

3. Work by services such as Staying Close should be embedded into Care and Pathway Plans to clarify roles and responsibilities in relation to wider support for the young person.

4. The collection of data to clearly measure development towards national and local outcomes objectives should be done across innovations and interventions to support young people leaving care to enable an evaluation that is more conclusive. Data should also be collected to measure outcomes specified in a project theory of change. Suggestions are given in the recommendations section of this report.
1. Introduction

Staying Close is a pilot programme that aims to radically improve outcomes for young people transitioning from residential care. It is intended to address the ‘cliff edge’ faced by young people by improving and extending the support during their transition to independent adulthood. The pilot programme is intended to contribute to five outcome areas for young people transitioning from care: independent living; access to education; employment and training (EET); stability, feeling safe and secure; good health and wellbeing; and financial stability (DfE, 2018). The pilot programme recognises that Staying Close will be designed and delivered in different ways by local authorities, both reflecting local priorities and the needs, strengths, and aspirations of individual young adults as they transition from care.

There is a significant body of evidence, in both the UK and internationally, that young people transitioning from care to independent adulthood face a number of significant challenges (Bengtsson et al, 2018). Their transition to adulthood is shorter, and occurs at a younger age compared to young people who have not experienced care in a form of ‘instant adulthood’ (Rogers, 2011). Young people transitioning from care often lack access to family support during this transition. It has long been recognised that young people leaving children’s homes face significant challenges and often achieve poorer outcomes than other young adults (Adley and Jupp Kina, 2017). Evidence demonstrates that young people with a history of local authority care have poorer social outcomes in adulthood when compared with peers who have not been under local authority care (HM Government, 2016). They often experience instability in their housing, and are over-represented in homeless populations (O'Leary, Ozan and Bradbury, 2017).

There are eight Staying Close pilots funded under the Innovation Programme. The pilot programme was intended to test the effectiveness and cost-effectiveness of Staying Close, and identified what should be core to the Staying Close offer. Each of the 8 Staying Close pilots is, therefore, being evaluated. A team at Manchester Metropolitan University is evaluating 5 of the pilots and teams at the universities of York and Oxford is evaluating the other three. Most of the pilots are being delivered directly by local authorities, with 3 being delivered by voluntary sector organisations.

This report is the second and final report, and focuses on the pilot Staying Close scheme run by Suffolk County Council. The report provides insights into the design and implementation of the Suffolk pilot. It focuses on the Staying Close offer and how it is delivered in Suffolk, the successes and challenges experienced in its implementation, and the distance travelled by young people accessing Staying Close in the area. It also seeks to understand the contribution made to the change in outcomes experienced by those young people. An important part of the evaluation reported here is the involvement of young people in the evaluation design, as peer researchers, as research participants, and as stakeholders.
Note on terminology

This report is one of five reports written by evaluators at Manchester Metropolitan University. For uniformity and clarity, the research team has taken some decisions regarding the use of terminology throughout the reports. The reports will refer to ‘children’s homes’ as opposed to residential home or care home when referring to the homes that the young people have left at the age of 16. There are two reasons for this. The first is to distinguish between the home or residences relating to the Staying Close project and the second in response to how the young people have referred to their homes throughout their responses to this research. The report will refer to young people with experience of care in regards to theory, literature, and extant evidence. For brevity, ‘young person’ will be used to refer to research participants, as it is understood those interviewed are care experienced.
2. Overview of the project

Scheme context and description

Suffolk County Council is the upper tier authority of a two-tier county, and serving a population of approximately 760,000 people (ONS, 2019). Staying Close in Suffolk covers a large and diverse geographical area. Suffolk is one of the largest counties in England with significant travel time between major towns (e.g. Ipswich to Lowestoft is nearly 50 miles and over a four hour drive while Ipswich to Bury St Edmunds is 30 miles and a 3-hour drive). In the year ending March 2019, there were 155 care leavers aged 17-18 and 340 care leavers aged 19-21 in the borough (DfE, 2019).

Staying Close works with young people who have recently left, or are preparing to leave, residential care in the county from both council and privately run children’s homes. Young people are eligible for Staying Close if they have left a children’s home in Suffolk. However, support for young people has also been extended to those who had left up to 2 years previously. Young people from outside the county can also be placed in Suffolk and be supported by Suffolk Staying Close. In these cases, the original local authority retains responsibility for the young person during their placement.

The theory of change (given in chapter 4 of this report) identifies three overall, long-term outcomes for young people\(^2\):

1. feeling safe and supported;
2. achieving wellbeing; and
3. maintaining independent living.

Staff report that accommodation is provided by a housing options approach that is enabled via direct work with housing associations, district and borough councils and private landlords. In partnership with a housing association, a three-bedroom house was repurposed near to a children’s home specifically for young people transitioning from residential care. Five privately rented properties are also currently in use by Staying Close in Suffolk along with increased priority to semi-independent accommodation. The range of provision allows choice in accommodation depending on where the young

\(^2\) The evaluation is theory driven, and the pilots ‘theory of change’ play a fundamental role in the design and conduct of the evaluation, and the analysis and findings reported here. An original theory of change was developed by the pilot as part of the funding bid to DfE. In the closing weeks of the evaluation, the pilot provided a revised Theory of Change to the evaluation team. While the revised theory of change included a number of significant changes to the evaluation version, there is a high degree of similarity in the outcomes expected. For the purposes of the evaluation and this report we have use the evaluation theory of change.
person would like to live, and if they would like to share with other care leavers or live alone.

Staying Close, on behalf of the local authority (LA), also acts as a guarantor for tenancies if needed. This includes private and housing association properties, meaning where the tenancy is in the young person’s name there is no requirement for young people to move on when they are no longer supported by Staying Close. This results in a more secure form of accommodation.

The Staying Close offer in Suffolk consists of the following activities:

- continuing relationship-based, emotional support provided from initial conversations in the children’s home prior to moving on to one to one support when the young person leaves. Individual support is bespoke and flexible, via telephone, messaging or in person;
- group drop-in sessions as a social event to build peer support. The groups are also used as an opportunity for young people to give feedback on the service and co-produce the way it develops.
- development of a young person directed Staying Close Plan;
- Getting Ready for Independence Programme, known as GRIP, training in partnership with a semi-independent housing provider;
- working with young people from 15+ who will be eligible for Staying Close;
- the option to move to one of the housing options post 16 and remain beyond 18;
- housing options in partnership with the private rental sector, local authorities and registered housing providers; and
- providing tenancy support and acting as a guarantor for young people in their tenancies.

Changes to the original intended activities included:

- a hybrid team delivering flexible support with either a continuing relationship provided by a member of staff from their children’s home or, where there are capacity issues for the home, a member of the Staying Close team. The Staying Close team therefore ‘backfill’ for the home staff or directly provide support. In some cases, young people could be supported by different members of staff for different purposes as per their their preference.
- there was no development of a communication app as originally intended due to the young people’s preference to communicate via text and WhatsApp.
3. Overview of the evaluation

Evaluation aims

There were two key aims of the evaluation reported here. The first was that the evaluations should follow a consistent approach to that used in the other seven Staying Close evaluations, to enable comparison between the pilots. The second key aim was that the evaluation should give voice to young people leaving, or preparing to leave, children’s homes. The evaluation was a mixed-method, theory-based examination of process and experience using a number of different data collection methods and engaging with a range of staff members. It examined the distance travelled in a range of outcome areas by young people accessing Staying Close in Suffolk, and assessed whether Staying Close could and did make a contribution to the outcomes observed.

Evaluation questions

There are a series of core questions that are common to all of the Staying Close evaluations. There are also research questions that are specific to Staying Close in Suffolk, reflecting variation between the schemes, their local context, objectives, existing service provision, and scheme design. The evaluation questions cover the implementation of the pilot; the voice, experience and expectations of young people accessing Staying Close services; and, the outcomes observed for these young people. The core evaluation questions are provided in table on and pilot-specific questions in table 2.
<table>
<thead>
<tr>
<th>Number</th>
<th>Research question</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>To what extent are the planned developments achieved? What was in place previously and what needs to be in place to facilitate successful implementation?</td>
<td>Addressed in chapter 5 of this report.</td>
</tr>
<tr>
<td>2</td>
<td>How have YP, and other stakeholders, been involved in the co-production of the model?</td>
<td>Addressed in chapters 5 and 7 of this report.</td>
</tr>
<tr>
<td>3</td>
<td>Have support plans been developed and implemented as anticipated? Has there been meaningful contact with an identified worker?</td>
<td>Addressed in chapters 5 and 7 of this report.</td>
</tr>
<tr>
<td>4</td>
<td>Has the staff training been rolled out effectively and what has been its impact from staff perspectives? For example, improved knowledge and understanding of the needs of young people leaving residential care</td>
<td>Addressed in chapter 5 of this report.</td>
</tr>
<tr>
<td>5</td>
<td>What is the impact of Staying Close on outcomes/progress for care leavers? What proportion:</td>
<td>Addressed in chapter 6 of this report.</td>
</tr>
<tr>
<td></td>
<td>a. Are in accommodation that is suitable (safe, secure and affordable) and stable (with reference to unplanned moves or disruptions in tenancies)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>b. Are in education, employment, or training appropriate to their abilities/wishes/needs?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>c. Are physically healthy?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>d. Have good emotional health, well-being and resilience</td>
<td></td>
</tr>
<tr>
<td></td>
<td>e. Feel well supported?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>f. Are ready for independent living?</td>
<td></td>
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<tr>
<td></td>
<td>g. Are resilient to unsafe behaviours (e.g. substance misuse; missing episodes; violence; CJS involvement; and unplanned early parenthood)?</td>
<td></td>
</tr>
<tr>
<td></td>
<td>h. Report good social connections, greater social integration?</td>
<td></td>
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### Table 1: (continued): Research questions

<table>
<thead>
<tr>
<th>Number</th>
<th>Research question</th>
<th>Comment</th>
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<tbody>
<tr>
<td>6</td>
<td>What has been the character of the support package (e.g. provided by the member of staff from their former children’s home) and how has this helped the young person to avoid problems with their tenancy or other untoward outcomes?</td>
<td>Addressed in chapters 5 and 6 of this report.</td>
</tr>
<tr>
<td>7</td>
<td>What are the costs of delivering the Staying Close intervention and what are the potential cost savings?</td>
<td>Addressed in chapter 8 of this report.</td>
</tr>
<tr>
<td>8</td>
<td>What are the experiences of young people in residential care who do not access the interventions?</td>
<td>Not addressed in this evaluation³.</td>
</tr>
</tbody>
</table>

³ The young people who were not accessing the interventions did not provide consent to participate in this evaluation.
The questions specific to the Suffolk Staying Close project are:

**Table 2: Research questions (pilot specific)**

<table>
<thead>
<tr>
<th>Number</th>
<th>Research question</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>To what extent is the opportunity to take a joint tenancy utilised by YP, in what contexts and in what ways? What is the experience for YP?</td>
<td>Addressed in chapter 5 of this report.</td>
</tr>
<tr>
<td>2</td>
<td>To what extent is the basket of hours used, when is it used, and what are the experiences of this of YPs and other stakeholders?</td>
<td>The project changes from the use of a basket of specified hours to more flexible support. This is discussed in chapter 5.</td>
</tr>
<tr>
<td>3</td>
<td>What are the characteristics of the SCOT team? How is it experienced by YP and other stakeholders?</td>
<td>Addressed in chapter 5 of this report.</td>
</tr>
<tr>
<td>4</td>
<td>Has the communication platform been established, to what extent is it used and how is it experienced?</td>
<td>Addressed in chapter 5 of this report.</td>
</tr>
</tbody>
</table>

**Evaluation methods**

To answer the research questions outlined in tables 1 and 2, the evaluation uses a mixed-method, theory based examination of process and experience through workshops, interviews/ focus groups and online surveys with young people (including some young people who have already left the council’s care), key practitioners and managers. A key interest to both policy makers and those involved in the pilot is the outcomes achieved by young people accessing Staying Close services. Given the limitations presented by the small number of people accessing the pilot’s services (see limitations section below), the evaluation used a non-statistical approach to understanding the difference made by interventions such as Staying Close, known as contribution analysis (Mayne, 2011).

There are three elements of the evaluation design, which examine the implementation of the Suffolk County Council Staying Close pilot (implementation or process evaluation), the experiences of young people accessing Staying Close services, and the effectiveness and cost effectiveness (outcome evaluation). The implementation
evaluation took place over three points: scoping, mid-point, and final phase. A range of data collection and analysis methods were used during this evaluation:

- scoping interviews with project leads;
- theory of change workshop, during the scoping phase, with 15 key participants;
- young person’s co-production workshop with 5 participants;
- nine interviews with project stakeholders (five mid-point and four in the final phase);
- online stakeholder survey conducted at two points (midpoint and final). 16 responses in total (six to the final survey);
- twenty two responses to the young people’s online survey conducted at two points (midpoint and final, 11 to the final survey);
- documents including quarterly reports, internal reports and support planning forms coded for thematic analysis;
- three peer-led interviews;
- two interviews using the peer researcher schedule but conducted by a researcher from the evaluation team as the interviewees were also peer researchers;
- three researcher-led case activities to explore young people’s experiences. As prompts young people were provided with a vignette, poems about leaving care and pick and mix questions, to tell their story verbally or in writing;
- qualitative coding of all textual materials (interview transcripts, documents and reports, and open-text responses to survey questions), and thematic analysis;
- acquisition, cleaning, and distance travelled analysis of pilot outcome monitoring data;
- acquisition, cleaning, and break even analysis of pilot cost data; and
- feedback from scheme staff and two young people, to verify findings and contribute to implications and conclusions.

Changes to evaluation methods

There have been no significant changes to the evaluation method since the proposed approach was agreed with the Department for Education in March 2018. There have been a small number of additional tasks undertaken, over and above those included in the evaluation funding, including validation workshops with staff and young people at the end of the evaluation, and additional rounds of staff and young people’s surveys.

Limitations of the evaluation

This sample is not representative of the wider population of young people leaving care in England. Young people start participating in Staying Close between the ages of 16 and 18 at a point determined by their maturity and readiness for moving on from care. Those from this cohort that were selected as peer researchers and participants are more likely to give a biased view of the service as they are generally successful and have achieved
at least some of the expected outcomes. The other Staying Close projects cannot be used as a comparison due to the differences of location, accommodation offer, and how the project is conducted. What is clear, however, is how the young people have viewed the project and what changes they feel it has brought about in their lives.

Participation in the evaluation was voluntary, and it has not been possible to ensure that everyone receiving or working on Staying Close was involved in the research. The evaluation was also funded to involve a small sample of those individuals working on or receiving Staying Close. This means that interview, workshop, and survey evidence presented here represents the views of a handful of people (and some people may have participated in more than one way). The evaluation was designed in part to address the challenges associated with a small sample and it is for this reason why a number of different data sources were used. However, the small numbers involved and the voluntary nature of their involvement means that the findings here might amplify positive or negative aspects of the pilot.

The evaluation was funded through to March 2020, to coincide with the pilot funding. At the end of 2019, the evaluation team was advised that the Department for Education (DfE) had extended funding for the Staying Close pilots through to March 2021. This means that the pilot will be running for a year longer than the evaluation. This limits the extent to which the evaluation can consider issues around sustainability, and consider more longer-term effects of Staying Close.
4. Implementation evaluation

Methods summary

The implementation evaluation was conducted over three points during the lifetime of the pilot, in May/June 2018, in February 2019 and October/November 2019. Data were collected in a number of different formats (interviews, workshops, surveys, collation of secondary materials), involving young people accessing Staying Close services in Suffolk, and professionals involved in delivering Staying Close and wider leaving care and housing services in the county. All data were coded in nVivo, and thematically analysed. Both the coding framework and the thematic analysis were common to the five evaluations completed by the evaluation team at Manchester Metropolitan University, for both the interim and final evaluation reports.

Findings

The Staying Close offer

The Staying Close offer combines accommodation and tenancy support. The offer often involves Suffolk Staying Close acting as financial guarantor for tenancies to increase the likelihood of securing tenancies. Further, Suffolk has developed partnerships with housing providers including private, registered provider and local authority ‘landlords’. This has allowed Suffolk to acquire housing for use as Staying Close accommodation and access to housing offers for young people to take on as their own tenancies.

In addition to offering financial support, Suffolk Staying Close also offer emotional and practical support. This includes help with problem solving, debt and financial management, and developing living skills. Staff emphasise the importance of easy access to support and a personalised support offer that meets individual needs. Further, this provides reassurance to housing providers that the young people have sufficient support to maintain their tenancy enabling further housing options. Housing partners also provide housing related support both in the form of training, emotional, and practical support when needed, for example in the case of a leak or boiler break down. Getting Ready for Independence (GRIP) training is provided in partnership between Staying Close and one of the semi-independent housing providers. This includes managing a tenancy (for example tenancy rights and paying bills on time), work and money (employment opportunities, applying for benefits and budgeting) and looking after a household (for example, laundry, changing a light bulb or fuse and cooking).

The wider support package offered by Suffolk Staying Close centres around ensuring a trusted relationship with young people in transition from the children’s home. Young people can choose from whom they receive support. This person could be either be a member of the Staying Close team or a member of staff from the the children’s homes. The choice that is enabled through a ‘hybrid’ staffing model where Staying Close staff are also qualified and employed to act as staff in the children’s homes. A young person can
then identify a member of staff from the children’s home that they would like to receive support from. A member of the Staying Close staff can go into the children’s home to work in the place of that staff member to allow them to go out to support the young person. The Staying Close team ‘backfill’ for the home staff or directly provide support, often having developed relationships with the young people.

**Expectations and experiences**

This evaluation has found (based on our analysis of the views of young people, staff and wider stakeholders given in various ways at different points in the evaluation) that Suffolk have emphasised the need for personalised and flexible support for young people. For example, Suffolk Staying Close’s partnerships with different housing providers mean that young people can be offered choice around accommodation. This includes both the location and whether they would like to share accommodation with peers who are also transitioning from residential care. Furthermore, in a change to the original funding proposal to the Department for Education, young people do not need to select just one worker to provide support but can receive support from a number of different workers depending on who they feel will best meet a particular need. One young person explains their choice about who supports them:

“I think I just wanted to stay in contact with [SC worker from Children’s home] because he’s very good at getting stuff done and I found he’s been the most helpful sort of person throughout the care system.” (Young Person 6, peer interview)

Interviews indicated that young people particularly valued the informal aspects of the support, having someone to talk to and knowing that someone cares, reporting good relationships with their Staying Close workers:

“He supports me in career and sometimes he checks in with me, to know how I’m feeling, that support there has been a lot, just knowing that someone out there actually cares, actually makes my day a bit better” (Young Person 8, peer interview)

Through this flexible offer, staff report that they found that young people did not always want to ‘stay close’ to the children’s home geographically, sometimes preferring to be close to family, friends, college or work. For this reason, Suffolk Staying Close now refer to ‘Being Close’ rather than ‘Staying Close’ to reflect being close emotionally and that a young person does not needing to remain near the children’s home to access the support and accommodation offer.

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4 Note, young people may wish to share with friends that are non-care experienced. However, this would involve the young person making their own arrangements.
The information provided to young people prior to accessing Staying Close is key to assisting expectations. Whilst most young people demonstrated a good understanding of the project, in some interviews young people stated that they did not always feel fully informed about Staying Close:

“I think I was confused as to how it would affect me, I guess, or how it… What I’d gain from it, how it’d help me.” (Young Person 6, peer interview)

Over the course of the evaluation, young people were clear that a valued aspect of the Staying Close offer was being able to choose accommodation located near their networks, including other residents and staff but also family and friends. As one young person’s comment illustrates:

“It has allowed me to stay close because the furthest person is five miles up the road and the nearest one is two minutes round the corner.” (Young Person 10, peer interview)

The survey responses showed that young people value the continued support as 7 out of 11 respondents highlighted this as the best thing about leaving care services in free text responses, with interviews elaborating on how young people recognise the way staff were dedicated to giving them support and helping them succeed. In other free text survey responses, young people that they valued the accommodation which allowed them to maintain family and social connections. This conclusion also reflects the findings from interviews.

Staff articulated their previous experience as being key to their ability to work in Staying Close. Staying Close staff hold NVQ qualifications for working in children’s homes but also bring a mix of skills from previous roles in children’s social care and working with adults in housing and mental health. Staff were experienced in working with young people and mostly knew the young people, having worked with them in children’s homes but still found they had to develop a new role:

“I felt prepared for it but it was a little bit weird at the start. Because you were almost, like, sort of creating and developing the role as you went along. And linking up with, building relationships with other professionals and young people.” (Staff 2, MMU interview)

The evaluation team is not aware of any specific training being provided for working on Staying Close. Instead, the staff were offered ongoing professional development through the local authority. Examples given included safeguarding; working with children and young people; drugs and alcohol; first aid; lone working and de-escalation, but it was indicated that there is an extensive range of training that can be accessed as required.
It was reported that staff who had been working in children’s homes for a long time did not always expect to be involved in work to prepare young people for leaving care and supporting them when they moved on. As such, providing formal emotional support involved a culture change for some staff and other professionals. The staff interviewed did not suggest they had experienced difficulties with this change but some children’s home staff and professionals were referred to as seeing young people receiving support from children’s home staff as a ‘backwards step’ rather than helping the young person towards independence.

**Transition as a journey**

In interviews, staff articulated that starting work on transition earlier was a key strength of the Staying Close offer. At the start of the pilot, conversations about accommodation and support options with Staying Close staff began six months prior to leaving care but now begin eighteen months to two years before young people will be required to move. Staff report that this can help reduce anxiety through the preparations and conversations that reassure the young person about the continued Staying Close support:

> “The young person has to leave before their 18th birthday, so it’s quite a big thing, really, you know. Once they get to 16 and that clock’s sort of ticking. And they’re very aware of that as well, you know.” (Staff 1, MMU interview)

Young people had different experiences of their transition out of children’s homes. Some research participants discussed the difficulty of moving to accommodation without 24-hour support. For some young people, the initial move was still quite difficult even though they had discussed the transition. For others, multiple placements throughout their care experience made the transition like any other move. As one young person commented in a peer interview:

> “If you have been in the system as long as I had you generally don’t think about it. You just think, oh, ‘It’s another change,’ like its just procedure. So it’s not I couldn’t really think anything different of it, it’s just something else.” (Young Person 9, peer interview)

Sometimes young people moved out of the children’s home but realised that they were not quite ready, highlighting the need for Staying Close support:

> “I felt like I was ready but then once I actually moved in I don’t actually think I was ready but it is now…I am now where I am and I think I just got thrown in at the deep end a little.” (Young Person 10, peer interview)
Staff articulated that the aim is for support to tail off to provide a gradual transition into independent living. One staff respondent referred directly to this as having reduced the ‘cliff edge’ for young people leaving residential care.

**Implementation successes and challenges**

Suffolk Staying Close had a range of successes and challenges over the lifetime of the pilot. Their offer has adapted and developed in response to these challenges. In particular, discussions around appropriate governance arrangements needed to support the pilot resulted in the inclusion of the Head of Corporate Parenting as chair of the strategic board and the operational group including key partners. This has supported the Project Lead in implementing the Staying Close pilot. Furthermore, staff interviews indicated that this assisted with strategic planning and developing partnerships.

Across interviews and surveys for young people and staff, the lack of housing was cited as a barrier to young people having choice in where they lived or whom they lived with. This was reported to be due to the cost and availability of housing in the county. The impact of housing availability on choice also resulted in difficulties some young people experienced with co-habiting, such as shared bills and cleaning responsibilities. However, sharing accommodation was reported by young people and staff to help in reducing isolation, and one staff member commented that it helps young people learn to manage social behaviour.

Availability of housing is, to some extent, out of the control of staff and continues to present a challenge to implementation. However, Suffolk have successfully partnered with housing providers, which staff report has allowed opportunities to be realised that would not have been otherwise:

“A young man’s aspiration was to live in a one bedroom flat with a sea view. Around 3 months ago he moved onto his flat.” (Staff 2, MMU interview)

Furthermore, staff reported that these partnerships along with the guarantor scheme could help young people secure and maintain tenancies. For example,

“One said they were paying their rent, but then we heard she was taken to court for non-payment of rent. Because we got involved quickly, we managed to go to court and stop the eviction straight away.” (Staff 2, MMU interview)

Through the partnerships, Staying Close workers became aware of issues developing and were able to intervene to prevent eviction and possible homelessness.
Beyond the issue of housing, interviews with staff highlighted issues with staffing. In particular, existing vacancy issues in children’s homes affected the recruitment of Staying Close key workers. In order to provide the capacity needed to provide support to each young person in transition, Suffolk developed a hybrid staffing model where Staying Close staff are qualified and employed to work in the children’s home to allow children’s home staff to go out and support a young person if they have been identified as the chosen key worker:

“Part of the role is also working in the home, so I’ve like backfilled, or what they call backfill, at [children’s home]... they might have, you know, that young person might want to see that particular person for whatever reason, if they’ve got a more trusting relationship with them.” (Staff 1, MMU interview)

This has allowed support to be bespoke and it has given choice for young people. In reviewing the findings of the research, young people were keen to stress that the choice of worker/s was key in maintaining flexible relationships, smoothing the move into supported accommodation and their personal development in college and work. In the development of the theory of change, part of the pathway towards positive relationships was a strength-based, positive approach to risk. The findings indicate that this has been implemented in terms of the freedom that young people experienced and valued by young people. In particular, being able to increase and decrease the amount of support to suit individuals was described by one young person reviewing the findings as ‘brilliant’.

Staff raised in interviews that the flexibility of the support offer could present challenges in terms of how available staff are for young people and the need to maintain some boundaries. One member of staff stated that:

“They can’t be overly available to the young people. How far down that line do you go? It’s keeping some distance as well. We picked this up in our working group. We tried to work it through with our working group to see how we can developed this.” (Staff 2, MMU interview)

Documentary evidence provided by the pilot suggests that this issue was something that the Staying Close operational group are aware of and are developing strategies around.

**Relationships between professionals and agencies**

There is evidence to suggest that the Suffolk Staying Close programme has successfully built relationships with other professionals and agencies. This is particularly evident in their success in developing housing partnerships. However, staff report that they have developed positive working relationships with other agencies involved in the young people’s lives. District and borough councils in the county were supportive, providing accommodation and recognising the way that the aims fit in with strategic priorities. Other professionals, such as local authority representatives and housing partners, also
acknowledge good communication, but the understanding of roles and responsibilities can still be ambiguous. Staff interviews demonstrate that through collaborative working, an unintended outcome has been the raising of awareness among professionals and agencies, particularly in housing, about the support needs of young people leaving care.

This inter-agency working is particularly important as young people often have a mix of support that they use in different ways, as illustrated by one member of staff’s comment:

“You need experience of implementing multi agency programmes, knowledge across the piste, or knowing who to go to.” (Staff 2, MMU interview)

One staff interviewee explained that Staying Close staff become the main contact for young people to go to first, due to the relationship Staying Close staff have with young people. Staying Close workers liaise on behalf of the young person to ensure support is in place, for example in relation to education or tenancy, while supporting them to make more direct contact as they become more independent and learn who provides the relevant support. Therefore communication and information sharing with other agencies is particularly important as part of the pathway planning process. Work with Personal Advisors is ongoing to improve clarity about roles and responsibilities for professionals and young people. Furthermore, partnerships have enabled holistic support, for example through the development of print workshops to support mental health, where young people create a piece of artwork for their new home.

Innovation

This research suggests that Staying Close in Suffolk has provided more innovative ways of dealing with the accommodation needs of young people. This includes the wider housing options made possible through the guarantor offer and the new housing partnerships. This has allowed young people to have a stepping-stone before moving on to arrangements that are more independent. Staff argue that the various provisions of shared accommodation allow for peer support and the continuation of relationships through young people being placed together when they move on from the children’s home. One young person explains:

“It’s just nice to talk to someone, like even if you’re the moodiest person in the world; it’s just nice to have someone to talk to.” (Young Person 9, MMU Interview)

The support offer is also innovative in the formalisation and consistency of continuing support for young people transitioning from care. Some contact may have been maintained prior to Staying Close, but this would not have been for all young people or consistent in nature. While support for young people leaving care is a statutory duty for the local authority, this contact with children’s home staff relied on staff good will and
availability. The pilot has allowed more systematic planning for independence and support in the transition to adulthood and more independent living.

Limitations

The research presented here represents three snapshots, of young people’s, staff, and wider stakeholders’ perceptions, at different points in the implementation of Staying Close in Suffolk. It draws on a limited number of interviews and surveys. It is cognisant of wider changes in the leaving care landscape in the county, but is focused specifically on one part of this system.

Conclusions

Staying Close has been successfully implemented in Suffolk. It is making a significant contribution to the leaving care system in the county, and is valued by young people accessing this type of support. The key strength of the support offer is the continued and trusted relationships that young people develop with staff. It is clear that the Staying Close offer has developed and changed to reflect local needs, along with the feedback from young people and ongoing learning from the implementation. The flexibility of the accommodation offer and partnerships with housing providers has been a key part of implementation. The Staying Close team has worked hard to ensure that young people not only access, but also maintain suitable accommodation, including some innovative and effective practices and choice for young people. The role of Staying Close as guarantor has prevented eviction and secured property for young people who might otherwise have been refused a tenancy. This opportunity, combined with the provision of practical tenancy training and independent living skills, means that young people can benefit from transitional housing and support. Ongoing collaborative work between personal advisors and Staying Close workers in supporting young people includes making sure they are clear regarding who is doing what to support them, however, this needs to be further developed. Finally, young people are given choice, agency, and voice through their involvement with Staying Close in individual choices about their support and accommodation and co-production of the wider developing offer. The pilot provides flexible and needs-based support to young people as they transition from children’s homes to independent adulthood and provides a more gradual transition. The project has learnt from the barriers to implementation and has amended the offer in response to the challenges and the needs and wishes of young people.
5. Outcomes evaluation

Methods summary

There are two elements to this part of the evaluation. First, data provided by the Suffolk Staying Close team were analysed to understand the distance travelled by individuals accessing Staying Close in the borough in a number of key outcome areas. Secondly, the evaluation team used contribution analysis (Mayne, 2011) to assess whether Staying Close could contribute to the outcomes expected from the programme.

Contribution analysis

To understand the outcomes achieved in Suffolk, we used an alternative form of impact evaluation called contribution analysis (Mayne, 2011). Contribution analysis is a structured approach to understanding and evidencing whether, and to what extent, observed changes in outcomes are a consequence of the intervention being evaluated. It is designed specifically for interventions such as those being evaluated here, as it is designed to assess the impact of in areas of causal complexity. The aim of contribution analysis is to provide a credible, evidence-based narrative of the contribution that an intervention makes to changes in outcomes, and how and why it works in this way. It can also be used to examine whether these changes might have been the result of other interventions or activities other than the evaluand (although this is outside the scope of this evaluation). It is a theory-driven approach; a key part of contribution analysis is to set out the outcomes that are expected to arise from the intervention, and how – the pathways or causal mechanisms by which – the intervention is intended to work. As such, developing a theory of change of the evaluand is an important first step in undertaking contribution analysis (Delahais and Toulemonde, 2012).

Contribution analysis is undertaken in six steps (Mayne, 2001). Table 3 sets out these six steps, how each steps has been undertake in this evaluation, and what types of data (whether or not these data were generated by this evaluation) were used to address each step.
<table>
<thead>
<tr>
<th>Step</th>
<th>Explanation</th>
<th>Data/evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Set out questions to be asked</td>
<td>The research questions that underpin the evaluation. These were set out in the original proposal to DfE and are given in chapter 3 of this report.</td>
<td></td>
</tr>
</tbody>
</table>
| Develop theory of change                       | An initial theory of change was developed by Suffolk County Council as part of its bid for funding for the pilot. This was reviewed and further developed through a theory of change workshop during the scoping phase of the evaluation. Further work has been done by the pilot. | Evaluation theory of change dated August 2018  
Theory of change workshop                                                                                              |
| Gather existing evidence                       | The evaluation team completed a structured literature review to identify empirical evidence around programmes/interventions aimed at supporting young people leaving care as they transition to independent adulthood. This literature review focused on evidence around the policy objectives set by DfE. | Literature review                                                                                                                                                  |
| Assemble and assess the contribution narrative | Drawing on the literature review, the evaluation team assessed whether interventions such as Staying Close might contribute to the outcome objectives set out in the pilot’s theory of change. There were four outcomes from this assessment: (1) strong evidence, that is it is plausible that an intervention such as Staying Close could contribute to the expected outcomes (2) weak evidence, that is there is some evidence to suggest it might be plausible (3) there is no | Theory of change identifies the outcomes expected from Staying Close in Suffolk  
Literature review used as evidence to examine the plausibility of Staying Close making a contribution to outcomes in these areas |
<table>
<thead>
<tr>
<th>Step</th>
<th>Explanation</th>
<th>Data/evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>evidence to suggest it might be plausible (4) there is evidence to suggest that it is not plausible⁵</td>
<td>Distance travelled analysis using monitoring data supplied by Suffolk Staying Close Interviews, surveys, and documentary analysis conducted through the evaluation</td>
</tr>
<tr>
<td>Gather extra evidence</td>
<td>This stage examines whether changes in outcomes were observed, and whether evidence generated through the evaluation suggests that Staying Close might have made a contribution to these observed changes</td>
<td></td>
</tr>
<tr>
<td>Conclude the contribution narrative</td>
<td>Taking all of the evidence together – the extant evidence about interventions similar to Staying Close and the evidence generated about Staying Close in Suffolk – is it plausible to conclude that Staying Close contributed to the changes in outcomes observed?</td>
<td>Synthesis of steps 3, 4 and 5 of this analysis</td>
</tr>
</tbody>
</table>

⁵ It is important to stress the difference between no evidence of plausibility and evidence that it is not plausible. The former is an assessment of the evidence base; a lack of evidence means that it it is not possible to examine the likely efficacy of the intervention. The latter is about the intervention itself; that the existing evidence suggests that the intervention will not achieve or contribute to the outcomes expected of it.
Findings

Existing evidence base

The evaluation team undertook a structured literature review, examining empirical literature around the outcomes expected and achieved from programmes or interventions targeted at supporting young people as they transition from care to independent adulthood. This literature provides a view on whether it is plausible that an intervention such as Staying Close could contribute to positive change in the outcomes expected by the Department for Education and covered by the Suffolk Staying Close pilot.

The evaluation theory of change developed with Suffolk County Council identifies three outcomes. Table 4, below, maps the three Suffolk outcomes to the seven national policy outcomes established by the Department for Education and the findings from the structured literature review. These findings focus on whether the extant evidence (from published, empirical studies) indicates that an intervention such as Staying Close could contribute to positive change in the outcomes expected for young people transitioning from care to independent adulthood. It is an assessment of whether, in theory, there is evidence that it could be effective. This analysis is the third step, ‘gathering existing evidence’, set out in table 3. Further information regarding the literature used for this analysis is provided in Appendix 2.
Table 4: Does the extant evidence suggest Staying Close contributes to expected outcomes

<table>
<thead>
<tr>
<th>Pilot outcome</th>
<th>DfE outcome</th>
<th>Plausibility assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feeling safe and supported</td>
<td>Report good social connections</td>
<td>Strong evidence</td>
</tr>
<tr>
<td></td>
<td>Are resilient to unsafe behaviours</td>
<td>No evidence⁶</td>
</tr>
<tr>
<td>Achieving Wellbeing</td>
<td>Have good emotional health, wellbeing and resilience</td>
<td>Weak evidence</td>
</tr>
<tr>
<td></td>
<td>Are physically healthy</td>
<td>No evidence</td>
</tr>
<tr>
<td>Maintaining Independent Living.</td>
<td>Education, Employment and Training (EET)</td>
<td>Weak evidence</td>
</tr>
<tr>
<td></td>
<td>Readiness for Independent Living</td>
<td>Strong evidence</td>
</tr>
<tr>
<td></td>
<td>Are in accommodation that is safe and suitable</td>
<td>Strong evidence</td>
</tr>
</tbody>
</table>

Having used the existing evidence base to assess whether an intervention such as Staying Close might, in theory, contribute to the outcomes expected by the Department of Education and the Suffolk Staying Close pilot, the next stage of the analysis was to examine whether changes in outcomes were observed, and whether evidence generated through the evaluation, suggests that Staying Close might have made a contribution to these observed changes. This stage of the analysis draws on two types of evidence. The first examines whether there has been positive change in the relevant outcomes. Data provided by the pilot have been analysed to identify the distance travelled by young people accessing Staying Close support. The second part of this analysis draws on the extant evidence, the interviews, workshops, surveys, and case study work undertaken throughout the evaluation to develop a contribution narrative about Staying Close in Suffolk.

⁶ It is important to stress that this is an assessment of the available evidence. It does not mean that Staying Close cannot contribute in this area; simply that there is no evidence that is directly relevant and from which an assessment could be made.
Distance travelled

The Suffolk Staying Close team provided data in March 2020. The data that was provided on a sample cohort of n=25 of the n=40 young people accessing Staying Close in the county in March 2019 form the basis of the distance travelled analysis presented here. Outcomes were measured at three points, over the period March 2019 to March 2020. These data were analysed to measure the distance travelled by the cohort, against the outcomes expected by the pilot and identified in the evaluation theory of change. Further explanation of these data, is provided in Appendix 2 of this report. These findings are summarised in Table 5 with further detail below.

Table 5: Distance travelled by young people accessing Staying Close in Suffolk

<table>
<thead>
<tr>
<th>Pilot outcome</th>
<th>DfE outcome</th>
<th>Evidence of positive change in outcomes</th>
</tr>
</thead>
</table>
| Feeling safe and supported        | Report good social connections  
                                  | Are resilient to unsafe behaviours                                                   | No data provided  
                                  | The data suggest, that there has been a reduction in these behaviours/issues over the twelve-month period to March 2020. |
| Achieving Wellbeing               | Have good emotional health, wellbeing and resilience  
                                  | Are physically healthy                                                               | No data provided  
                                  | No data provided                                                                                      |
| Maintaining Independent Living    | EET  
                                  | Readiness for Independent Living  
                                  | Are in accommodation that is suitable and stable                                           | Positive progress in relation to the education, employment, and training outcome with an increase in the number of young people reported to be in EET during the monitoring period.  
                                  | Data were collected on missing from home episodes until the young person was 18. The data do suggest that there has been a drop in incidence (the number of times young people went missing) but it is not possible to determine whether there was a drop in prevalence (number of the cohort) who went missing from home at least once. |
Distance travelled: are resilient to unsafe behaviours

The Suffolk data includes counts of the number of the n=25 cohort reporting or identified with: (1) suicidal thoughts; (2) alcohol use; (3) drug use; (4) bullying and harassment; (5) being subject to domestic abuse; (6) risk of sexual exploitation; (7) anti-social behaviour; (8) violent behaviour; (9) involvement with gangs at presentation, four months, and twelve months. The data was provided by the scheme about each young person but it is not clear from whether these are self-reported data, or observation data collected by Staying Close staff or other staff from within the leaving care system in the county. Table 8 presents these data.

Table 6: Counts of young people presenting with issues of safety/resilience at presentation, four months, and twelve months (n=25 at presentation)

<table>
<thead>
<tr>
<th></th>
<th>Suicidal thoughts</th>
<th>Alcohol use</th>
<th>Drug use</th>
<th>Bullying and harassment</th>
<th>Subject to DA</th>
<th>Risk of sexual exploitation</th>
<th>Anti-social behaviour</th>
<th>Violent behaviour</th>
<th>Involvement with gangs</th>
</tr>
</thead>
<tbody>
<tr>
<td>At presentation</td>
<td>8</td>
<td>7</td>
<td>16</td>
<td>4</td>
<td>6</td>
<td>9</td>
<td>17</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>After 4 month intervention</td>
<td>2</td>
<td>4</td>
<td>8</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>After 12 months</td>
<td>0</td>
<td>4</td>
<td>6</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>

It is not known how many of the n=25 cohort at presentation were still engaging at four months or at twelve months, and it is therefore not possible to estimate the proportion of the cohort with each of these issues. It is also not clear whether these data are based on self-reporting or on observation by professional staff. The data do suggest, however, that there has been a reduction in these behaviours/issues over the twelve-month period to March 2020.

Distance travelled: education, employment or training outcome

Of the n=25 people from March 2019 for whom data were collected, 17 (n=17/25) were not in education, employment or training (NEET) and 8 (n=8/25) were in some form of education, employment or training. At four months, 15 (n=15) were NEET, and at twelve
months, 12 (n=12) were NEET. The Suffolk team has also noted that of those reported as NEET in March 2020, 6 (n=6/12) have been supported to secure placements but have lost them due to a variety of reasons including mental health, inability to commit to study/work, geographically moving out of the area. At least 7 (n=7) young people are waiting to go back into education, volunteering posts, work, apprenticeships with Staying Close support. Only one young person is not engaging so their education/employment status is unknown. Two young people are pregnant, and one is caring for her child.” (Suffolk County Council, 2020a). From these data, we conclude that there has been positive progress in relation to the education, employment, and training outcome for the twenty-five young people for whom data were collected.

**Distance travelled: missing episodes**

Data was provided on the number of times Staying Close service users aged 18 and under went missing from their accommodation. These data relate to the n=25/40 cohort from March 2019, and are presented in table 7.

<table>
<thead>
<tr>
<th>Number of episodes</th>
<th>0 – 10</th>
<th>11 - 20</th>
<th>21 – 30</th>
<th>31 - 40</th>
<th>41 - 50</th>
<th>70 - 100</th>
<th>100 +</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year to March 2019</td>
<td>9</td>
<td>8</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Year to March 2020</td>
<td>5</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

These data suggest that in the year to March 2019, each one of the n=25 cohort for whom these data were collected went missing from home on at least one occasion. In the following year, 3 (n=3/25) of the cohort reached the age of 18 and missing from home data were no longer collected. Some individuals also ceased to engage or dropped out from Staying Close, although we do not know how many in total. It is therefore not possible to determine whether there was a drop in prevalence (number of the cohort) who went missing from home at least once, although the data do suggest that there has been a drop in incidence (the number of times they went missing).

The distance travelled analysis suggests there are two outcomes areas where a positive change in outcomes is evidenced. One is in feeling safe and supported through the improvements in resilience to risk. The other is maintaining independent living in the improvements in education, employment and training and the reduction in missing episodes.

**Contribution narrative**

To establish if Staying Close in Suffolk can make a positive contribution to outcomes, the plausibility from extant evidence and the evidence of distanced travelled (change in outcomes) has been considered. The second part of this analysis draws on the interviews, workshops, surveys, and case study work undertaken throughout the evaluation to develop a contribution narrative about Staying Close in Suffolk.
**Mechanisms**

The mechanisms identified in the Theory of Change are ‘feeling empowered’ and ‘developing confidence’. There is some reference to these mechanisms in the interviews with staff and young people, for example, one young person states:

“…my confidence and self-esteem have skyrocketed.” (Young Person 8, peer interview)

And in explaining the involvement that young people have in planning, a staff member explains:

“…it kind of empowers them, they’re part of the planning about what it might look like for them…” (Staff 4, MMU interview)

Giving agency to young people through providing appropriate accommodation in which to feel safe to develop and test practical skills for independent adulthood has increased confidence and been instrumental in the development in housing and living skills, education, employment, and training, and other areas. It is clear from the interviews, surveys, and workshops undertaken as part of this evaluation that strong, positive, and supportive relationships between Staying Close staff and young people are key in improving outcomes. Feeling safe and supported, which is described as an outcome, is therefore also a mechanism through which other outcomes are achieved, including education, employment and training, readiness for independent living and wellbeing and facilitates the mechanisms identified of feeling empowered and developing confidence. In turn, the mechanisms of feeling empowered and developing confidence have, therefore, become interim outcomes for young people.

**Feeling safe and supported**

A review of the extant literature found that positive outcomes were more likely if there was consistency of relationships with trusted adults through the transition into adulthood and beyond (Swan, Holt and Kirwan, 2018). Having experienced discontinuity throughout care, a pattern of transiency develops which can continue into leaving care and adulthood, affecting relationships (Ward, 2011). Care experienced young people have been found to value relationships where there is a form of informal support that makes the young person feel genuinely cared for (Brown et al, 2019; Ridley et al, 2016; Wade, 2008).

This evaluation analysed outcome data collected by Suffolk Staying Close. These data do not directly measure overall progress against this outcome, but do include measures in terms of a number of unsafe behaviours, which overall suggests a reduction in these behaviours over the period March 2019 to March 2020. Data collected by the evaluation team through interviews, workshops and surveys, and through the peer interviews, provides some evidence from which an assessment can be made.
The continued support from a Staying Close worker who usually has an established relationship with the young person has been the key support activity as identified in interview data. Often informal in nature, the feeling that someone genuinely cares was powerful in making a difference for young people:

“…..that support there has been a lot, just knowing that someone out there actually cares, actually makes my day a bit better….” (Young Person 8, peer interview)

Young people’s survey responses refer directly to feeling supported and no young people reported feeling unhappy with the support. Interviews with young people make it clear that they feel supported. Support through transition was ranked as the most important outcome by all 6 respondents to the staff survey. Most staff felt this was being achieved (n=4/6) and that it would have been less likely without the Staying Close intervention (n=5/6).

Successful transitions are more likely to occur if positive relationships have been built with peers and family members too (Martikke et al., 2019; Stein and Morris, 2009). The young people’s survey shows most respondents (n=9/11) felt happy with their relationship with family and friends. Interviews illustrate contact with family and social groups is important for young people and is facilitated through the Staying Close accommodation offer as young people can choose to be located near their networks.

Staff gave examples of the support offer improving the safety of young people including reduced self-harm, reduced anxiety and being able to intervene in a crisis to prevent more serious consequences such as eviction. The extant evidence does not provide any basis to suggest that it is plausible that the support has led to these outcomes; equally, it does not suggest it is implausible. Young people do not refer directly to feeling safe but do express their fears about what would have happened to them without Staying Close support. Young people responding to the survey mostly feel safe (n=10/11) suggesting that there are positive outcomes in relation to feeling safe.

Drawing on the extant evidence, the outcome data in relation to unsafe behaviours, and data generated through the evaluation, we can conclude that Staying Close could contribute to a positive change in the outcome of feeling safe and supported in relation to young people reporting good social connections. We also conclude that Staying Close may have contributed to positive change in this outcome in relation to resilience to unsafe behaviours, noting the lack of extant evidence demonstrating that interventions similar to Staying Close might be effective in this area.

**Achieving Wellbeing**

Our review of the extant literature found weak evidence that interventions similar to Staying Close should be able to contribute to positive change in this outcome. Dixon (2008) highlights that relationships and improved mental health can result in better physical health outcomes. Mental health and wellbeing is often overlooked in favour of
other outcomes such as EET (Ferguson, 2018). Mental health often underpins other issues such as not being in employment, education and training (Akister, Owens and Goodyer, 2010; Sims-Schouten and Hayden, 2017). A compressed transition can compound feelings of distrust, isolation, instability, powerlessness and abandonment, affecting engagement with services (Butterworth et al, 2017). Trusted relationships can limit avoidant and defensive responses and the development of informal support can help avoid loneliness and exclusion, which compounds mental health issues (Ferguson, 2018; Rahamim and Mendes, 2017). Research points to a need for a gradual transition from children’s services with an accelerated transition being detrimental to outcomes (Ward, 2011). Good preparation for leaving care is protective of mental health where leaving early is a risk factor (Akister, Owens and Goodyer, 2010).

The pilot did not collect data around wellbeing, and it is therefore not possible to determine whether there was positive change in this outcome for young people accessing Staying Close in the borough. The qualitative data collected by the evaluation team does provide some insight. Interviews with young people indicate that Staying Close enhances mental wellbeing through support from Staying Close and from peers in shared accommodation. There was overall agreement in the staff survey that health and wellbeing was an intended outcome of the pilot though it was not seen as the most important objective. Staff agreed that positive change in this outcome was being delivered, which would be less likely to be achieved without Staying Close. Interviews with staff and stakeholders give examples of a reduction in self-harm, improved healthy eating and improved mental health and anxiety. Support through transition is raised as having a positive impact.

Given all of this, we conclude that the Suffolk Staying Close pilot should be able to contribute to mental health and emotional wellbeing outcomes but there is no evidence to suggest that there is or is not a contribution to physical health. The key facilitator for improved wellbeing identified in both extant evidence and the evaluation data is the support that enables a more gradual transition.

Maintaining independent living

The extant evidence (Häggman-Laitila, Salokekkilä and Karki , 2019; Liabo et al., 2017; Stein, 2006) suggests that if young people experience stability and access training at their own pace and according to their needs, they are better able to develop independence skills. Gradual transition, which slowly gives young people more autonomy and responsibility over living independently, can foster skills in a supportive and safe environment (Rashid, 2004; Quinn et al., 2017). This also prevents the exacerbation of mental health and behavioural difficulties through premature transition, which affects the ability to deal with everyday tasks (Badawi, Mendes and Snow, 2014).

If young people have the opportunity to stay longer in care, until they have completed courses (Del Valle et al., 2008; Quinn et al., 2017), this can reduce the instability and uncertainty that may come with transition which can disrupt achievement in education or training (Munro et al., 2012) this can contribute to improved EET outcomes. EET can also
be facilitated through supporting attendance and attainment in education, assisting young people to identify and plan future employment or vocational pathways, and find university sponsors (Children of the Andes, 2010). EET can then facilitate an easier transition into adulthood through practical skills and resulting financial independence (Dutta, 2017; Häggman-Laitila et al., 2019).

This evaluation has found some evidence around this outcome. The pilot’s theory of change includes engagement in education, employment, and training as contributing to maintaining independent living. The distance travelled analysis showed positive progress in relation to the education, employment and training outcome for the n=25 young people for whom data were collected, as the number of young people in education, employment and training increased.

Staying Close accommodation has provided a stepping-stone where young people can develop living skills, which provides a more gradual transition to independence. Staff interviews contrast the way the support and accommodation offer have prevented evictions with examples of young people moving on prior to the pilot who struggled to maintain independent living. There is some evidence in the distance travelled analysis that missing episodes reduced for the young people supported suggesting more stability in their accommodation. In the staff surveys, measures relevant to the outcome of maintaining independent living showed this was an objective of the pilot and that positive change was being delivered that would have been less likely without Staying Close.

Young people report becoming more confident in independent living in concordance with the theory of change. ‘GRIP’ independence training is part of a co-produced support plan and young people reported that they found this useful. Young people and staff explained in interviews that conversations as part of the continuing relationships helped develop the aspirations of young people and helped them to stay in education where this may have broken down.

We conclude that the Suffolk Staying Close pilot could and has contributed to maintaining independent living. Gradual transition and continuing relationships are key to positive outcomes and the extant evidence supports this.

**Limitations**

There are two limitations to highlight here. The first relates to extant evidence on interventions and programmes design to support young people as they transition from children’s homes to independent adulthood. There is a lack of empirical evidence that identifies that factors that affect successful transition or that identifies the effectiveness of different types of programme or intervention. The evidence of impact and effectiveness that does exist is largely drawn from US studies and not from studies from here in the UK. This means that the first analytical stage of the contribution analysis – where it is plausible that an intervention like Staying Close might contribute to positive change in outcomes – is based largely on US evidence, as there is a lack of UK evidence around
the impact of interventions such as Staying Close. This means that the evidence that does not take account of the UK context, legal framework, or care landscape, which raises questions about the extent to which these findings are applicable in the UK (Atkinson and Hyde, 2019).

The second limitation is around the distance travelled analysis. The data provided were limited, as they did not cover all of the outcomes expected within the theory of change. Therefore, conclusions drawn around this data are limited. We make a recommendation about this in the ‘conclusions and recommendations’ chapter of this report.

**Conclusions**

The significance of the Staying Close worker providing a trusted and continued relationship in enabling change was clear in the contribution analysis. This enabled young people to develop confidence and feel more empowered (which were the identified mechanisms) through a more gradual transition. This in turn has led to improved outcomes according to the interviews and surveys with young people and staff.

The contribution analysis presented here suggests that the Suffolk Staying Close pilot has made a contribution to positive outcomes in relation to feeling safe and supported, emotional wellbeing and maintaining independent living. However, there is only evidence that change has been achieved in terms of distance travelled in three areas that relate to two of the overall intended outcomes. In relation to feeling safe and supported, there was an improvement in resilience to unsafe behaviours. In relation to maintaining independent living, there was improvement in EET and the stability of accommodation. No monitoring data was provided in relation to achieving wellbeing so we are unable to draw conclusions about the extent to which outcomes were improved. We make a recommendation about the collection of outcome data in the ‘conclusions and recommendations’ chapter of this report.
6. Voice of young people

Methods summary

A key aim of this evaluation was to give a voice to young people leaving, or preparing to leave, residential care in Suffolk. Young people were involved in the design of the evaluation, as peer researchers, as research participants, and by involving young people in the co-production of the conclusions and recommendations arising from this research.

The views of young people have been integrated with those of other research participants in the findings of this evaluation, and have been particularly important to the findings around the sections on the Staying Close offer and expectations and experiences in both this and the interim report. In this section, we focus on two further aspects of the voice of young people; the role that co-production has played in the pilot, and the outcome of a workshop with young people to discuss and validate the findings of this evaluation, and to co-produce the conclusions and recommendations made here.

Findings

Voice of young people in Suffolk

Co-production was highlighted as a key feature of the implementation and has been a part of developing the offer since the start of the pilot. Young people’s social groups are held bi-monthly and open to all young people involved in Staying Close. These groups have provided an opportunity for staff to invite feedback and this operated as a co-production session where new ideas could be shared. One member of staff highlights how these groups are also developing networks for young people providing ongoing peer support. One young person reports:

“I trust that something’s going to happen when I voice my opinions about something” (Young Person 6, peer interview)

Not all young people felt they were aware of formal co-production opportunities. As Suffolk Staying Close covers a wide geographical area it may be that not all young people were near enough to events, are not aware of them, or are informed too late. However, it was clear from the interviews that young people felt able to share their views:

“If I have a problem I will always just say something. That’s just who I am. If I have got a problem with something I will say it.” (Young Person 9, peer interview)

Staff used a flexible approach, changing elements of the programme to respond to young people’s feedback. For instance, the programme moved away from the development of a
communication app as young people preferred pre-existing means of communication and adapted so some young people could choose to be supported by different members of staff for different purposes as reported in interviews.

One young person describes how one worker helps with shopping and the home but another,

“My other key worker, helps me with my emotional issues, tries and tells me I’ve got to speak up because I’m a closed book,” (Young Person 8, peer interview)

Young people are aware of their voice and ability to make choices about their support:

“I’ve changed everything I want to change. Like if I wanted to change my support worker I could but I am not going to because I get along with my support worker.” (Young Person 9, peer interview)

There were some discrepancies in the ability to choose key workers, as one young person describes:

“I was just told that was who it was going to be and that was that really. As far as I am aware, it’s only them in the area. That is who there is.” (Young Person 10, peer interview)

Young people also had choice in accommodation and as discussed in the implementation findings section, this was valued by young people as it allowed them to stay close to their network but they did not always have a choice in who they shared accommodation with or if they lived alone. Overall, the Suffolk Staying Close programme has successfully engaged young people leaving care in the co-design of the programme. There was also a constant young person led approach in the flexible support, allowing young people to determine the type and amount of the support they needed. However, access to co-production activities and the choice of key worker/s may be limited for some young people due to the large geographical area covered by the pilot meaning not all young people have had the same opportunity to have a voice.

Voice of young people on the findings, implications and conclusions from this evaluation

The key aim was that the evaluation should give voice to young people leaving, or preparing to leave, children's homes. Giving voice means more than involving young people as research participants; it also means involving them in decisions about the research design (through workshops conducted at the beginning of the evaluation); as researchers (through the peer research part of the evaluation); and by gathering their
views on the findings of the evaluation, and identifying the implications and conclusions that follow from these findings.

Three young people trained as peer researchers in Suffolk and two conducted interviews at other Staying Close projects. The young people involved were keen to contribute to the evaluation to improve services for others:

   “I am just here to help really. So I am here to give people my mind and help them” (young person 9, MMU interview)

The young people involved in the peer researcher gained an understanding of the model and one highlighted the similarities in the way the services were shaped around particular needs:

   “Every area has their own way of going round and doing things but it all works in a very similar manner with different things to take into account for different people in different areas” (young person 10, MMU interview)

Young people not involved in the peer research suggested they would like to be involved in future opportunities to contribute:

   “Some of our young people sort of have a role with the evaluation, so I think they have been trained and then they’ve gone off to do some of the evaluation sessions at the other pilots… They train to interview people, yes, I would like to be asked about that because I weren’t aware of it” (young person 4, MMU interview)

Two young people were involved in reviewing this report and in particular the young person’s summary. They were happy that this accurately represented their experience and were keen to emphasise:

- The choice of worker/s was key in the success of maintaining flexible relationships and smoothing their move into supported accommodation alongside other colleagues for example at college and work.

- The option of increasing and decreasing amounts of support to suit individual circumstances has been ‘brilliant’.

- They enjoyed getting involved in shaping support models and feeling that they can change things as the pilot has progressed.

- That is is good to get their views across to people who actually shape future services for young people leaving care.
They also wanted to highlight:

- There is a lack of choice of accommodation in particular areas.
- They are concerned about ongoing support once the pilot comes to an end.

We have considered this feedback in making our recommendations.

**Limitations**

The evaluation team recognises that the views of young people in this research. During the evaluation 5 young people were interviewed by researchers, peer researchers or both, 3 young people took part in peer researcher training, 2 young people conducted interviews as peer researchers, 5 young people attended a co-production workshop help develop the research tools and 2 young people reviewed this report. Some young people were involved in more than one aspect of the research. As such, consultation on the findings, are not representative of the whole cohort engaged in the Staying Close innovation in Suffolk.

**Conclusions**

Young people participating in this research have had the opportunity for their voice to be included and recognised throughout the implementation of the pilot and the evaluation. In a consultation on the findings of this research, young people highlighted that they enjoyed getting involved in shaping support models and the feeling that they could influence change as the pilot progressed. On their involvement in co-production of the service and the evaluation young people stated that it felt good to get their views across to people who actually shape future services for care leavers.
7. Cost analysis

Methods

The overall aim of this element of the evaluation was to gather information on the cost of the Staying Close Cost pilot that are additional to those costs which would have been accrued had the pilot not been running. Additionality is the guiding principle of cost capture, requiring a comparison of the costs of the pilot to the situation had the pilot not been running.

The objective of the cost evaluation was to provide an assessment of the full cost of the pilot, taking into account direct, indirect and absorbed costs, and by augmenting existing sources of cost data with information based on the experience of those implementing the pilot. This was necessary because a proportion of the costs were absorbed into existing budgets, for example, Local Authority budgets and existing office accommodation provision. Therefore accurate costs could not be obtained from a simple analysis of relevant accounts.

A secondary objective was to comment on the value for money of the Staying Close cost more generally. However, as outlined below, this was far from straightforward due to variations in throughput and the absence of an appropriate counterfactual. As we note below, there is evidence the project may break even, however this is a matter for further research.

The pilot has undertaken its own analysis, using a different method and different outcomes. The findings from this analysis will therefore be different to the findings presented here. The pilot’s analysis can be obtained from Suffolk County Council.

Cost capture methods

The cost capture process involved three methods:

- Cost-capture questionnaires completed by key stakeholders, followed by further liaison as required;
- Triangulation of interview data with existing data sources such as accounts data where available;
- Comparison of quantitative data sources and qualitative interview material to determine the adequacy of coverage of cost points and estimation of the likely missing cost points as required.

Costs captured

The range of costs to captured included:

- Capital costs (such as IT equipment);
- Running costs (rent, utilities, maintenance, insurance, subcontracts and so on);
- Staff related costs (relocation, recruitment, training, salary and time spent);
- Absorbed costs, where the costs of the pilot have been absorbed by cross-subsidy from existing budgets, from existing surplus capacity, or, come from staff goodwill;
- Other costs of Staying Close, for example, briefing groups and transportation.

**Findings**

In Table 8, we provide estimates of the setup and running costs of the pilot. We also provide an estimate of cost per young person on the pilot. The data are relatively limited, unfortunately. There are no data on the setup costs at all, and the data which are available relate to a one-year budget forecast. We have supplemented this with publicly available data on the allocated budget for the project and estimated accommodation data. Once the scheme matured, we understand there were 57 young people engaging with the Staying Close pilot.

This means that:

- Over the period of one year (ignoring setup costs) the cost of Staying Close delivery per young person is £3,551.
- Over the intervention as a whole (to March 2020) and ignoring setup costs, the cost per young person is estimated to be £8,878.
- Over the intervention as a whole, (assuming no cost under- or over-runs) the cost per young person is estimated to be £13,807.
<table>
<thead>
<tr>
<th>Category</th>
<th>Cost</th>
<th>Per annum</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pilot Setup Costs</td>
<td></td>
<td></td>
<td>N/A</td>
</tr>
<tr>
<td><strong>Suffolk 12-month budget forecast expenditure (except where noted)</strong></td>
<td></td>
<td></td>
<td>£202,417</td>
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<tr>
<td>SCC RCCW Cost</td>
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<td>2FTE Hybrid support team</td>
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<td>Expenses and Meaningful Activities</td>
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<td>GRIP Independence programme</td>
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<td>Club Print bespoke art programme</td>
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<td>Transition Move-on’s from Children’s Home</td>
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<td>Co production Lead</td>
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<td>Six month 1 FTE</td>
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<td>Project Manager</td>
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<td>Business Support</td>
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<td>1FTE Continued business support</td>
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<td>Transitional support</td>
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<tr>
<td>Work with young people from outside the county who would like to remain</td>
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<td></td>
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<tr>
<td>Purchased placements and move-on from semi independent accommodation</td>
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<td>Staff accommodation costs</td>
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<td>4·5 FTE</td>
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<tr>
<td><strong>Running costs to March 2020 (estimated)</strong></td>
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<td>£506,043</td>
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<tr>
<td><strong>Total budgeted cost of Staying Close Pilot</strong></td>
<td></td>
<td></td>
<td>£787,000</td>
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</tbody>
</table>

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7 Estimated from https://www.flexioffices.co.uk/suffolk/ipswich
Benfights estimates

The outcomes expected from the Suffolk Staying Close pilot are intended to include:

- Feeling safe and supported;
- Achieving wellbeing;
- Maintaining independence;

Table 9 summarises the potential savings to the state and society (that is, the likely cost to the public purse had the pilot not been running). This analysis suggests that the potential benefits to the public purse of economic costs of poorer outcomes previously experienced by young people leaving care are significant, and therefore there is significant scope (subject to demonstrating the impact of Staying Close, and effective cost savings measures being undertaken) for cost savings.
<table>
<thead>
<tr>
<th>Staying Close Outcome</th>
<th>Cost of alternative provision</th>
<th>Comment</th>
</tr>
</thead>
</table>
| Maintaining Independent Living. | Homelessness £26,000 per year  
Local authority residential care £156,000 per year. | The major cost to society which might be avoided by those young people in the Staying Close pilot, is homelessness. It is estimated that the average cost of a homeless person to the public purse is \(^9\) £26,000 each year. However, a more reasonable alternative to Staying Close might be the cost of Local Authority Residential Care, which may cost up to \(\text{Error! Bookmark not defined.}\) £3,000 per week. It is clear that a few weeks in residential care being averted would see the intervention break even at that rate. |
| Feeling safe and supported | £72,000 lifetime costs of being NEET | It is clear that feeling safe and supported is of major benefit to the young people on the pilot; the benefits to the public are less clear. Hence we proxy this with the benefits of achieving suitable educational outcomes.  

The exchequer costs of a young person who is NEET, that is to say, not in education, employment or training, over the course of their life have been estimated to be \(^{10}\) £72,000. The cost to society as a whole, including to the young person, has been estimated to be \(^{10}\) £133,500. The cost is increased by nearly 100% if we compare the average life outcomes of a NEET young person with the average outcomes of a graduate (on average). |

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<table>
<thead>
<tr>
<th>Staying Close Outcome</th>
<th>Cost of alternative provision</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Achieving wellbeing</td>
<td>Cost of A&amp;E per visit - £129</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cost of a visit to a GP - £43</td>
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<tr>
<td></td>
<td>Cost of mental health</td>
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<td></td>
<td>disorders is approximately</td>
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<td></td>
<td>£300 per year</td>
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<td></td>
<td>Cost to NHS of</td>
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<tr>
<td></td>
<td>pregnancy/birth - £4,000</td>
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<tr>
<td></td>
<td>Cost of care for child</td>
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<tr>
<td></td>
<td>- residential care £150,000</td>
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<tr>
<td></td>
<td>and £36,000 for foster care</td>
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<tr>
<td></td>
<td>for a child</td>
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<tr>
<td></td>
<td>Savings per person, per</td>
<td></td>
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<tr>
<td></td>
<td>year diverted from</td>
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<tr>
<td></td>
<td>substance abuse - £6,250</td>
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<tr>
<td></td>
<td>Cost per offence of crime -</td>
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<td></td>
<td>£5,500.</td>
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There is no clear indicator we might use to determine the benefits to the public purse and the young people of wellbeing in general. In the following, we take, as proxies, the reduction in the likelihood of a teen pregnancy, the potential of reduction in the probability of substance abuse, and a potential reduction in criminal activity in the areas of substance misuse and crimes against the individual. In the absence of a counterfactual, it is not possible to work our realistic likelihoods of these costs arising in the absence of the intervention, or the reduction in these probabilities which the intervention promotes.
Limitations

As we have noted, because there is no information available on setup costs, we have used the total budgeted cost from the Staying Close website\(^{11}\). There is no available evidence of cost over-run or under-run. With respect to accommodation cost, we have used a figure of £100 per person per month, which seems reasonable for a serviced office space in Ipswich\(^{12}\). There is, however, no data on available on, for example, staff recruitment, training, steering committee meetings etc., which might, or might not, have been absorbed into existing budgets.

The analysis presented here is based on a number of assumptions, and on cost data provided by the pilot. The pilot costs, and comparison of pilot costs to the likely costs or benefits of alternative provision, are highly sensitive to changes in these assumptions or the accuracy of the cost data provided.

The analysis of the potential costs and benefits that would be incurred in the absence of Staying Close does not take into account the provision of some support – on an informal and ad hoc basis – prior to the implementation of the pilot. It is simply not possible, because of the informal and ad hoc nature of this previous provision, to estimate likely costs.

Finally, in the absence of evidence around the impact of Staying Close, it is not possible to estimate the likely level of costs avoided or benefits derived from its provision. It is also not possible to estimate the level of change that would need to take place for the costs of the pilot to be covered by the benefits generated.

Conclusions

Although there is no obvious counterfactual we might employ in the case of the Suffolk Staying Close pilot, the level of the costs which might be saved if young people are diverted from a range of negative outcomes are significant. It seems reasonable to suppose that there is a likelihood the intervention will breakeven, however further research is required to determine the actual scale of the savings made.

\(^{11}\) The costs data were provided in March 2020. The data provided was not consistent with the data requested. The data provided was a proposed budget for the pilot. From this, the anticipated costs of the pilot have been extrapolated.

\(^{12}\) A google search was undertaken in March 2020 to generate a working assumption of the cost of office space. From this, we have estimated £100 per person per month. This is standard way of generating working assumptions when data are missing in these type of analyses.
8. Summary of key findings on 7 practice features and 7 outcomes

As reported in the Children’s Social Care Innovation Programme Round 1 Final Evaluation Report (Sebba et al, 2017), evidence from the first round of the Innovation Programme led the DfE to identify 7 features of practice and 7 outcomes to explore further in subsequent rounds. These practice features are focused on registered social workers, and are grounded in social work practice. They relate to the whole population of looked after children.

Staying Close is aimed at young adults leaving children’s homes. It is designed to support these young people as they transition from care to independent adulthood. While Staying Close workers engage with registered social workers, and while some of the schemes are located in children’s social services departments, Staying Close as an intervention is located within the wider social care system, and Staying Close workers are generally from the wider non-social work, social care professions. As such, many of the practice features and outcomes are not directly relevant to Staying Close, and do not appear as features of the Staying Close pilots. Four of these features are relevant and are discussed below in relation to Staying Close in Suffolk.

Systemic theoretical models. The key role of the Staying Close worker is to capitalise on a relationship-based approaches to enable successful transitions, human development, and change. In practice, this means that the challenges that young people in Suffolk face are now (more) formally rooted within the pathway planning process. This approach to support recognises that not all young people leaving care can experience a successful transition to autonomy entirely on their own. Now that young people are being better supported through the Staying Close offer, a central part of their relational pattern, or social system, has been shown to enable adjustments in the immediate context that can provide a further source of strength and support.

Multi-disciplinary skill sets working together. Whilst personal advisors, social workers, and housing officers have a particular function to provide advice, assess, implement, and review the pathway plan, they can also be a stranger to the young person. As shown above, the opportunity to build on an established relationship can help the Staying Close worker to create a sense of stability by managing and promoting communication between professional agencies. This also enables clarity for the young person regarding who is doing what to support them. In Suffolk, partnership has been a key feature, and as reported by staff and stakeholders, has resulted in improved ways of working with young people leaving care.

High intensity and consistency of practitioner. The focus on continuity and consistency described in this report enables the Staying Close offer to capitalise on the theory of relationship-based practice. As shown above, Staying Close workers are able to help fence off the ‘cliff edge’ that is so often associated with the experience of leaving care but
also provide a safety net to catch those young people who find themselves at risk of crisis.

**Skilled direct work.** The Staying Close offer provides an important extension to the role of the residential care worker. Although some young people maintained contact with residential workers prior to the innovation, this approach was often fragmented. Now that specific workload allocation is given to the Staying Close role, closely bound within a formal assessment and plan for intervention, children’s home staff are able to facilitate opportunities for young people to engage with more detailed, specific, individualised and task orientated work in preparation for leaving the children’s home and in transitioning to independence once they have moved on.
9. Conclusions and recommendations

Staying Close has been successfully implemented in Suffolk. It is making a significant contribution to the leaving care system in the county, and is valued by young people accessing this type of support. Accommodation and continuing relationship-based support, which is flexible and needs based, provides a more gradual transition for young people from residential care to independent adulthood.

The project has learnt from the barriers to implementation and has amended the offer in response to the challenges and the needs and wishes of young people. Young people participating in this research have had the opportunity for their voice to be included and recognised throughout the implementation of the pilot and the evaluation.

The contribution analysis suggests that the Suffolk Staying Close pilot has made a positive impact in relation to young people. The level of the costs which might be saved if young people are diverted from a range of negative outcomes are possibly significant, however further research is required to determine the actual scale of the savings made.

Recommendations

Recommendations for Suffolk Staying Close

1. The choice for young people around accommodation and support in Suffolk was valued by young people, but ways to extend this level of choice, for example in key workers or involvement in co-production activities, to all young people accessing Staying Close, should be explored further.

2. The Staying Close operational group has identified the need to develop clearer boundaries around the delivery of flexible support (how available staff are and how much time they give), to prevent the overburdening of staff. We recommend that this be put in place to provide clarity for young people and staff.

3. The work of Staying Close in Suffolk should be embedded into Care and Pathway Plans to clarify roles and responsibilities in relation to wider support for the young person.

4. The collection of data to clearly measure development towards the outcomes identified in the project theory of change would enable a clearer evaluation of impact in the future. Suggestions are given below.

Recommendations for research, policy and practice

The content of this evaluation highlights a number of examples of good practice that could be extended to other areas. By combining the data presented here with the evaluations that have been conducted on Staying Close projects elsewhere in England,
there is also a good opportunity to add to existing evidence-informed approaches and good practice examples in leaving care services more generally.

We recommend:

1. Modification to current National Vocational Qualifications for residential childcare support workers should extend to consider the specific, effective, and integrated approaches that are needed to support young people leaving children’s homes. Those who work in the Staying Close project in Suffolk are specifically trained to support young people living in a children’s home. They are not formally trained to support the specific emotional, psychological, social, or practical needs of young people leaving care in an equal way. Modifications to current formal training programmes could extend to consider the specific, effective, and integrated approaches to multi-agency working needed to support care leavers and the complex process of legally becoming an adult.

2. The future development of Staying Close provides the opportunity for further research and the development of co-produced policies that can guide the integration of the Staying Close project with existing professional systems. The potential for this is demonstrated by the ongoing co-production, strong partnership approach, and developing work around pathway planning in Suffolk.

3. The implementation of a formal strategy for collecting outcome data could enable future Staying Close projects to verify the progress experienced by young people, and on the aims that it is trying to achieve. The data collected should relate directly to the outputs and outcomes specified in the theory of change. Important monitoring data that projects should try to capture include the number of young people eligible for the Staying Close offer and accessing the different components of the offer (e.g., number of young people living in Staying Close accommodation, number of young people attending social events etc.). Regular monitoring might include the frequency and nature of contacts with their key worker, the young person’s status regarding accommodation, employment, and education. Ideally, young people would complete a survey once a year using validated well-being scales such as the ONS4, which measures life satisfaction, sense of worth of activities, happiness and anxiety, and the Warwick-Edinburgh Mental Well-being Scale. It is important that the outcome data capture short and medium term outcomes, at least two points over time, to measure progress made by the young people. Outcome data could also include a list of independent living skills (possibly co-produced by young people) and a measure of their level of confidence against each skill. Each project will then need to add measures carefully tailored to their own theory of change. For instance, in the case of Staying Close Suffolk, it could include the number and type of services accessed by young people.

4. Further work is needed to identify and reduce gaps and tensions in the leaving care system, particularly for young people who have wider health and social care support needs as they move from children’s to adult services. The findings set out in the
section on implementation success and challenges suggest some potential for tension between different parts of the leaving care system about where responsibilities and actions lie. It may also be beneficial for the borough to examine the scopes of practice of different professionals in the system to ensure they are complementary and understood;

5. More work is needed to demonstrate the outcomes achieved and the benefits generated by this form of support. In particular, some work to better align the scheme’s objectives, expected outcomes, and outcome data collected would be beneficial. There are a number of different resources that are publicly available to support this work. The break-even analysis undertaken as part of this evaluation suggests that it is likely the intervention will break-even, however further research is required to determine the actual scale of the savings made;

6. The Department for Education should simplify the policy outcomes expected from Staying Close. The current objectives are not mutually exclusive, and include a number of terms that are fuzzy, contested, poorly defined, and open to interpretation. The term ‘resilience’, for example, appears in two of the current objectives; there is a high level of interaction between the objective around being ready for independent living and being in stable and suitable accommodation; and, the term stable accommodation is difficult to conceptualise and measure. In two specific areas – physical health and resilience to unsafe behaviours – there is a lack of evidence to suggest that Staying Close could contribute to positive outcomes. It would be simpler to have a single policy objective for Staying Close, such as ‘Support young people leaving care to be ready for independent living’.

7. Suffolk is one of eight Staying Close pilots in England. There are significant differences between the pilots in terms of their objectives, their expected outcomes, the Staying Close offer, how and what form of support is provided, and whether and how they work to provide safe and suitable accommodation for young people as they transition to independent adulthood. These differences are such that it is challenging to draw conclusions overall about Staying Close. This needs to be taken into account if Staying Close is rolled out nationally.
Appendix 1: Evaluation theory of change

Core to the theory-driven evaluation design – and to linking findings from different parts of the evaluation – is the theory of change. This sets out how Staying Close in Suffolk was intended to work; the outcomes that we expected, and how these outcomes were expected to be delivered. The theory of change is a fundamental part of the contribution analysis undertaken as part of the outcome evaluation.

The evaluation theory of change was developed through a workshop with 15 staff and stakeholders in August 2018 and is given in Figure 1 on the following page. The project team had previously developed a theory of change as part of the Council’s original bid for funding under the Innovation Programme. This project theory of change was refined in January 2020 with young people and stakeholders. The project theory of change can be found in Appendix 1 along with notes on how it aligns with the evaluation theory of change used for the contribution analysis. The evaluation theory of change identifies three distinct outcomes: feeling safe and supported; achieving wellbeing; and maintaining independent living. The mechanisms, which are causal chains or pathways through which positive outcomes are expected to be achieved, were identified on developing the theory of change as, ‘feeling empowered’ and ‘developing confidence’.

Feeling safe and supported: this outcome is achieved through building and maintaining relationships, understanding how to make positive choices in relationships, and being able to trust. Trust would lead to a feeling of security, empowerment, and self-efficacy that would lay the ground for stabilising other areas of the young person’s life, such as education, employment and training.

Achieving well-being: this outcome is achieved through young people gaining a better understanding of their own needs and a better knowledge of the services available to them. The expectation is that this leads to improved self-care and better management or recovery after a crisis episode occurs. This would reduce stress and risk behaviours, and generate increased well-being.

Maintaining independent living: this outcome is achieved through an increased preparedness to try new skills, which leads to increased practical living skills, increased autonomy, and reduced dependency. Another pathway to achieve the outcome comprises increased ability to accept set-backs, increased emotional skills, increased capacity to reflect, and increased ability to problem solve.

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13 The project theory of change was not used for the evaluation as it was refined and shared with the evaluation team after all analysis had taken place.
Figure 1: Evaluation Theory of Change

Mechanism: Feeling Empowered
Developing Confidence

* training in this context is helping staff understand SC in SFK - this is heavily housing focused.

Part of the ethos is about being able to make mistakes - steps to independence.
The project theory of change was revised in a workshop with staff, partners, and young people in January 2020. This was completed following the evaluation.

The evaluation theory of change was used for the outcomes analysis presented in this report. The stated outcomes are different but the evaluation outcomes encompass the developed project theory of change outcomes as follows:

**Feeling safe and supported:**

Stability, feeling safe, secure and supported; Staff are able to support young people throughout their journey and work together to help them achieve their aspirations; Peer support with the cohabitation of young people living independently.

**Achieving well-being:**
Young people are helped to achieve and maintain good health, mental health, and well-being at a pace that is right for them. Young people can access practical support, such as dietary advice.

**Maintaining independent living:**

All young people in Staying Close are working towards or engaged in EET, which matches their aspirations and capabilities; Young people are able to transition to independent living at a place that is right for them. Young people are confident in their rights and responsibilities regarding independent living and are supported in managing their home and tenancy.
Appendix 3: Contribution analysis literature

Table 10 provides a brief overview of the existing evidence around the different aims of Staying Close, Suffolk (feeling safe and supports, achieving wellbeing, and maintaining independent living). The purpose of this is to assess the ‘plausibility’ of Staying Close achieving these aims according to the wider evidence base.

Table 10: Table of literature providing extant evidence for the plausibility assessment

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<tr>
<th>Pilot outcome</th>
<th>Plausibility assessment of extant evidence</th>
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| Feeling safe and supported | The continuation of relationships through Staying Close could contribute to increased social skills due to the development of trusted relationships. Defences developed in response to trauma or due to the discontinuity of relationships leads to hiding emotions, mistrust, and blocking against relationships (Colbridge, Hassett and Sisley, 2017; Winkler, 2014; Ferguson, 2018). Trusted relationships can limit avoidant and defensive responses (Ferguson, 2018; Rahamim and Mendes, 2017). Trust and continuation of services and relationships is important for the mental health of young people with care experience (Butterworth et al, 2017). Discontinuity has a detrimental effect on identity resulting in self-destructive behaviour (Ward, 2011) through the development of a fragmented self from being in different environments (Colbridge, Hassett and Sisley, 2017). An insecure base, lack of trust and experiences of unsafe care means young people can become self-reliant which leads to isolation (Colbridge, Hassett and Sisley, 2017).

The concept of resilience is highly influential in both research on children and young people (Berridge, 2017) and in policy and services for young people leaving care. Resilience is often broadly defined, such as by Rutter (2006), who states that resilience is ‘. . . reduced vulnerability to environmental risk experiences, the overcoming of stress or adversity, or a relatively good outcome despite risk experiences’. The extant literature around resilience links it with a number of other broad concepts; young people are seen as resilient are found to have good social relationships, strong social networks, good self-esteem, self-efficacy, and social skills. Staying Close’s policy outcome of resilience is therefore linked in the wider literature to a number of other expected outcomes, and
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<td>indeed appears in two separate policy outcomes set by the Department for Education – one specifically related to unsafe behaviours, and one more broadly involving wellbeing and emotional health. The plausibility analysis presented here focuses on the resilience in relation to unsafe behaviours, specifically misuse of drugs and alcohol. The extant literature includes very little empirical evidence around the role that interventions such as Staying Close might play in increasing the resilience to unsafe behaviours of young people as they transition from care to independent adulthood (Alderson et al., 2017). There is national guidance about targeted interventions to prevent drug and alcohol misuse, including for young people, but this is not specific to care leavers and does not draw on any specific evidence around interventions that are effective for care leavers. The evidence that does exist is focused on clinical therapeutic programmes such as Motivational Enhancement Therapy (MET) and Social Behaviour and Network Therapy (SBNT), and indicates that these programmes are effective in reducing unsafe behaviours (Alderson et al., 2017). There is no evidence to suggest that an intervention such as Staying Close might be effective in reducing unsafe behaviours.</td>
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<td>Achieving Wellbeing</td>
<td>The findings taken from research with young adults leaving care in across Europe, Africa and America suggests that it is plausible for Staying Close workers to support the mental health and well-being of young adults, but only if they can demonstrate safe and effective skills in relationship building and relationship counselling (Chase et al., 2006; Knight, Chase and Aggleton, 2006; Goddard and Barrett, 2008; Matthews and Sykes, 2012). To achieve this aim, Staying Close Workers must understand key theories of human growth and development, grief, separation and loss (Wood and Selwyn, 2017). Research suggests that training in mental health is needed for practitioners working with young people who are leaving or have left care (Badawai, Mendes and Snow, 2014; McAuley and Davies, 2009) along with an assessment of mental health (Baidawi, Mendes and Snow</td>
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<td>Pilot outcome</td>
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<td>2014; Akister, Owens and Goodyer, 2010; McAuley and Davies, 2009).</td>
<td>Staying Close workers should be an advocate for the young adult’s rights, be consistently available and be the key point of contact who can help promote stability and health by empowering and enabling the young person to access all of the services, hobbies, interests and activities that they want to (Selwyn, Wood and Newman, 2017; Simkiss, 2019). Further findings suggest that Staying Close project should work in a planned and coordinated way (Dixon, 2008) and not in a crisis response interventionist way (as is most common in neoliberal approaches to leaving care in the UK) (Mezey et al., 2015).</td>
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<td>Research points to a need for a gradual transition from children’s services with an accelerated transition being detrimental to outcomes (Ward, 2011). Good preparation is protective of mental health where leaving early is a risk factor (Akister, Owens and Goodyer, 2010). Premature transition exacerbates mental health and behavioural difficulties and impacts on the ability to deal with everyday tasks (Badawi, Mendes and Snow, 2014). A compressed transition can compound feelings of distrust, abandonment, isolation, instability, powerlessness, and abandonment, affecting engagement with services. (Butterworth et al, 2017). This points to a need for emotional and interpersonal preparation (Ferguson, 2018). Staying Close, where working early on preparation and providing continued support that facilitates a gradual transition could plausibly improve mental health and wellbeing outcomes for young people leaving care.</td>
<td>As improved mental health and wellbeing is a long-term goal, a further evaluation of a Staying Close initiative should be conducted when the young adults are in their 30s. This conclusion is substantiated because improved mental health and well-being outcomes are not usually reported by care leavers until the end of early adulthood (30-40) (Buchanan, 1999).</td>
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<td>Maintaining Independent Living</td>
<td>The literature suggests that if Staying Close can provide young adults with a sense of stability and permanence through the delivery of services that are strengths-based and person-centred, a successful transition to independence is plausible (Schofield et al., 2007; Liabo et al., 2017; Devenney, 2017; Häggman-Laitila, Salokekkilä, and Karki, 2018). It is plausible that ongoing support, which improves mental health, could also lead to improved outcome in relation to EET. Mental Health often underpins other issues such as not being in employment, education and training (Akister, Owens and Goodyer, 2010; Sims-Schouten and Hayden, 2017). It is plausible that Staying Close can maintain and improve EET if they are provided with the opportunity to stay longer in care until they have completed courses (Del Valle et al., 2008; Quinn et al., 2017); this provides a safety net and places the instability and uncertainty on hold that may come with transition – and disrupt achievement in education or training (Munro et al., 2012). EET can facilitate an easier transition into adulthood as this gives young people practical skills and financial independence with which to seek and maintain independence in adulthood (Dutta, 2017; Häggman-Laitila, Salokekkilä, and Karki, 2019). Staying close workers can facilitate improved EET through supporting attendance and attainment in education, assisting young people to identify and plan future employment or vocational pathways, and find university sponsors (Children of the Andes, 2010). Such “pathway plans” should be explicitly identified and cover long-term future goals (Department for Education, 2010). Yet these have not always been put into practice or individualised to each young person (The All-Party Parliamentary Group for Looked After Children and Care Leavers, 2013). Young people seeking asylum without parents or guardians may especially hold education as key to future success and reconnecting with their family – this can be supported by a strong pathway plan (Devenney, 2017). Staying Close workers should enable young people to draw on social</td>
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<td>Pilot outcome</td>
<td>Plausibility assessment of extant evidence</td>
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relationships in their past, and also be a source of professional support – which can facilitate motivation and achievement in EET (Devenney, 2017; Driscoll, 2013). The literature suggests that if Staying Close can provide young adults with a sense of stability and permanence through the delivery of services that are strengths-based and person-centred, a successful transition to independence will be plausible (Schofield et al., 2007; Liabo et al., 2017; Devenney, 2017; Häggman-Laitila, Salokekkilä and Karki, 2018). However, research that reports on specific project work for care leavers highlights the challenge of implementing these type of support services (Sallnäs, Vinnerljung and Westermark, 2004). Changing priorities and inconsistent professional approaches in leaving care services can create distrustful feelings toward the social care system and the intentions of the residential carers more generally (Gill et al., 2020). The importance of additional and formal accredited training for Staying Close workers highlights the importance of a graded transition for independence that starts early in the care planning process (Del Valle et al., 2008). The clear message is that the aim of independence is plausible but further research may be needed to consider how well the Staying Close offer is able to define the role and remit of the Staying Close worker and clearly establish the expectations of the service and of the young person (Takele and Kotecho, 2019).

Evidence drawn from the literature suggests that it is plausible that Staying Close can maintain and improve independent living skills. Gradual transition which slowly gives young people more autonomy and responsibility over living independently can foster these skills in a supportive and safe environment (Rashid, 2004; Quinn et al., 2017). However, Staying Close workers should be mindful that previous vulnerability can increase the challenges associated with transitioning into independent living (Cameron et al., 2018). Premature transition exacerbates mental health and behavioural difficulties and impacts on the ability to deal with everyday tasks (Badawi, Memdes and Snow, 2014).
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<th>Pilot outcome</th>
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<td>Staying Close workers can at least enable young people to maintain independent living skills through understanding how individuals may need varying levels of support and guidance. One such source of knowledge may be through Stein’s (2006) resilience framework, which divides young care leavers into groups based on their level of motivation, confidence, acceptance of challenges, and coping skills – which affected their response to transitioning into independence. This individualised support plan can allow young people to participate in their goals for learning and maintaining independent living skills – which can facilitate a sense of autonomy and allow young people to reach milestones when they feel ready (Häggman-Laitila, Salokekkilä, &amp; Karki, 2019; Liabo et al., 2017). Such co-production should be employed in practice and not simply listed in support plans (Carr, 2012).</td>
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<td>A longitudinal study demonstrated that difficult childhood experiences may propel young people into learning these skills earlier than usual, and they may feel prepared and positive about independent living (Häggman-Laitila, Salokekkilä and Karki, 2019). Therefore, Staying Close workers should facilitate hopefulness and confidence and not assume that young people lack the personal characteristics necessary to deal with maintaining independent living skills (Anghel, 2011). However, Staying Close workers must balance fostering optimism with the realism that independent living may be harder than it seems (Adley and Jupp Kina, 2014), and encourage young people to not fear asking for help (Atkinson &amp; Hyde., 2019).</td>
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Appendix 4: Distance travelled analysis

Introduction

Distance travelled is a form of analysis of the change in the behaviour of individuals who participate in a programme or receive an intervention. It is a simple way of understanding the contribution that a programme or intervention may make to the observed outcomes of participants. Distance travelled analysis is often used when to understand changes in ‘soft’ outcomes – outcomes which are broad, big picture, and often intangible and difficult to measure or quantify. Soft outcomes are often contrasted with hard outcomes, which typically have a high level of specificity, are tangible and easily measurable. Soft and hard outcomes are not mutually exclusive, and the difference between them is often the result of subjective decision making.

Distance travelled analysis is focused on changes in observed or self-reported behaviours/experiences/outcomes at the level of the individual programme participant or individual receiving an intervention. It does not allow for any changes in observed or self-reported behaviour or outcomes to be attributed to individual programmes or interventions. Such analysis does not involve comparing the progress of programme participants or intervention recipients with similar individuals who are not engaged in the programme or receiving the intervention; it does not involve controlling for factors beyond the intervention or programme that might affect the observed changes; nor does it involve examining average changes overall for programme participants. Despite these limitations, when combined with other elements of this evaluation – the implementation evaluation and the contribution analysis used to understand the impact of Staying Close – it provides a basis from which to judge whether and how the programme makes a difference to the lives of young people who participate in it.

Data

The Suffolk Staying Close team provided data to the evaluation team in March 2020. The data included covered the periods:

- November 2018 to October 2019, in terms of counts of people accessing Staying Close; and
- March 2019 to March 2020, in terms of assessment outcomes in ten areas at presentation, four months and twelve months for a cohort of n=25/40 young people accessing Staying Close in March 2019, data on move on accommodation outcomes for the n=25, and data on the number of missing from home episodes for the n=25. The cohort was selected by the Suffolk team using a convenience sampling approach, being those individuals most
engaged with Staying Close. Over the twelve-month period during which outcomes were measured, a number of the original cohort of n=25/40 dropped out or stopped engaging.

The Staying Close team also provided an updated theory of change, dated February 2020, which specifies the expected outcomes and indicators/measures relevant to Staying Close in Suffolk.

**The number of young people accessing Staying Close in Suffolk**

The number of young people accessing Staying Close in the county increased over the period for which we have data, being between November 2018 to October 2019. Figure 3 illustrates the total number of people accessing Staying Close in Suffolk by month.

![Figure 3: Number of young people accessing Staying Close in Suffolk, by month (Suffolk County Council, 2020a)](image)

No data were provided on net in- and out-flows over the period. In addition, no data were provided in terms of gender, ethnicity, age or care history of the young people accessing Staying Close in Suffolk.
Policy objectives, scheme outcomes, and data

The Department for Education has identified a number of outcomes to which Staying Close might be expected to contribute. These include outcomes related to: employment, education and training; independent living and accommodation, physical and mental health and wellbeing; behaviours; and, social networks. Individual Staying Close pilots are not expected to work towards achieving positive changes in all of these outcome areas, and there are differences in which of these outcomes are and are not objectives for individual schemes. It is also the case that schemes do not necessarily collect data to measure progress against each of their outcome objectives.

The Suffolk pilot has set out the outcomes it expects to achieve in its theory of change. This was initially developed by Suffolk County Council with support from the Spring Consortium as part of the council’s bid for Department for Education funding, and has been further developed through the evaluation. The theory of change was reviewed and revised by the pilot in February 2020. The Suffolk pilot aims to improve outcomes for young people accessing Staying Close in seven areas (Suffolk County Council, 2020):

- young people are able to transition to independent living at a place that is right for them. Young people are confident in their rights and responsibilities regarding independent living and are supported in managing their home and tenancy;
- peer support with cohabitation of young people living independently;
- stability, feeling safe, secure and supported;
- all young people in Staying Close are working towards or engaged in EET, which matches their aspirations and capabilities;
- young people are aware of their financial opportunities and responsibilities and are supported in developing their financial literacy and life skills;
- young people are helped to achieve and maintain good health, mental health and well-being at a pace that is right for them. Young people can access practical support, such as dietary advice; and
- staff are able to support young people throughout their journey and work together to help them achieve their aspirations.

The Suffolk Staying Close pilot theory of change sets out seven indicators/evidence of progress against which it seeks to measure progress in achieving the pilot’s outcomes. There are some differences between the original theory of change outcomes, the revised outcomes and measures, and the outcomes covered by the data provided by the Suffolk team. For ease of reference, the evaluation team has drawn on the outcomes reported revised theory of change. Table 11 maps the
national policy objectives to the Suffolk specific objectives, and the outcome data collected by the Suffolk Staying Close team.

In addition, the Suffolk team provided count data on the number of times young people aged 18 and under who went missing from care. These data do not map directly to any of the Suffolk or national outcomes but are reported in relation to the stability of accommodation.

Table 11: Mapping of national outcomes, Suffolk outcomes, and outcomes measured

<table>
<thead>
<tr>
<th>National outcome objectives</th>
<th>Suffolk outcome objectives: Evaluation theory of change</th>
<th>Suffolk outcome objectives: Project theory of change</th>
<th>Suffolk outcome data (scorecards and individual data)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are in education, employment or training</td>
<td>Maintaining Independent Living</td>
<td>All young people in Staying Close are working towards or engaged in EET, which matches their aspirations and capabilities</td>
<td>Number of n=25 cohort who are NEET are presentation, four months, and twelve months</td>
</tr>
<tr>
<td>Are in accommodation that is suitable and stable</td>
<td>Maintaining Independent Living</td>
<td>Young people are able to transition to independent living at a place that is right for them. Young people are confident in their rights and responsibilities regarding independent living and are supported in managing their home and tenancy</td>
<td>Move on accommodation (not pre and post data)</td>
</tr>
<tr>
<td>Are physically healthy</td>
<td>Achieving Wellbeing</td>
<td>Young people are helped to achieve and maintain good health, mental health and well-being at a pace that is right for them. Young people can access practical support, such as dietary advice</td>
<td>No data provided</td>
</tr>
<tr>
<td>Have good emotional health, wellbeing and resilience</td>
<td>Achieving Wellbeing</td>
<td>Young people are helped to achieve and maintain good health, mental health and well-being at a pace that is right for them. Young people can</td>
<td>No data provided</td>
</tr>
<tr>
<td>National outcome objectives</td>
<td>Suffolk outcome objectives: Evaluation theory of change</td>
<td>Suffolk outcome objectives: Project theory of change</td>
<td>Suffolk outcome data (scorecards and individual data)</td>
</tr>
<tr>
<td>-----------------------------</td>
<td>------------------------------------------------------</td>
<td>-----------------------------------------------------</td>
<td>-----------------------------------------------------</td>
</tr>
<tr>
<td></td>
<td>access practical support, such as dietary advice</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are ready for independent living</td>
<td>Maintaining Independent Living</td>
<td>Young people are able to transition to independent living at a place that is right for them. Young people are confident in their rights and responsibilities regarding independent living and are supported in managing their home and tenancy. Young people are aware of their financial opportunities and responsibilities and are supported in developing their financial literacy and life skills.</td>
<td>No data provided</td>
</tr>
<tr>
<td>Are resilient to unsafe behaviours</td>
<td>Feeling safe and supported</td>
<td>Stability, feeling safe, secure and supported</td>
<td>Number of n=25 cohort reporting: (1) suicidal thoughts; (2) alcohol use; (3) Drug use; (4) bullying and harassment; (5) being subject to DA; (6) risk of sexual exploitation; (7) anti-social behaviour; (8) violent behaviour; (9) involvement with gangs at presentation, four months, and twelve months</td>
</tr>
<tr>
<td>Report good social connections</td>
<td>Feeling safe and supported</td>
<td>None</td>
<td>No data provided</td>
</tr>
<tr>
<td>Feel well-supported</td>
<td>Feeling safe and supported</td>
<td>Staff are able to support young people throughout their journey and work</td>
<td>No data provided</td>
</tr>
</tbody>
</table>
Distance travelled: are resilient to unsafe behaviours

The Suffolk data includes counts of the number of the n=25 cohort reporting or identified with: (1) suicidal thoughts; (2) alcohol use; (3) drug use; (4) bullying and harassment; (5) being subject to domestic abuse; (6) risk of sexual exploitation; (7) anti-social behaviour; (8) violent behaviour; (9) involvement with gangs at presentation, four months, and twelve months. The data was provided by the scheme about each young person but it is not clear from whether these are self-reported data, or observation data collected by Staying Close staff or other staff from within the leaving care system in the county. Table 8 presents these data.

Table 12: Counts of young people presenting with issues of safety/resilience at presentation, four months, and twelve months (n=25 at presentation)

<table>
<thead>
<tr>
<th></th>
<th>Suicidal thoughts</th>
<th>Alcohol use</th>
<th>Drug use</th>
<th>Bullying and harassment</th>
<th>Subject to DA</th>
<th>Risk of sexual exploitation</th>
<th>Anti-social behaviour</th>
<th>Violent behaviour</th>
<th>Involvement with gangs</th>
</tr>
</thead>
<tbody>
<tr>
<td>At presentation</td>
<td>8</td>
<td>7</td>
<td>16</td>
<td>4</td>
<td>6</td>
<td>9</td>
<td>17</td>
<td>7</td>
<td>3</td>
</tr>
<tr>
<td>After 4 month</td>
<td>2</td>
<td>4</td>
<td>8</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>intervention</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>After 12 months</td>
<td>0</td>
<td>4</td>
<td>6</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>0</td>
</tr>
</tbody>
</table>

Together to help them achieve their aspirations
Peer support with co-habitation of young people living independently
It is not known how many of the n=25 cohort at presentation were still engaging at four months or at twelve months, and it is therefore not possible to estimate the proportion of the cohort with each of these issues. It is also not clear whether these data are based on self reporting or on observation by professional staff. The data do suggest, however, that there has been a reduction in these behaviours/issues over the twelve-month period to March 2020.

**Distance travelled: education, employment or training outcome**

Of the n=25 people from March 2019 for whom data were collected, 17 (n=17/25) were not in education, employment or training (NEET) and 8 (n=8/25) were in some form of education, employment or training. At four months, 15 (n=15) were NEET, and at twelve months, 12 (n=12) were NEET. The Suffolk team has also noted that of those reported as NEET in March 2020, 6 (n=6/12) have been supported to secure placements but have lost them due to a variety of reasons including mental health, inability to commit to study/work, geographically moving out of the area. At least 7 (n=7) young people are waiting to go back into education, volunteering posts, work, apprenticeships with Staying Close support. Only one young person is not engaging so their education/employment status is unknown. Two young people are pregnant, and one is caring for her child.” (Suffolk County Council, 2020a). From these data, we conclude that there has been positive progress in relation to the education, employment and training outcome for the twenty-five young people for whom data were collected.

**Distance travelled: missing episodes**

Data was provided on the number of times Staying Close service users aged 18 and under went missing from their accommodation. These data relate to the n=25/40 cohort from March 2019, and are presented in table 7.

<table>
<thead>
<tr>
<th>Number of episodes</th>
<th>0 – 10</th>
<th>11 - 20</th>
<th>21 – 30</th>
<th>31 - 40</th>
<th>41 - 50</th>
<th>70 - 100</th>
<th>100 +</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year to March 2019</td>
<td>9</td>
<td>8</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Year to March 2020</td>
<td>5</td>
<td>4</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

These data suggest that in the year to March 2019, each one of the n=25 cohort for whom these data were collected went missing from home on at least one occasion.
In the following year, 3 (n=3/25) of the cohort reached the age of 18 and missing from home data were no longer collected. Some individuals also ceased to engage or dropped out from Staying Close, although we do not know how many in total. It is therefore not possible to determine whether there was a drop in prevalence (number of the cohort) who went missing from home at least once, although the data do suggest that there has been a drop in incidence (the number of times they went missing).
References


Brown, R., Alderson, H., Kaner, E., McGovern, R. & Lingam, R. (2019). “‘There are carers, and then there are carers who actually care’; Conceptualizations of care among
looked after children and care leavers, social workers and carers’, *Child Abuse & Neglect*, 92, pp. 219-229.


Children and Social Work Act 2017. (c.16) London TSO


