



Department
for Work &
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Jobseeker's Allowance Signing Trials

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Executive summary

- The standard signing regime for Jobseeker's Allowance (JSA) requires claimants to sign once every fortnight. Each signing intervention includes a review of the claimant's Jobseeker Agreement and job search activity, identifying any support needs, and recording the claimant's signature.
- Three alternative approaches to standard fortnightly signing were trialled:
 1. Weekly signing (signing frequency doubled from week 13 onwards);
 2. Speed signing (duration of each signing meeting halved);
 3. Flexible signing (individuals' signings could be more or less frequent, but the overall staff allocated to maintain the signing regime was the same).
- Each signing trial used a randomised controlled trial (RCT) approach. In each signing trial people were randomly allocated to receive either the alternative signing regime (the treatment group) or the standard signing regime (control group). This allowed a comparison to be made between two conditions: the altered regime and standard Jobcentre Plus signing.
- Each trial lasted for 52 weeks following random assignment. Participation ended sooner if a claimant was referred to the Work Programme or ended their claim. If a claimant ended their first claim but then began a new one within the same pilot office and within the 52-week trial period, they were returned to the trial in the same group.
- Over the 52 week tracking period people who signed weekly spent at least an average of 2.6 fewer days on DWP benefits than fortnightly signers. This difference is significant at the 90%, but not 95%, confidence level. The reduction may have been higher; other approaches to the analysis suggest a 5.8 day reduction. However, for reasons that are explained in the main body of this report, we have less confidence in the higher figure. However, we believe that the true impact of weekly signing will lie around this range.
- Speed signing had no effect: treatment and control participants spent the same amount of time in receipt of benefits over the 52 week tracking period.
- Flexible signers spent 1 day more on DWP benefits than controls over the 52 week tracking period; this is not a statistically significant difference.

Abbreviations

GMCC	Greater Manchester Central and Cheshire
GMEW	Greater Manchester East and West
FJR	Fortnightly Jobsearch Review
ITT	Intention to Treat
JSA	Jobseeker's Allowance
LMS	Labour Market System
NBD	National Benefits Database
NINO	National Insurance Number
NJI	New Jobseeker Interview
RCT	Randomised Controlled Trial

Contents

- 1 Summary 1
 - 1.1 Structure of pilots 1
 - 1.2 Analysis..... 1
 - 1.3 Findings..... 2
- 2 Introduction..... 3
 - 2.1 Background to the pilots..... 3
 - 2.2 Pilot processes 3
 - 2.3 Pilot marker analysis 4
 - 2.4 Limitations of the pilot markers..... 4
 - 2.5 Intention to treat analysis 5
 - 2.6 Measuring outcomes 6
 - 2.7 Data sources 7
- 3 Pilot marker analysis 8
 - 3.1 Weekly signing trial 8
 - 3.1.1 Description of the pilot..... 8
 - 3.1.2 Characteristics 9
 - 3.1.3 Benefit outcomes 10
 - 3.2 Speed signing trial..... 13
 - 3.2.1 Description of the pilot..... 13
 - 3.2.2 Characteristics 13
 - 3.2.3 Benefit outcomes 14
 - 3.3 Flexible signing trial..... 17
 - 3.3.1 Description of the pilot..... 17
- 4 Intention to treat analysis..... 18
 - 4.1 Weekly signing trial 18
 - 4.1.1 Measure of FJR frequency 18
 - 4.1.2 Characteristics 18
 - 4.1.3 Benefit outcomes 19
 - 4.1.4 National weighting..... 22
 - 4.2 Speed signing trial..... 23
 - 4.2.1 Characteristics 23
 - 4.2.2 Benefit outcomes 23

Jobseeker’s Allowance Signing Trials

- 4.3 Flexible signing trial 26
 - 4.3.1 Characteristics 26
 - 4.3.2 Benefit outcomes 26
- Annex B: Speed signing trial ITT - subgroup analysis 31
- Annex C: Flexible signing trial ITT - subgroup analysis 32

1 Summary

The standard signing regime for Jobseeker's Allowance (JSA) claimants consists of signing every fortnight at the Fortnightly Jobsearch Review (FJR). This regime has previously been shown to be cost-effective, as it costs less to run the FJRs than is spent in the JSA payments saved by the regime. However, more cost-effective ways of delivering FJRs are being investigated. This report outlines three pilots testing alternative signing regimes:

- Weekly signing, where a claimant signs every week instead of every fortnight;
- Speed signing, where FJRs occur every fortnight, but take approximately half the usual time;
- Flexible signing, where the Jobcentre Plus districts have the flexibility to make individuals' FJRs more or less frequent, but use the same overall number of staff.

1.1 Structure of pilots

For administrative purposes Jobcentre Plus is divided geographically; there were 36 districts when the pilots were in place. Six of these were involved in the FJR pilots, with two districts involved in each of the three pilots.

In each pilot, eligible new claimants were randomly allocated to either the treatment or control group. The treatment group received the alternative signing regime being trialled. The control group received the standard Jobcentre Plus regime to allow a comparison to be made. Following random assignment the trial lasted 52 weeks, but ended sooner if the participant joined the Work Programme or left JSA. If a claimant opened a new JSA claim in the same pilot area within the 52-week period they were reallocated to the same group. Treatment began either at the beginning of the claim (flexible and speed signing) or at week 13 (weekly signing).

1.2 Analysis

Analysis of the pilots took two approaches. First, the **pilot marker approach** used markers set by Jobcentre Plus work coaches to analyse benefit claims made by people known to have been recruited onto the pilot. These people were treated according to the condition they were known to have been placed in. People in the treatment group were compared to people in the control group, and the number of days they spent on benefits in the subsequent 52 weeks was compared.

This approach has the advantage that all records involved belong to people known to have been involved in the pilot at some point. However, it overlooks any additional cases where the regime was followed correctly but a marker was not set.

Jobseeker's Allowance Signing Trials

To be internally valid (i.e. to actually test the effect of the regime) pilot markers should be allocated randomly and to all eligible people – the only difference between the two groups should be the treatment received. If other differences are introduced, either by non-random allocation or by excluding people entirely, the pilot marker analysis is potentially not internally valid and may not provide an unbiased estimate of the impact of the regime. Where the treatment and control groups are similar an analysis based on pilot markers might still retain a good degree of internal validity. However, in all three trials we found significant differences between the people with the treatment marker and the control marker which means that the markers will not necessarily provide an unbiased estimate of the effect of the regimes.

To get around this problem and restore internal validity, an **intention to treat** (ITT) approach was also used. This approach considered all eligible claims in the pilot districts and used the same allocation process to place those claims into the group they should have been placed in. ITT analysis is an internally valid approach to analysing the signing trials. However, because it introduces many people who did not receive the piloted treatment, the impact measured is likely to be smaller than the true impact. This means that there is a risk that a result will be deemed not statistically significant when the regime has actually had an impact.

1.3 Findings

When an ITT approach was used, weekly signers spent 2.6 fewer days on benefits than controls in 52 weeks (this is significant at the 90%, but not 95%, confidence level). The (less reliable) pilot marker approach suggests a 5.8-day reduction, which is significant at the 95% confidence level.

Speed signing had no impact upon the number of days spent on DWP benefits, and this was found with both methods of analysis; pilot marker and ITT. Treatment and control participants spent the same amount of time on benefits.

Flexible signers spent one more day on benefit than controls, but this difference is not statistically significant.

2 Introduction

2.1 Background to the pilots

Receiving JSA is conditional upon attending regular face-to-face interventions. This typically takes the form of the Fortnightly Jobsearch Review (FJR). Internal DWP analysis suggests that FJRs are cost-effective. The results of pilots run in 2005¹ supported the FJR regime, demonstrating faster off-flows during the first thirteen weeks when face-to-face signing was used compared to excusal of signing or alternatives such as telephone signing. The money saved on benefit costs was found to outweigh administrative costs of FJRs, which has supported their continued use.

However, the move towards Universal Credit and increased flexibility in Jobcentre Plus service delivery introduces a need to explore more cost effective ways of delivering the signing regime. Three possible ways of adapting FJRs were piloted.

2.2 Pilot processes

For administrative purposes, Jobcentre Plus was divided geographically into 36 districts when the pilots were in place. These pilots ran in six Jobcentre Plus districts, as outlined in Table 2.1. The pilots began with a recruitment period, during which eligible participants were identified and assigned pilot markers. These indicated whether the individual was in the treatment or control group. The trials ran for 52 weeks following the end of the recruitment period; each individual experienced the trial for 52 weeks, or less if they joined the Work Programme or left JSA.

Table 2.1 Pilot districts and recruitment periods

Trial	Districts involved	Recruitment period
Weekly	East London	27 Feb 2012 - 20 Jul 2012
	West of Scotland	
Speed	Greater Manchester East & West	12 Mar 2012 - 25 May 2012
	Surrey & Sussex	
Flexible	Essex	7 Nov 2011 – 24 Feb 2012
	Greater Manchester Central & Cheshire	

Some claimants were excluded from the pilots where it was felt that these alternative signing regimes were not appropriate for them. These groups were:

- Postal signers. Claimants may sign by post if caring responsibilities or a disability limit their ability to travel to the Jobcentre, the visit would take

¹ “Jobseekers Allowance intervention pilots quantitative evaluation,” Middlemas J, DWP Research Report No 382, 2005

Jobseeker's Allowance Signing Trials

longer than four hours, or the journey in one direction would take longer than one hour. Claimants who had been banned from their normal office and signed by post instead were also excluded;

- Prison leavers;
- Claimants under 18 years;
- Claimants importing their benefits from another country; and
- Work Programme participants.

All other JSA claimants in these districts should have been recruited into the pilots.

Allocation into the treatment or control group was random and happened at the NJI (New Jobseeker Interview) or later in the claim in the weekly signing trial. Allocation was carried out on the basis of the digits in the claimant's National Insurance Number (NINO). After randomisation, a pilot marker was added manually by the Jobcentre Plus work coach to the claimant's record on the Labour Market System (LMS), which could be seen by the Jobcentre Plus staff meeting with the claimant. The pilot marker indicated that they were involved in the trial and which treatment they should receive. It could be seen by staff at signing meetings throughout the trial, and allowed analysts to identify trial participants afterwards.

Following random allocation, the altered or control regime was then followed for a 52-week period or earlier if the claimant joined the Work Programme or left Jobseeker's Allowance (JSA). If a claimant left JSA and within the 52-week trial period returned to the same pilot area and the same benefit they were returned to the pilot and placed in the same group.

2.3 Pilot marker analysis

Initially, the analysis focused upon the pilot markers assigned when participants were brought into the trial. The treatment and control groups were defined on the basis of the pilot markers received rather than their nominal condition according to their NINO. We could then measure the time spent on benefit as a result of being in the pilot. This was calculated by comparing the days spent on benefit by participants in the treatment and control groups.

2.4 Limitations of the pilot markers

For a pilot marker-based analysis to be internally valid (i.e. to truly compare an altered signing regime to the control) there should be no difference between people with treatment and control markers other than the treatment received. To maximise the chance that the two groups are similar, pilot markers should be assigned randomly to everybody with an eligible claim. However, by comparing the NINO with the pilot markers we found differences between the nominal and the actual group.

Jobseeker's Allowance Signing Trials

For all three trials, this resulted in small but measurable differences in the characteristics of the control and treatment groups.

Other issues were found which were specific to some trials:

- A significant percentage of eligible claimants did not have pilot markers set, as can be seen in Table 2.2 (all trials, but particularly affected the weekly pilot);
- Differences between the nominal allocation and the actual allocation according to the pilot marker data – commonly treatment claimants allocated to the control group (flexible);
- Evidence that some people who were not in scope of the pilots had markers set (weekly);
- The assumption of common trends was not always held: treatment and control participants' benefit histories differed, which means that pre-pilot differences in labour market attachment could have potentially contributed to post-pilot differences (weekly);
- Imperfections in the implementation of the trial procedure (speed and flexible);
- Some offices had particularly low referral rates (speed).

These issues mean that pilot markers do not identify a random distribution of treatment and control participants. As a result, any measured difference between treatment and control outcomes would not necessarily be indicative of the trial impact, nor would that difference be representative of the JSA population in the pilot offices. Nonetheless, as the pilot marker data can still give a broad idea of the potential impact of these signing regimes, they are presented in Chapter 3. However, the flexible trial pilot marker data showed differences in the trends in benefit history between the treatment and control groups. This means that any differences in outcomes could result from these trends continuing, and not from flexible signing. The flexible signing pilot marker data is therefore not presented in order to avoid misleading findings.

To compensate for these issues, we also carried out an alternative method of analysis which also considers the eligible claimants who did not have a pilot marker set, but who nevertheless may have undergone the pilot process. We believe that this evaluation, presented in Chapter 4, gives a more unambiguous estimate of the effects of the signing regimes trialled but is likely to underestimate the true impacts of the pilots.

2.5 Intention to treat analysis

The alternative approach used in Chapter 4 to analyse the pilot impacts was intention to treat (ITT). This is an approach to analysing randomised controlled trials which compares all eligible participants on the basis of the groups that they should have been assigned to whether or not they actually were assigned to that group. Every JSA claim made in the trial districts within the recruitment period was selected, and

Jobseeker’s Allowance Signing Trials

the same randomisation process was used to divide these individuals into the condition they should have been placed in for the trial. Almost 80 thousand people took part in the three signing trials across six districts between November 2011 and July 2012. ITT analysis suggested that there were over 140 thousand eligible individuals actually in scope of the trials.

ITT is robust in that it is unaffected by non-random biases in pilot marker assignment and exclusions. It will also capture data for individuals who received the pilot treatment but who did not have the pilot marker set. However, as it potentially includes individuals who were not involved in the pilot, any impact will probably appear smaller than it truly is. If an otherwise effective pilot is tested upon too small a proportion of the intended population, or if the pilot effects are already small, using ITT can make the result appear statistically non-significant even when the regime is actually effective.

In order to reduce this risk, the selection of participants was restricted to the middle of each recruitment period. That is, participant data for the first and last two weeks of each trial were removed (volumes shown in Table 2.2), as these were the periods with the lowest rates of recruitment. By focusing on this middle period, it was hoped that the period of maximum recruitment could be captured.

Table 2.2 Volumes and percentages in each trial selected by different analytical approaches

	Pilot markers	ITT (full)	ITT (central weeks)
Weekly	12,739 (36%)	35,160 (100%)	24,821 (71%)
Speed	30,950 (71%)	43,325 (100%)	22,502 (52%)
Flexible	35,827 (60%)	60,060 (100%)	41,095 (68%)

Percentages show the proportion of the full ITT sample captured by each method. Note that people who are not in scope of the pilots but nevertheless had a marker set are not included in the ITT analysis.

2.6 Measuring outcomes

For the speed and flexible signing pilots, benefit outcomes were tracked from the point of random assignment. This should have been at the NJI near the beginning of the eligible claim, and ought to have marked the beginning of active engagement with the pilot.

Selecting a tracking start date was more difficult for the weekly signing trial. Pilot markers were allocated before week 13 of the claim and the time difference between pilot marker allocation and weekly signing commencement was inconsistent. As weekly signing began 13 weeks (91 days) into the claim, benefit outcomes were tracked from 91 days after the recorded claim start date and for the following 52 weeks.

For benefit history and benefit outcomes, for each day we measured whether the individual was in receipt of a primary benefit.² These daily benefit measures were used to calculate total days on benefit in the 52 weeks following the pilot start date.

2.7 Data sources

The LMS is a case management application used by Jobcentre Plus work coaches to administer JSA conditionality and record certain client characteristics. When a person made a new or repeat claim during the recruitment period and was allocated to a group in the pilot, the work coach assigned them a pilot marker within the LMS. This made their pilot status clear to both Jobcentre Plus staff and DWP analysts. Pilot marker data was then matched to DWP administrative databases. Information on benefit receipt before and after the pilot was provided by the DWP's National Benefits Database (NBD) which draws upon data stored in DWP's benefits administration systems. At the time of analysis, this data was complete up to and including June 2013. For the ITT analysis, all claims made during the recruitment periods in the recruiting districts were selected in order to produce a list of all ITT claimants. The NINO was used to allocate them to the treatment or control group accordingly.

LMS datasets allowed certain characteristics to be matched in order to check that the treatment and control groups had similar types of people in them.

² Benefits included were Jobseeker's Allowance, Employment and Support Allowance, Incapacity Benefit, Income Support and Severe Disablement Allowance. Training Allowance was also included.

3 Pilot marker analysis

3.1 Weekly signing trial

3.1.1 Description of the pilot

At the time of these pilots Jobcentre Plus was divided geographically into 36 districts. The weekly signing trial took place in two of these districts: East London and West of Scotland. Recruitment for the trial took place between 27 February 2012 and 20 July 2012. This means that anybody whose claim reached 11-12 weeks during this period should have been assigned a pilot marker at the Fortnightly Jobsearch Review (FJR) on week 11/12 before weekly signing was due to commence. Claimants sign on either odd or even weeks, so the week in which the pilot marker is assigned would depend upon the individual's signing pattern. Those claimants assigned to the treatment group then received weekly signing from week 13 of their claim until the end of the pilot (July 2013), they left Jobseeker's Allowance (JSA), or they joined the Work Programme. Pilot markers were assigned to 12,843 people; of these, 6,360 were assigned to the control group (fortnightly signing) and 6,483 to the treatment group (weekly signing). As discussed earlier in this report, many people who were eligible for the trial did not have a pilot marker set, and this resulted in differences in the characteristics of the eligible non-participants when compared to the people with pilot markers. The extent of these differences varied between offices with West of Scotland having better coverage than East London.

The benefit history of the weekly signing group showed that they were more likely than controls to be in receipt of benefit during the 52 weeks prior to random assignment, but less likely to be on benefit 104-52 weeks before random assignment. Consequently, any change in benefit outcomes for weekly signers relative to controls may be influenced by this difference in benefit history as well as or instead of weekly signing.

Subgroup analysis suggested that benefit histories were particularly different for 18- to 24-year-old claimants. Further, controls in West of Scotland were more likely than weekly signers to be on benefits prior to the pilot and this difference reached 7 percentage points fifty-six weeks prior to the pilot. Over and above these differences, some people in the trial did not have a sustained claim for 11-12 weeks and therefore were not in scope of the pilots. This was especially common for 18- to 24-year-olds.

104 individuals were excluded from the analysis. This occurred for a variety of reasons:³

- 65 people received both treatment and control pilot markers, and spent more than one day in each condition;⁴

³ Some individuals may appear in more than one exclusion category.

Jobseeker's Allowance Signing Trials

- 28 sixteen- and seventeen-year-olds, who were not eligible for the pilot;
- 1 did not have a JSA claim recorded that corresponded to the trial period, which made benefit outcomes impossible to track;
- 20 whose pilot marker was assigned after the end of the pilot recruitment period, preventing 52-week tracking at the time of analysis.

3.1.2 Characteristics

As shown in Table 3.1, there were no significant differences between the two groups when comparing gender, age, ethnicity, disability, lone parent status and qualifications. Benefit history was also measured over the 104 weeks before recruitment to the trial, and no significant differences were found in either the number of benefit spells or the number of days on benefit. At face value this suggests that the random allocation produced similar treatment and control groups.

Nevertheless, Figure 3.2 shows a difference in participants' benefit history where the treatment group was more likely to be in receipt of benefits than the control group in the year prior to random assignment, but less likely to be claiming benefit 1 to 2 years before random assignment. Relative to the control group, the weekly signing group showed an increasing percentage of people in receipt of benefit prior to random assignment. Analysis of a trial that compares pilot participants to a control group assumes that, all else being equal, the treatment and control groups' benefit outcomes would show no difference. This assumption does not hold in this case. Any change in benefit claiming behaviour after random assignment might be, in part or whole, due to differences in benefit history rather than to weekly signing itself.

⁴ If a claimant received a treatment and a control pilot marker on the same day, it was assumed that the work coach had made a change to the marker (as pilot markers could not be removed once allocated). In this case, the second marker was kept. If the pilot markers were given on different days, it was difficult to know how the participant had been treated throughout the pilot. Other options, such as always using the first or last marker, were considered, but it was decided that keeping these people in the pilot marker analysis could introduce ambiguity in the pilot findings.

Table 3.1 Characteristics of the treatment and control groups in the weekly signing trial when analysed based on the pilot marker

Support option group	C	T	All
Observations	6,316	6,423	12,739
% where nominal allocation matches expected allocation	98%	98%	98%
	Personal / Demographic Characteristics		
Age (mean years)	34	34	34
Male (%)	64%	64%	64%
Disabled (%)	20%	19%	19%
Ethnic Minority (%) (non-white)	20%	19%	19%
Low Qualified (%)	13%	13%	13%
Lone Parent (%)	8%	8%	8%
	Benefit Receipt		
Benefit history (mean days claiming any benefit in past two years) [†]	314	316	315
Benefit spell history (mean spells in past two years) [†]	2.5	2.4	2.5
JSA spell history (mean spells in past two years) [†]	2.1	2.1	2.1
non-JSA spell history (mean spells in past two years) [†]	0.3	0.3	0.3

[†]past two years measured from date of random assignment.
All differences are non-significant at the 95% confidence level.

3.1.3 Benefit outcomes

As is shown in Table 3.2, there were significant differences in benefit outcomes between the treatment and control groups, where the control group spent 5.8 days more on benefit than the treatment group. This difference is significant at the 95% confidence level.

Table 3.2 Summary outcomes of the weekly signing trial over 52 week tracking period, analysed by pilot marker

	C	T
Observations	6,316	6,423
Benefit outcomes (mean days in receipt of any benefit over 52 weeks)	211	206*
In receipt of any benefit 52 weeks after random assignment	46%	44%
Benefit spells outcome (mean benefit spells on any benefit in 52 weeks)	1.69	1.70
JSA spells outcome (mean JSA spells in 52 weeks)	1.54	1.56

Jobseeker’s Allowance Signing Trials

non JSA spells outcome (mean ESA/IB/IS spells in 52 weeks)	0.14	0.15
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*Significant difference at 95% confidence level

Figure 3.1 shows the proportion of treatment and control participants in receipt of an out of work benefit during the 104 weeks before random assignment, and the 52 weeks afterwards. Note that the 104 weeks contains a 13 week period during which all of the cohort should have been in receipt of benefit, as this was a condition of eligibility for the trial (we observe a small shortfall where 98% rather than 100% receive benefit). From the 48-week pre-assignment point, there is also a trend towards controls being less likely than treatment participants to be in receipt of benefit.

This is more apparent in Figure 3.2, which shows the benefit impact of the trial each week, with error bars representing 95% confidence intervals. Figure 3.2 suggests a trend across the pre-assignment period, where the weekly signers are increasingly likely to be in receipt of benefit relative to the controls. Figure 3.2 also shows that, during the 13-week period between claim start and random assignment, the treatment group are less likely to be on benefit (all participants should be receiving JSA throughout this period).

After random assignment, the treatment group is less likely to be in receipt of benefit than the control group; as Table 3.2 shows, this difference is significant at the 95% confidence level. However, given the non-random benefit history, this is not necessarily a result of random signing. Indeed, given that prior to the pilot the treatment group was more likely to be on benefits than the control group, it may be that Figure 3.2 underestimates the pilot impact, if past benefit receipt is indicative of future benefit receipt.

Figure 3.1: Likelihood of claiming any out of work benefit before and after random assignment (pilot marker approach)

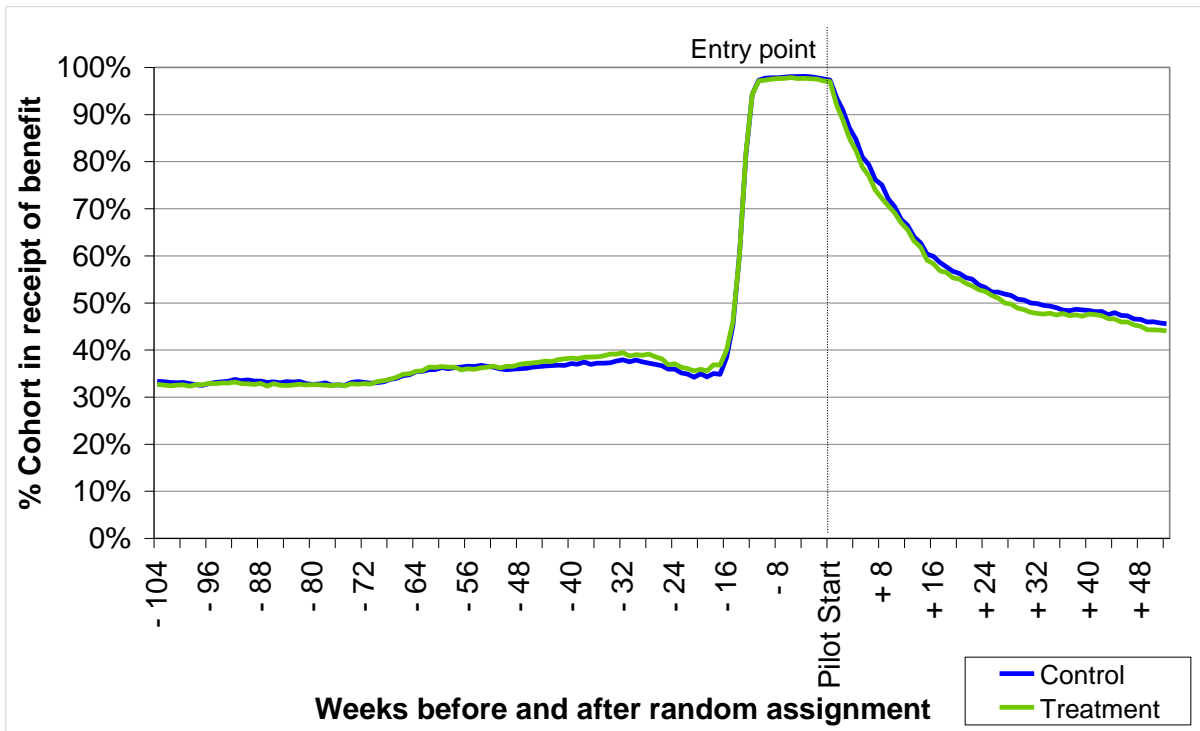
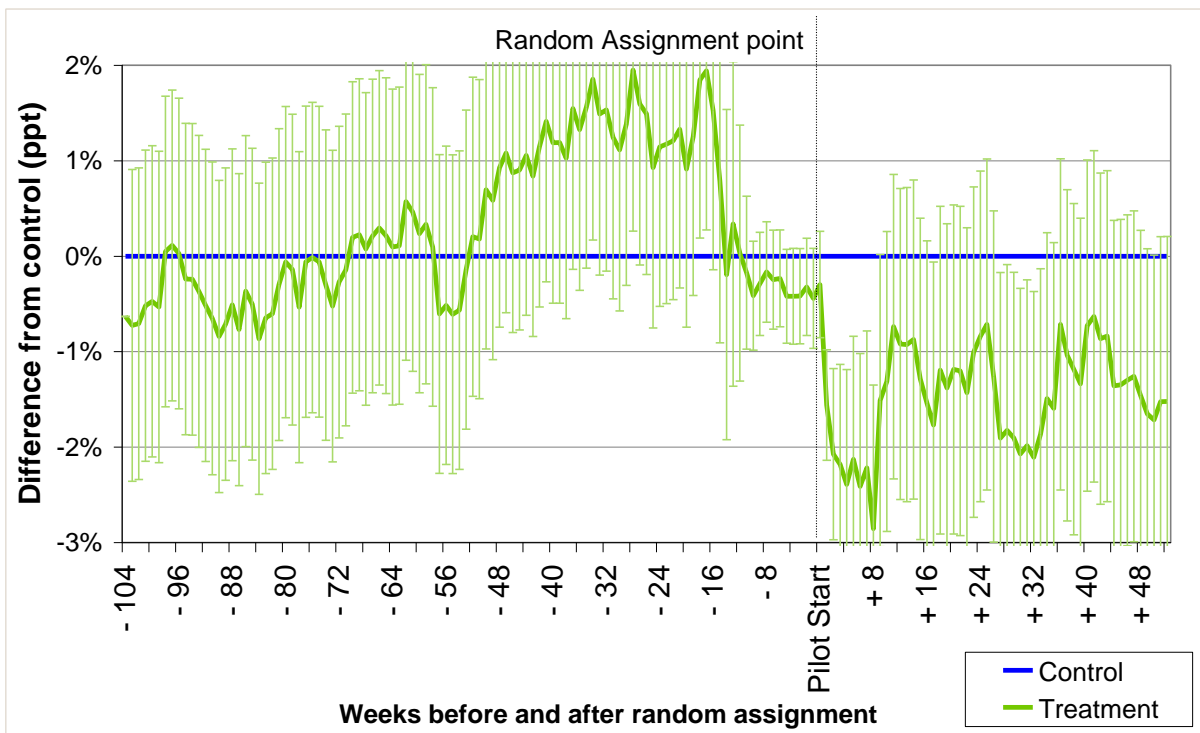


Figure 3.2: Benefit impact of weekly signing before and after random assignment (pilot marker approach)



3.2 Speed signing trial

3.2.1 Description of the pilot

Recruitment for the speed signing pilot took place in the Surrey & Sussex and Greater Manchester East & West (GMEW) Jobcentre Plus districts between 12 March 2012 and 25 May 2012. Claimants were recruited from the beginning of their claim. Treatment participants received FJRs of approximately half the standard duration. They continued to receive shortened FJRs for 52 weeks or until they joined the Work Programme. The trial also ended if the JSA claim ended, although if a new claim started within the pilot area the claimant was returned to the trial in the same condition.

The pilot marker allocation was generally done well, but a statistically significant age difference (0.3 years) was found between speed signers and controls. While statistically significant at the 95% confidence level, the difference was still very small. However, because of the low recruitment rate and for consistency with the analytical approach taken with the other pilots we focus on both the pilot marker results here, and the ITT results separately in Chapter 4.

During the speed signing recruitment period, 32,759 people were assigned pilot markers. This included 16,565 assigned to the control group (normal length signing) and 16,194 in the treatment group (speed signing). 1,664 people were excluded during analysis. This group contained:

- 139 people who were given both treatment and control group pilot markers;
- 1,426 people based at offices that encountered operational difficulties and ;
- 46 sixteen- and seventeen-year-olds (who were not in scope of the pilot);
- 32 people whose pilot marker was assigned after the end of the pilot, preventing 52-week tracking at the time of analysis.

3.2.2 Characteristics

Characteristics of the remaining 31,095 people with pilot markers are shown in Table 3.3. The treatment and control groups seem to be generally well matched and very similar. However, there is a small but statistically significant difference in age at the start of the trial between the control (33.4) and treatment (33.7) groups, where claimants receiving speed signing were slightly older. This suggests that the randomisation process did not produce perfectly matched treatment and control groups, although as the difference is very small, the effect will also be minimal.

Table 3.3 Characteristics of the treatment and control groups in the speed signing trial when analysed based on pilot marker

Support option group	C	T	All
Observations	15,733	15,362	31,095
% where nominal allocation matches expected allocation	99%	98%	98%
Personal / Demographic Characteristics			
Age (mean years)	33	34*	34
Male (%)	66%	65%	66%
Disabled (%)	18%	18%	18%
Ethnic Minority (%) (non-white)	18%	18%	18%
Low Qualified (%)	33%	33%	33%
Lone Parent (%)	6%	6%	6%
Benefit Receipt			
Benefit history (mean weeks claiming any benefit in past two years)	193	190	191
Benefit spell history (mean spells in past two years) [†]	2.4	2.4	2.4
JSA spell history (mean spells in past two years) [†]	2.2	2.1	2.1
non-JSA spell history (mean spells in past two years) [†]	0.3	0.3	0.3

[†]past two years measured from date of random assignment.

*Significant difference at 95% confidence level

3.2.3 Benefit outcomes

As is shown in Table 3.4, there were no significant differences in benefit outcomes between the treatment and control groups. Figure 3.3 shows that this was the case throughout the 52-week tracking period; as can be seen in Figure 3.4, the difference between treatment and control does not exceed 1.2 percentage points.

As there were differences between the treatment and control groups' benefit histories prior to random assignment, hypothetically there may be an effect of speed signing that is masked by these differences. However, the pilot marker results are corroborated by intention to treat (ITT) results (outlined in Chapter 4).

Table 3.4 Benefit outcomes of the speed signing trial over 52 week tracking period, analysed by pilot marker

	C	T
Observations	15,733	15,362
Benefit outcomes (mean days in receipt of any benefit over 52 weeks)	169	168
In receipt of any benefit 52 weeks after random assignment	32%	32%
Benefit spells outcome (mean benefit spells on any benefit in 52 weeks)	1.71	1.71
JSA spells outcome (mean JSA spells in 52 weeks)	1.55	1.55
non JSA spells outcome (mean ESA/IB/IS spells in 52 weeks)	0.16	0.15

All differences are non-significant at the 95% confidence level.

Figure 3.3 Likelihood of claiming any out of work benefit before and after random assignment (pilot marker)

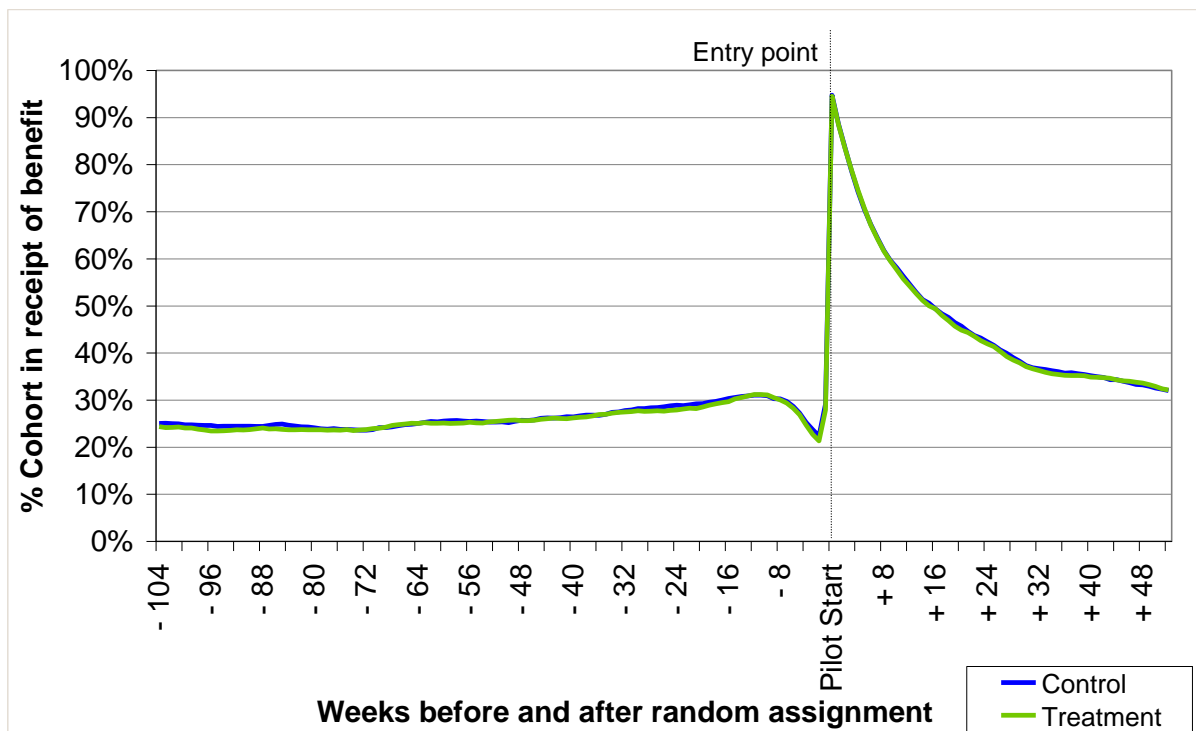
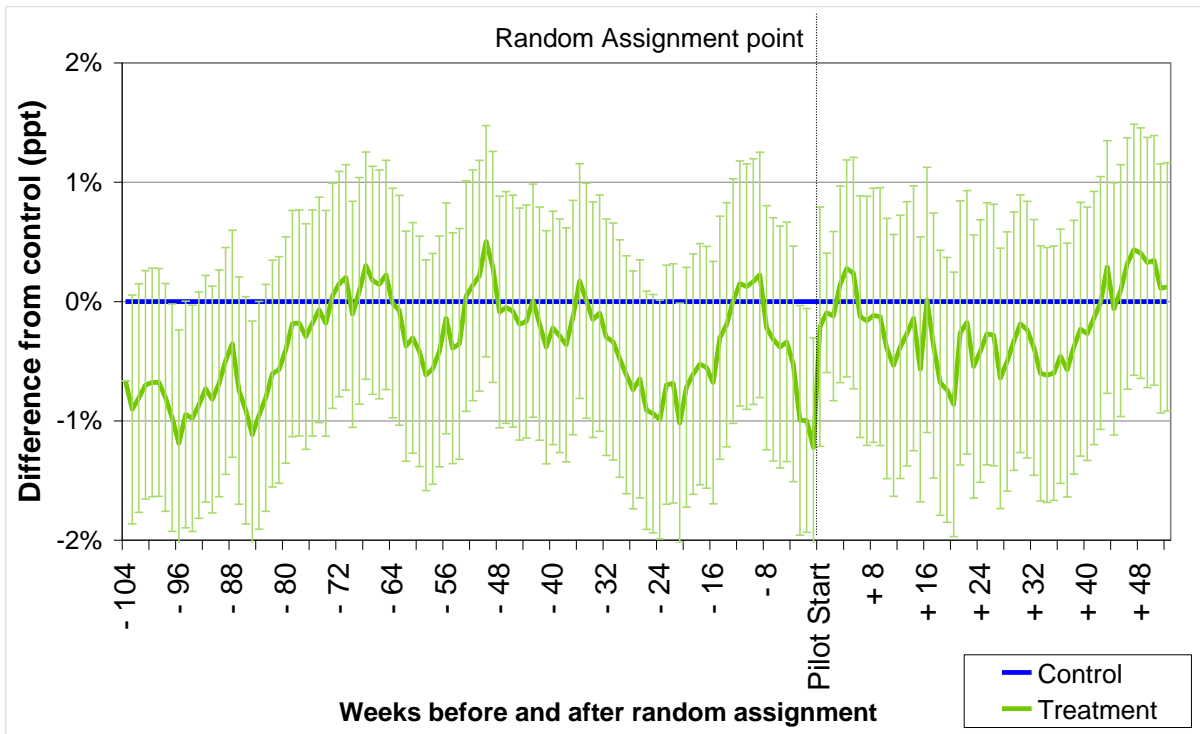


Figure 3.4 Benefit impact of speed signing before and after random assignment (pilot marker approach)



3.3 Flexible signing trial

3.3.1 Description of the pilot

The flexible signing trial recruited participants between 7 November 2011 and 24 February 2012 in Essex and Greater Manchester Central & Cheshire (GMCC) Jobcentre Plus districts. The trial districts were given the flexibility to change the frequency of treatment claimants' signing meetings but staffing levels were expected to remain the same. Consideration of the meetings-to-weeks ratio confirmed that the average ratio in treatment participants was 0.5, suggesting that the same overall resource was used (average frequency was fortnightly signing), although FJR duration is not recorded.

Different districts and offices chose different ways of doing this. Essex took a district-wide approach which included initial excusal from signing for claimants that work coaches believed were 'job ready' in weeks 1-8, followed by weekly signing from weeks 9-13 and reverting to fortnightly signing thereafter. In GMCC, different approaches were pursued in each office. For example, claimants in some offices were subdivided by age or distance from the labour market and assigned a signing pattern on this basis. It should be noted that many things were being tested in this pilot, for example, work coaches' ability to segment claimants, and both more-than-fortnightly and less-than-fortnightly signing. It could be that a significant positive impact in one flexible model could be 'balanced out' by a significant negative effect elsewhere. The pilot did not test 'flexibility' per se; only the variations of flexibility used.

As has already been acknowledged in this report, there were systematic and significant differences between the characteristics of the treatment and the control group in the flexible signing trial which means that any measured difference in benefit outcomes could be due to pre-existing differences between the groups, rather than the flexible signing regime. Accordingly, the findings from the pilot marker data are unlikely to reflect the effectiveness of flexible signing and are therefore not presented in this report.

4 Intention to treat analysis

4.1 Weekly signing trial

As there were doubts as to the robustness of the pilot marker data, an intention to treat (ITT) approach was also used. In order to capture the period with the highest percentage of people recruited to the trial, ITT analysis focused upon a group of claimants whose claims reached 91 days in the middle of the recruitment period. Therefore the claimants selected for ITT analysis reached the 13-week point of their Jobseeker's Allowance (JSA) claim between 12 March 2012 and 6 July 2012. This process selected 24,821 people; of these, 12,290 should have been in the treatment group (received weekly signing) while 12,531 should have been in the control group (fortnightly signing). Just under two-fifths of the people in the ITT analysis had pilot markers.

4.1.1 Measure of FJR frequency

Use of a database that lists each Fortnightly Jobsearch Review (FJR) attended by claimants allowed the calculation of a ratio of meetings attended to weeks in the trial. If the trial was conducted perfectly then the control group would be expected to have a meetings-to-weeks ratio of 0.5, as they would have a meeting every second week. The treatment group would have a ratio of 1.0, as they should have a meeting each week. In practice, ratios slightly below this would be expected as some meetings would be missed, for example due to bank holidays and failures to attend. Meetings-to-weeks ratios suggest that even restricting the analysis to the central weeks of the trial did not select many people who received weekly signing. In the control group, the median ratio was 0.50 (fortnightly signing); however, in the treatment group the median ratio was 0.57 (more frequent than fortnightly signing, but much less frequent than weekly). Therefore, while some people selected with the ITT methodology did receive weekly signing, they appear to have been in the minority, and so any effect of weekly signing measured using the ITT method will be heavily diluted.

4.1.2 Characteristics

As shown in Table 4.1, there were no significant differences in the characteristics of the treatment and control groups. This shows that the randomisation process was successful in creating balanced groups.

Table 4.1 Characteristics of the treatment and control groups in the weekly signing trial using an ITT approach

Support option group	C	T	All
Observations	12,531	12,290	24,821
Personal Characteristics			
Age (mean years)	33	33	33
Male (%)	64%	65%	64%
Disabled (%)	18%	18%	18%
Ethnic Minority (%) (non-white)	18%	18%	18%
Low Qualified (%)	12%	12%	12%
Lone Parent (%)	8%	8%	8%
Benefit Receipt			
Benefit history (mean days claiming any benefit in past two years) [†]	313	311	312
Benefit spell history (mean spells in past two years) [†]	2.5	2.4	2.5
JSA spell history (mean spells in past two years) [†]	2.2	2.2	2.2
non-JSA spell history (mean spells in past two years) [†]	0.3	0.3	0.3

[†]past two years measured from date of random assignment.

All differences are non-significant at the 95% confidence level.

4.1.3 Benefit outcomes

When benefit outcomes are considered for the weekly signing trial, the results are not significant at the 95% confidence level. As shown in Table 4.2, the treatment group spent an average of 2.6 fewer days on all benefits than the control group.

Table 4.2 Benefit outcomes of the weekly signing trial over 52 week tracking period, analysed on an ITT basis

	C	T
Observations	12,531	12,290
Benefit outcomes (mean days in receipt of any benefit over 52 weeks)	200	197
In receipt of any benefit 52 weeks after random assignment	41%	39%
Benefit spells outcome (mean benefit spells on any benefit in 52 weeks)	1.74	1.73
JSA spells outcome (mean JSA spells in 52 weeks)	1.59	1.59
non JSA spells outcome (mean ESA/IB/IS spells in 52 weeks)	0.15	0.14

All differences are non-significant at the 95% confidence level.

This is demonstrated in Figure 4.1, which shows the proportion of the cohort in receipt of an out of work benefit during the 104 weeks before random assignment, and the 52 weeks afterwards. Note that there is a 13 week period before random assignment during which all of the cohort were in receipt of benefit, as this was a condition of eligibility for the trial. The lines for the treatment and control groups are close together before the pilot start, indicating that the hypothetical random assignment was successful. The lines then start to diverge during the pilot period, particularly later in the pilot; this reflects a difference in likelihood of claiming benefit, where weekly signers are less likely than controls to be claiming benefit by the 52 week point (significant to the 90% confidence level). This is illustrated by Figure 4.2, which shows the difference in the percentage of controls and weekly signers in receipt of benefit. Error bars indicate 95% confidence intervals; weekly signers are significantly less likely to be on benefits at some points in the trial, but this is not sustained throughout the pilot period. However, the nature of ITT means that there is a risk that the impact of weekly signing is being underestimated. As weekly signing is still having a (potentially marginal) impact at the end of the first year, the overall impact of this signing regime may be bigger over a longer period of time.

Subgroup analysis was carried out to assess the effects of weekly signing upon different groups. The results are shown in Annex A.

Figure 4.1 Likelihood of claiming any out of work benefit before and after random assignment (ITT approach)

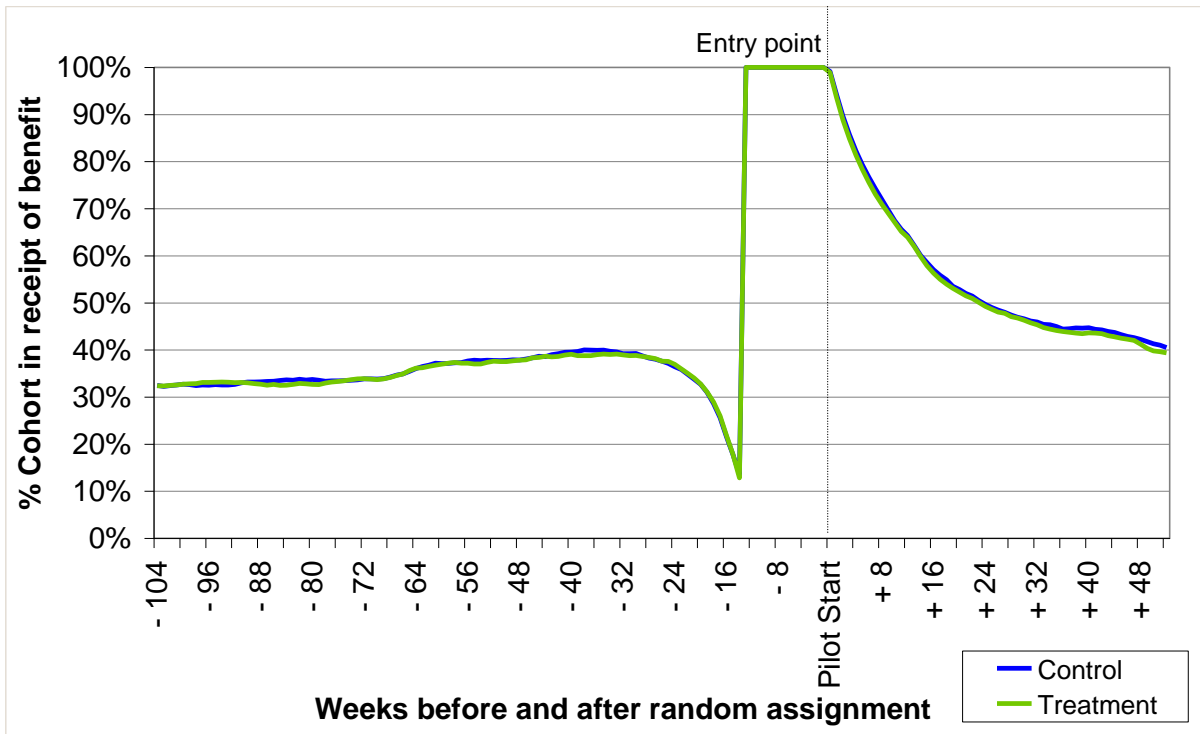
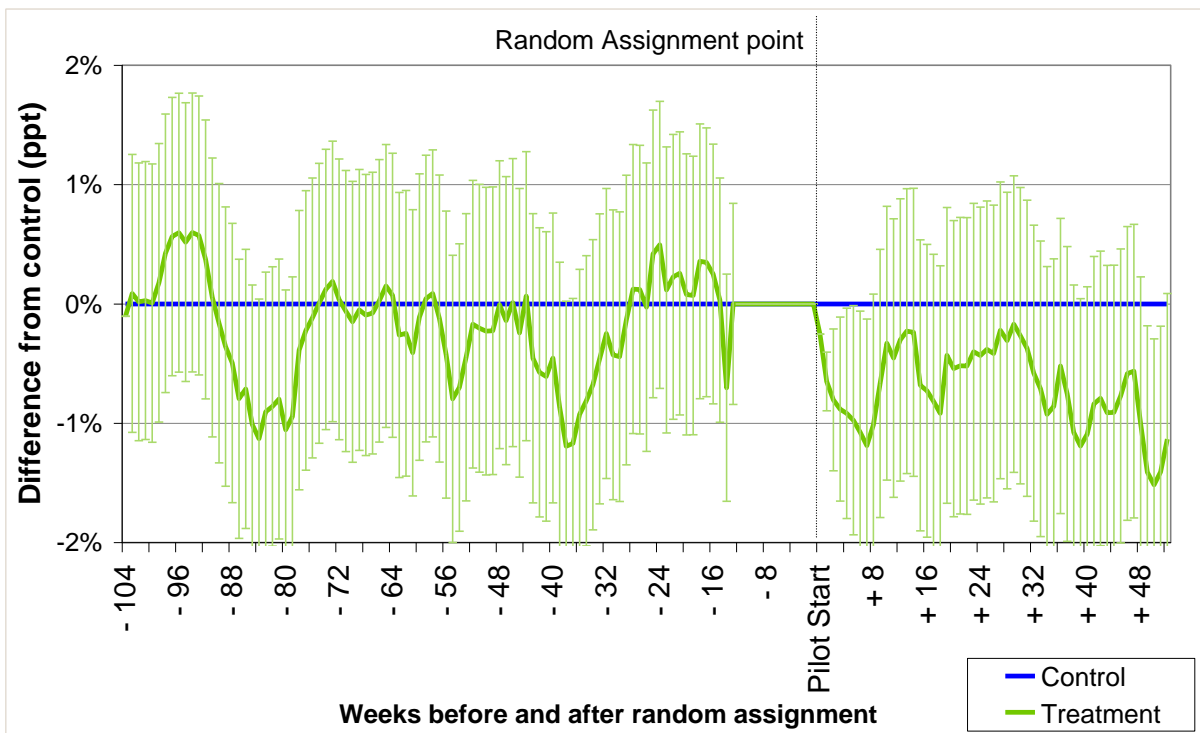


Figure 4.2 Benefit impact of weekly signing before and after random assignment (ITT approach)



4.1.4 National weighting

Subgroup analysis of the ITT results (Annex A) suggests that weekly signing had different sized effects for different groups of people. The data was weighted to reflect the characteristics of all starts nationally during the recruitment. If a particular combination of characteristics is over- (or under-) represented in the sample with respect to the UK average then a weight is applied to the impact for that group to increase (or decrease) it to reflect the percentage of people with those characteristics in the national client base. When the ITT data is weighted, the treatment group spent an average of 1.3 fewer days on all benefits than the control group. This reflects the fact that the subgroups for whom weekly signing had a larger impact were over-represented in the group that signed weekly relative to the UK population.

4.2 Speed signing trial

As with our weekly signing analysis, a reduced sample was selected including people who started a new JSA claim in the speed trial districts between 26 March 2012 and 11 May 2012. This resulted in selection of 22,502 people who should have been in the pilot; 11,246 should have been control group participants and 11,256 should have been in the treatment group.

4.2.1 Characteristics

The ITT approach removed the randomisation bias introduced by the incorrect pilot marker allocation. As shown in Table 4.3, there were no significant differences in any of the measured characteristics between the treatment and control groups.

Table 4.3 Characteristics of the treatment and control groups in the speed signing trial using an ITT approach

Support option group	C	T	All
Observations	11,246	11,256	22,502
	Personal / Demographic Characteristics		
Age (mean years)	34	34	34
Male (%)	66%	66%	66%
Disabled (%)	18%	19%	18%
Ethnic Minority (%) (non-white)	18%	19%	18%
Low Qualified (%)	32%	32%	32%
Lone Parent (%)	6%	5%	6%
	Benefit Receipt		
Benefit history (mean days claiming any benefit in past two years) [†]	203	205	204
Benefit spell history (mean spells in past two years) [†]	2.5	2.5	2.5
JSA spell history (mean spells in past two years) [†]	2.3	2.3	2.3
non-JSA spell history (mean spells in past two years) [†]	0.3	0.3	0.3

[†]past two years measured from date of random assignment.

All differences are non-significant at the 95% confidence level.

4.2.2 Benefit outcomes

The ITT approach suggests that speed signing has no effect on benefit outcomes relative to the standard FJR regime. There were no significant differences in the time spent on any benefits over the 52 week tracking period, as shown in Table 4.4. This is sustained throughout the tracking period (Figure 4.4). The impact, shown in Figure 4.4, is non-significant throughout the trial.

Table 4.4 Benefit outcomes of the speed signing trial over 52 week tracking period, analysed on an ITT basis

	C	T
Observations	11,246	11,256
Benefit outcomes (mean days in receipt of any benefit over 52 weeks)	180	180
In receipt of any benefit 52 weeks after random assignment	34%	34%
Benefit spells outcome (mean benefit spells on any benefit in 52 weeks)	1.73	1.73
JSA spells outcome (mean JSA spells in 52 weeks)	1.60	1.60
non JSA spells outcome (mean ESA/IB/IS spells in 52 weeks)	0.13	0.13

All differences are non-significant at the 95% confidence level.

Figure 4.3 Likelihood of claiming any out of work benefit before and after random assignment (ITT approach)

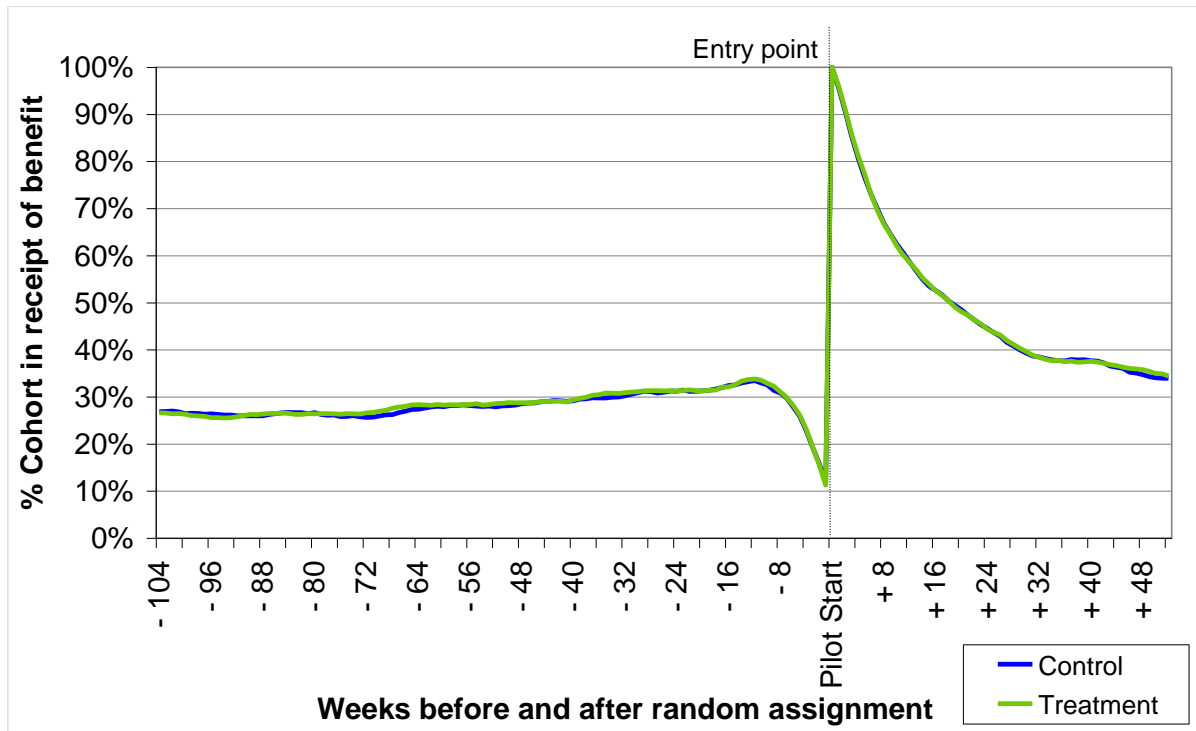
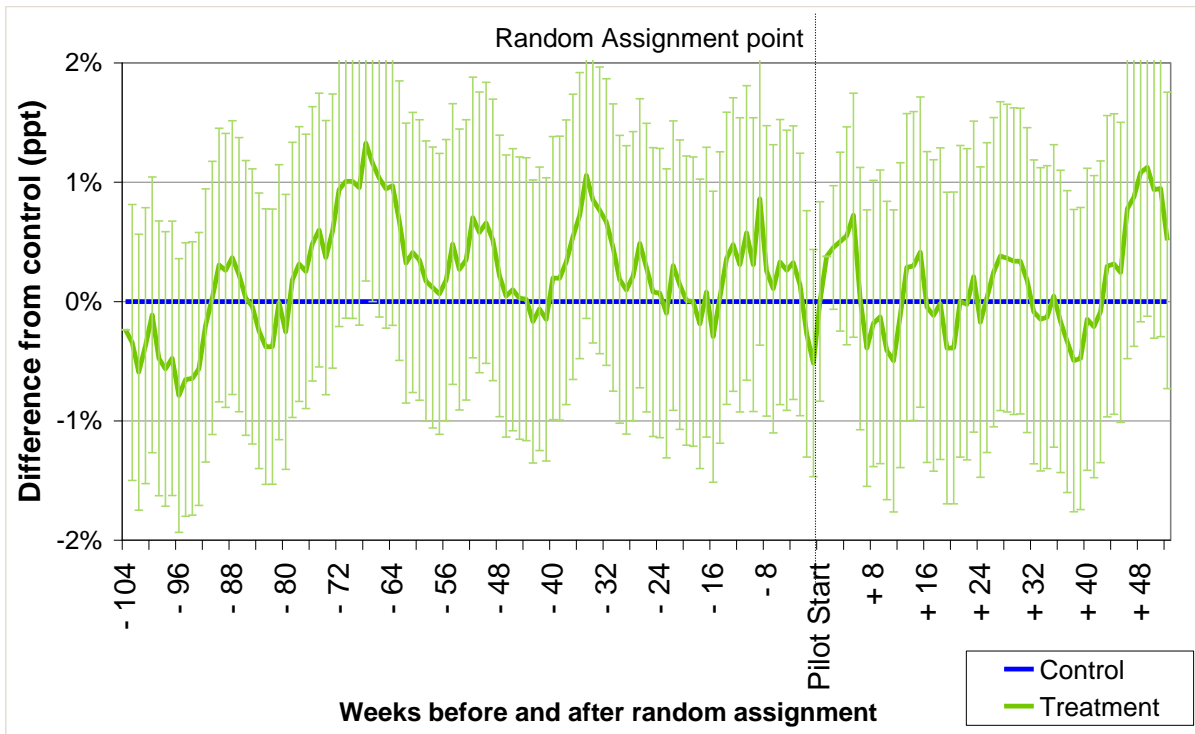


Figure 4.4 Benefit impact of speed signing before and after random assignment (ITT approach)



It should be noted that the ITT approach may be masking a negative effect of speed signing if only a small percentage of the group studied actually received shorter FJR. However, as Table 2.2 shows the majority of eligible participants did have a marker set and it is possible that eligible participants without a marker still underwent the pilot process. Further, the pilot marker data in Chapter 3 support the ITT findings, so we think it unlikely that speed signing does have a sizeable negative impact that we have been unable to detect.

4.3 Flexible signing trial

In the case of the flexible signing trial, an ITT approach allows a more valid assessment of the pilot impact than does the pilot marker data because of systematic differences between the people with a treatment marker and a control marker. As with the other trials, selection was limited to the middle weeks of the recruitment period (21 November 2011 to 10 February 2012). This resulted in a population of 41,095 people, of whom 20,480 people should have been allocated to the treatment group (flexible signing) and 20,615 to the control group (standard signing).

4.3.1 Characteristics

As shown in Table 4.5, there were no significant differences between the treatment and control groups in any of the demographic variables measured. This confirms that the biases found in the pilot marker allocation did not affect the ITT allocation.

Table 4.5 Characteristics of the treatment and control groups in the flexible signing trial using an ITT approach

Support option group	C	T	All
Observations	20,615	20,480	41,095
	Personal / Demographic Characteristics		
Age (mean years)	33	33	33
Male (%)	67%	67%	67%
Disabled (%)	17%	17%	17%
Ethnic Minority (%) (non-white)	17%	17%	17%
Low Qualified (%)	15%	15%	15%
Lone Parent (%)	6%	6%	6%
	Benefit Receipt		
Benefit history (mean days claiming any benefit in past two years) [†]	199	199	199
Benefit spell history (mean spells in past two years) [†]	2.5	2.5	2.5
JSA spell history (mean spells in past two years) [†]	2.2	2.2	2.2
non-JSA spell history (mean spells in past two years) [†]	0.2	0.3	0.2

[†]past two years measured from date of random assignment.

All differences are non-significant at the 95% confidence level.

4.3.2 Benefit outcomes

Table 4.6 shows that there was no significant effect of the flexible signing regime. Figures 4.5 and 4.6 show that this is the case throughout the trial. As can be seen in Figure 4.6, earlier in the trial flexible signers were more likely to be receiving benefit

Jobseeker’s Allowance Signing Trials

than controls (although this never reached statistical significance). However, the difference never exceeds 0.8 percentage points, and the difference disappears by thirty weeks.

Table 4.6 Benefit outcomes of the flexible signing trial over 52 week tracking period, analysed on an ITT basis

	C	T
Observations	20,615	20,480
	Benefit Impact	
Benefit outcomes (mean days in receipt of any benefit over 52 weeks)	181	182
JSA Benefit outcomes (mean days in receipt of JSA over 52 weeks)	101	102
ESA/IB/IS Benefit outcomes (mean days in receipt of ESA/IB/IS over 52 weeks)	6	5
In receipt of any benefit 52 weeks after random assignment	34%	34%
Benefit spells outcome (mean benefit spells on any benefit in 52 weeks)	1.70	1.70

All differences are non-significant at the 95% confidence level.

Figure 4.5 Likelihood of claiming any out of work benefit before and after random assignment (ITT approach)

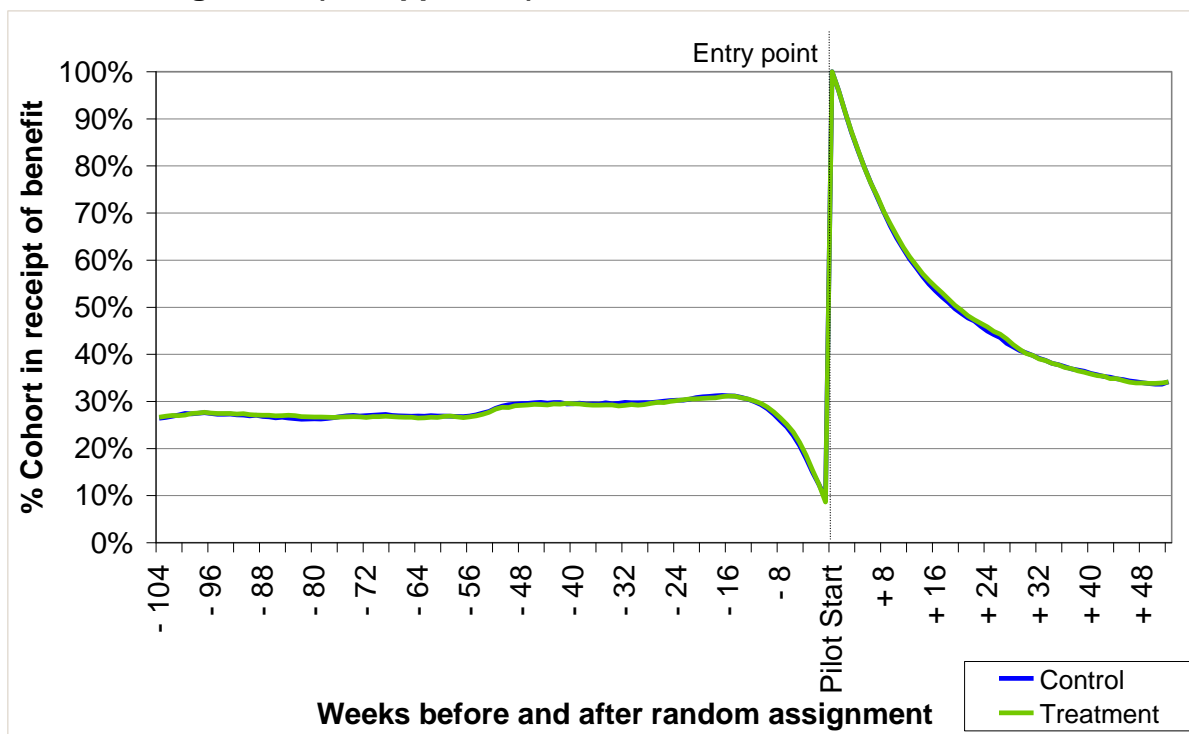
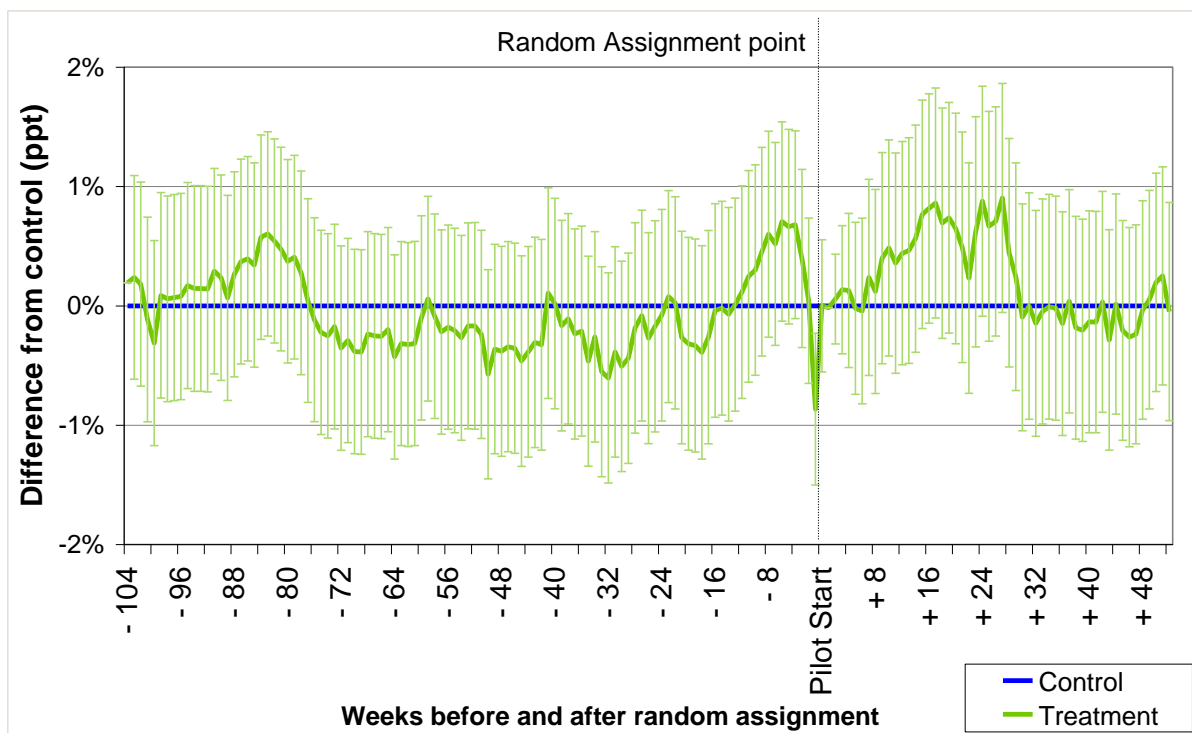


Figure 4.6 Benefit impact of flexible signing before and after random assignment (ITT approach)



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Annex A: Weekly signing trial ITT - subgroup analysis

The intention to treat (ITT) data was broken down into subgroups in order to test whether the effect of weekly signing is changed by certain characteristics. The subgroup analyses carried out were:

- Jobcentre Plus district breakdown: weekly signing participants from East London and West of Scotland were treated as separate groups;
- Age breakdown: participants were divided based upon their age at the start of the trial: 18- to 24-year-olds were considered separately to over-25s (under-18s were not eligible for the trial);
- Benefit history: claimants were divided into those with high and low benefit relative to the median benefit history (days on benefit in the past 104 weeks) of the treatment group. Where the benefit history was the same as or greater than the median value, the claimant was classed as 'high benefit history'.

The results of the subgroup analysis of the weekly signing trial are shown in Table A1. In West of Scotland, weekly signers spent an average of 6.3 fewer days on benefit than controls undergoing fortnightly signing. The impact at the 52-week point was also significant. In East London, the difference in time spent on benefits (0.45 days) was not significant.

There were differences in the characteristics of people in the two districts which may partly account for the different effectiveness of weekly signing. Nonetheless, because a difference in impacts is evident we present age and benefit history breakdowns separately for these two districts.

In West of Scotland, weekly signing reduced time spent on benefits in 18- to 24-year-olds only; no effect was found in older people. Neither age group was affected by weekly signing in East London.

The benefit history split suggests a significant impact on people with low benefit histories in West of Scotland. However, while this impact is significant to the 95% confidence level, the control group had a higher percentage of disabled and ethnic minority participants (significant at the 99% level). This means that the impact could be partly attributable to the pre-existing differences in other characteristics rather than to weekly signing.

Table A1 Benefit outcomes of the weekly signing trial on subgroups over 52 week tracking period, analysed on an ITT basis

Subgroup	Observations		Benefit outcomes (over 52 weeks)		Percentage in receipt of benefit at 52 weeks	
	C	T	C	T	C	T
Jobcentre Plus district breakdown						
East London	7,688	7,454	190	190	36%	36%
West of Scotland	4,843	4,836	215	209*	48%	45%*
Age breakdown						
18-24 years (East London)	2,317	2,219	180	180	37%	35%
18-24 years (West of Scotland)	1,627	1,596	204	194*	47%	42%*
25+ years (East London)	5,371	5,235	194	194	36%	36%
25+ years (West of Scotland)	3,216	3,240	220	216	48%	47%
Benefit history breakdown						
High benefit history (East London)	3,884	3,729	219	218	46%	46%
High benefit history (West of Scotland)	2,452	2,419	252	247	60%	59%
Low benefit history (East London)	3,804	3,725	161	161	26%	25%
Low benefit history (West of Scotland) ^{††}	2,391	2,417	177	170	35%	32%*

*Significant difference at 95% confidence level

††Significant difference in one or more characteristics at 99% confidence level (i.e. randomisation did not work successfully in this group)

Annex B: Speed signing trial ITT - subgroup analysis

As with the weekly signing trial, the speed signing trial data was broken down by district, age and benefit history. As shown in Table B1, no significant effect was found in either district or in any subgroup. This suggests that there will be no impact on any individual subgroup if faster Fortnightly Jobsearch Reviews (FJR) are implemented.

Table B1 Benefit outcomes of the speed signing trial on subgroups over 52 week tracking period, analysed on an ITT basis

Subgroup	Observations		Benefit outcomes (over 52 weeks)		Percentage in receipt of benefit at 52 weeks	
	C	T	C	T	C	T
Jobcentre Plus district breakdown						
Surrey & Sussex	5,104	5,213	165	166	28%	28%
GMEW	6,142	6,043	192	193	39%	40%
Age breakdown						
18-24 years (Surrey & Sussex)	1,616	1,644	150	152	27%	30%
18-24 years (GMEW)	2,164	2,043	181	184	38%	39%
25+ years (Surrey & Sussex)	3,488	3,569	171	173	29%	28%
25+ years (GMEW)	3,978	4,000	199	197	39%	40%
Benefit history breakdown						
High benefit history (Surrey & Sussex)	2,600	2,612	197	199	40%	39%
High benefit history (GMEW)	2,994	3,024	230	232	52%	52%
Low benefit history (Surrey & Sussex)	2,504	2,601	131	133	16%	17%
Low benefit history (GMEW)	3,148	3,019	157	153	26%	27%

All differences are non-significant at the 95% confidence level.

Annex C: Flexible signing trial ITT - subgroup analysis

As with the other trials, the flexible signing trial data was broken down by Jobcentre Plus district, age and benefit history. The findings are outlined in Table C1. The two districts used different approaches to flexible signing, where Essex took a district-wide approach and GMCC allowed different approaches in different offices. However, no significant effect was found in either district for any subgroup.

Table C1 Benefit outcomes of the flexible signing trial on subgroups over 52 week tracking period, analysed on an ITT basis

Subgroup	Observations		Benefit outcomes (over 52 weeks)		Percentage in receipt of benefit at 52 weeks	
	C	T	C	T	C	T
Jobcentre Plus district breakdown						
Essex	8,821	8,727	173	174	32%	32%
GMCC	11,794	11,753	188	188	36%	35%
Age breakdown						
18-24 years (Essex)	3,172	3,134	168	170	33%	32%
18-24 years (GMCC)	4,133	4,003	184	181	34%	33%
25+ years (Essex)	5,649	5,593	177	177	32%	32%
25+ years (GMCC)	7,661	7,750	189	192	36%	37%
Benefit history breakdown						
High benefit history (Essex)	4,435	4,370	206	205	43%	44%
High benefit history (GMCC)	5,864	5,881	226	226	48%	48%
Low benefit history (Essex)	4,386	4,357	141	143	21%	21%
Low benefit history (GMCC)	5,930	5,872	150	150	23%	23%

All differences are non-significant at the 95% confidence level.