

MEAM

Year 3 evaluation: technical appendix

August 2020



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1 Evaluation methodology

1.1 Overview of methodology

This is the technical appendix for year 3 of the MEAM Approach evaluation, based on data covering the period April 2017 to March 2020. The year 3 evaluation explores the implementation and impact of local work using the MEAM Approach in 27¹ MEAM Approach areas². It also involved focused research on the theme of MEAM Approach partnerships.

Figure 1 provides an overview of the methodology used in the year 3 evaluation. In order to best address the year 3 research theme some of the methods differ to those used in year 2. Most notably we have not conducted any interviews with clients in year 3.

A more detailed description of each method is included in sections 1.5 to 1.9.

Figure 1 Summary of year 3 evaluation methodology



1.2 Year 3 thematic research on partnerships

The year 3 thematic research on partnerships was agreed with the evaluation steering group. It aimed to provide a clearer understanding of the partnership structures in local areas in the MEAM Approach network, addressing five specific research questions. These were:

¹ i) At the time of reporting there were 31 areas in the MEAM Approach network. Seven of these areas joined the network after the beginning of year 3 and are therefore not included in the year 3 evaluation (31-7=24). In addition to these 24 areas the evaluation includes two areas that left the network after the beginning of year 3 and one area that left in year 2 but provided anonymised client-level data for the period when they worked with clients (24+3=27). ii) Five of these 27 areas have not participated in any element of the year 3 evaluation activities.

² This builds on the scoping and evaluation work conducted in years 1 and 2 of the evaluation. To find out more about the methods and findings of previous years, please read the year 1 and 2 reports [here](#).

1. What structures exist to make the frontline work possible (e.g. strategic and operational groups)? What are the features of the strategic and operational groups (membership, organisational structure, remit, resourcing, governance, responsibilities etc.)?
2. How impactful are different strategic and operational groups (or other MEAM Approach partnership structures)?
3. If there are differences in the efficacy and/or impact of operational and strategic groups (or other MEAM Approach partnership structures) in different local areas, what might explain these differences?
4. What are the key features for effective MEAM partnerships?
5. What are the main challenges in setting up and running strategic and operational groups (or other MEAM Approach partnership structures)?

1.3 Collaboration

We are working in collaboration with an expert by experience research group to deliver this evaluation. Throughout year 3 we collaborated with the research group to:

- Design the research tools for interviews and observations over two day-long workshops.
- Carry out in-depth fieldwork in five local areas.
- Analyse the qualitative data collected during fieldwork through one day-long workshop.
- Sense-test the year 3 findings and report through three virtual meetings.

We have also worked collaboratively with MEAM, local areas and experts by experience since year 1 of the evaluation to:

- Determine the evaluation questions and the year 3 thematic research questions.
- Develop an evaluation framework which outlined how we would address the key evaluation questions.
- Implement the evaluation methods.
- Design, discuss and agree research tools and approaches.

To find out more about the methods and findings of previous years, please read the year 1 and 2 reports [here](#).

1.4 Limitations

The evaluation seeks to be as robust as possible within the time and resources available. However, there are some key challenges and limitations to the year 3 evaluation:

- **The roll-out of the MEAM Approach and local work relating to it is a large-scale and complex programme taking place across a high number of different sites.** Within the resource for the evaluation it is not possible to focus in detail on all local variations in implementation and impact. Instead the evaluation seeks to focus on key stakeholders' priorities in terms of evaluation questions and areas of interest. We have utilised a mixed multi-method approach so that we are able to triangulate findings to make sense of this complexity.
- **Attributing impact to the MEAM Approach and local work developed using it is challenging because:**
 - It was not possible to use Randomised Control Trials or Quasi-Experimental evaluation approaches within this evaluation. These are generally acknowledged as strong methods in attributing impact to specific programmes and to ruling out the influence of other factors on outcomes. However, using a mixed multi-method approach allows us to make judgements concerning attribution and also emerging areas of impact and good practice. Over time, we also intend to make reference to findings from the 'control group' of local areas developed as part of the Fulfilling Lives evaluation, being delivered by CFE Research.
 - There is currently no tool in place for measuring the fidelity of local areas' work to the MEAM Approach, although this is being explored by the MEAM team. A mechanism for measuring fidelity will enable us to explore whether there are links between local areas' fidelity to the MEAM Approach elements and the outcomes they are achieving.
 - It takes time for impact to be achieved and to become evident in programmes with a focus on system change. However, we are in a better position to assess impact than last year.
- **Challenge of collecting CDF data for service use data for clients' first quarter of support.** We understand that some areas have found it challenging to provide information on clients' service use for the period of the quarter that precedes the date at which their support began. We have worked hard with areas to clarify where this is happening and to identify solutions and will continue to do so in year 4. However, it is possible that some historically provided service use data still only covers a partial quarter. This may artificially lower service use levels for clients' first quarter of support, the data which is used to baseline service use in this report. This may therefore reduce the magnitude of reductions in service use where they exist, and reduce the likelihood of finding such reductions to be statistically significant. We will seek to gain further clarity and accuracy in this data in year 4.

- **Impacts of the COVID-19 pandemic.** The COVID-19 pandemic hit the UK in March 2020. This had several notable impacts on the evaluation:
 - **Reduced expert by experience input.** We had to cancel the second qualitative data analysis workshop with the expert by experience research group, which we were unable to reschedule (virtually) within the given timescales. We were able to continue with all other planned expert by experience research activity through virtual means with little disruption.
 - **Limited CDF data submissions for quarter 12.** The scope of data requested for quarter 12 was narrowed in order to reduce pressure on CDF leads, multiple disadvantage coordinators and partner services that contribute data. Areas were asked to focus on providing baseline (first quarter of support) and quarter 12 data for HOS, NDTA, service use and accommodation, and to provide self-reported data unless partners had capacity to provide administrative data. This meant we received less data on clients' service use before they joined the programme and for interim quarters. However, data were returned for the prioritised areas at a higher rate than observed in previous data submission rounds.

1.5 Common data framework (CDF)

1.5.1 Overview

Anonymised data have been collected quarterly on an ongoing basis from each MEAM Approach area using a common data framework (CDF)³ since the beginning of the evaluation⁴. The CDF is used to collect the following data types for all clients supported by interventions developed using the MEAM Approach in each area:

- Homelessness Outcomes Star (HOS) – measures change across ten areas of a person's life.
- New Directions Team Assessment (NDTA) – measures change across ten areas of a person's life.
- Accommodation data, either self-reported or from administrative sources (including: accommodation type at the beginning of support; accommodation type at the end of each quarter; and number of days per quarter spent in different accommodation types – see Section 3.7 for more detail).
- Service use data, either self-reported or from administrative sources (the number of instances of use, per quarter, of five different unplanned service types – see Section 3.6 for more detail).

³ Through this framework, anonymised data are collected in a uniform way, enabling comparison across areas.

⁴ The first quarter began 01/04/2017. As at the end of Year 3 of the evaluation, data had been collected for 12 quarters up to 31/03/2020.

The year 3 report includes data covering quarters 1 to 12 of the evaluation (01/04/2017 to 31/03/2020) from 579 clients who started receiving support from interventions developed using the MEAM Approach during this period. These data are analysed to understand changes experienced by clients as well as the economic impact of these changes. An overview of the CDF cohort and the results of this analysis are in Section 3.

1.5.2 Changes to CDF in year 3

The following changes to the CDF were made in Year 3:

- **Post-support service use data no longer collected.** Areas are no longer asked to provide service use data for a further 12 months post-support in cases where a client's support has ended. This decision was made so that local areas can focus their resources on improving or maintaining a high quality of data returns for the other types of data.
- **Flag for returning clients introduced.** This enables us to identify more reliably where clients are returning for a second period of support. All (eligible) episodes of support are included in the analysis. This means that returning clients may be included in the analysis twice or more (although as noted in the main report the incidence of returning clients is low).
- **Option for listing clients' accommodation as "unknown" introduced.** This enables distinction between cases of missing data and cases where the client's whereabouts were not known. We have excluded clients with missing accommodation data from the analysis.
- **Changes made to ethnicity categories.** Based on feedback from local areas the ethnicity category labels have been amended to align more closely with the census categories.

In addition to the above permanent changes, **a more focussed approach was temporarily introduced for quarter 12.** The quarter 12 data were due at the end of April 2020, which was in the middle of the COVID-19 pandemic crisis. In order to reduce pressure on CDF leads, multiple disadvantage coordinators and partner services that contribute data, areas were asked to focus on providing the baseline (first quarter of support) and quarter 12 data for HOS, NDTA, service use and accommodation, and to provide self-reported data unless partners had capacity to provide administrative data.

1.5.3 Approach to analysis in Year 3

Selection of approach to analysis

The approach to analysis of the CDF data was determined as follows:

- A menu of possible approaches to analysis was agreed and prioritised with MEAM during year 3.

- At the end of year 3, the available CDF data was cleaned, with data errors removed. The data quality of the cleaned CDF dataset was then assessed. The valid sample size and number of eligible clients were calculated for each of the proposed approaches.
- Final approaches to analysis were agreed with MEAM based on a) the results of the data quality check, b) the previously agreed prioritisation of approaches, c) comparability with the Fulfilling Lives evaluation, d) robustness and validity of the approach and e) the adapted CDF request to areas due to the COVID-19 crisis.

A note on CDF analysis in future years

As the size of the CDF dataset grows and data quality continues to improve we anticipate adjusting our approaches to analysis towards more robust approaches. These adjustments may include:

- Apply more rigorous baseline criteria to time 1 data for all data types.
- Use data on clients' service use in the 12 months prior to support as a time 1 baseline, rather than data from their first quarter support.
- Explore change in HOS and NDTA over several time points, for example at baseline, after 12 months and after 18 months or longer.

Approaches to analysis

The selected approaches are described in Figure 2. Also described in Figure 2 are some exceptions which were made to the exclusion criteria, to enable as large a sample size as possible whilst remaining faithful to the principles of the inclusion criteria. Analysis of the data is presented in section 3.

Figure 2: Description of approach to analysis and valid samples for HOS, NDTA, accommodation data, and service use data in the year 3 report

Data type (n)	Sample criteria
HOS (n=158)	<p>Clients who have been supported for at least two quarters, with the following HOS available:</p> <ul style="list-style-type: none"> • Time 1: Client's first HOS is dated between one month before and three months after start of support. • Time 2: HOS from client's last quarter of support if support ended or most recent quarter of support (i.e. quarter 12) if still being supported.⁵

⁵ Eight clients had quarter 13 HOS but no quarter 12 HOS. Quarter 13 HOS data were included as a proxy for quarter 12 data for these clients.

Data type (n)	Sample criteria
NDTA (n=159)	Same as HOS sample described above.
Service use data (n=321 to 349)	<p>Clients who have been supported for at least two quarters, with the following data available for a specific service use:</p> <ul style="list-style-type: none"> • Time 1: Client's first quarter of support.⁶ • Time 2: Last quarter of support if support ended or most recent quarter of support (i.e. quarter 12) if still being supported.
Accommodation data (n=244)	<p>Clients who have been supported for at least two quarters, with all nights in the quarter⁷ either accounted for or reported as "unknown" in the following quarters:</p> <ul style="list-style-type: none"> • Time 1: Client's first quarter of support.⁸ • Time 2: Last quarter of support if support ended/most recent quarter of support (i.e. quarter 12) if still being supported.

Inclusion of data on nights in prison

Nights in prison are included in the analyses of both service use data and accommodation data presented in this appendix because they are relevant to both:

- They represent involvement with the criminal justice system which would ideally be reduced if work developed using the MEAM Approach enables successful outcomes in this area. In this sense, they are a type of "service use" which is a focus of work using the MEAM Approach, and the evaluation.
- However, clients who spend nights in prison necessarily also spend fewer nights rough sleeping, staying with family and friends or staying in other types of accommodation, making it relevant to our understanding of their accommodation situation.

⁶ 44 to 47 clients (numbers vary across service use type) began support in the last month of a quarter but did not have service use data available until the second quarter of support. Data from the second quarter of support were used as proxy baseline data for these clients.

⁷ With a leeway of +/- 2 nights.

⁸ 52 clients began support in the last month of a quarter but did not have accommodation data available until the second quarter of support. Data from the second quarter of support were used as proxy baseline data for these clients.

The analyses of service use data and accommodation use data are based on different samples. This means that the reported findings relating to nights in prison vary in the different analyses.

To avoid representing the cost of prison twice within the evaluation findings, the cost of nights in prison is only included in the economic analysis relating to service use data. This is because its primary function is as a criminal justice intervention and not an accommodation option. In addition, the sample for the service use data analysis is larger which may make findings drawn from this analysis more robust.

Economic analysis

In order to understand the economic implications of changes identified for clients, we have applied economic tariffs to the service use and accommodation analysis where applicable, which are set out in Figure 3 and Figure 4. These were agreed with MEAM and CFE research with the aim of ensuring the MEAM Approach evaluation findings are comparable with findings of the Fulfilling Lives evaluation. We sought to use 2019 cost tariffs. Where these were not available we have inflated costs to 2019 levels⁹. Economic analysis is available in section 3.7.

Figure 3: Service use cost tariffs

Type of service use	Tariff	Source / information
A&E	£166 per attendance	NHS Improvement (2018) <i>Reference costs 2017/18: highlights, analysis and introduction to the data</i> , NHS Improvement, p.5: "A&E attendance 2017/18" (£160 which we inflated to 2019 prices).
Non elective acute admissions	£631 per episode	Curtis, L. & Burns, A. (2020) <i>Unit Costs of Health and Social Care 2019</i> , Personal Social Services Research Unit, University of Kent, Canterbury, p.82: "Non-elective inpatient stays (short stays)".
Mental health admissions	£430 per bed day	Curtis, L. & Burns, A. (2020) <i>Unit Costs of Health and Social Care 2019</i> , Personal Social Services Research

⁹ We calculated the 2019 costs using the GDP Deflator tool: <https://www.gov.uk/government/collections/gdp-deflators-at-market-prices-and-money-gdp>

Type of service use	Tariff	Source / information
		Unit, University of Kent, Canterbury, p.36: "Mental health care clusters (per bed day)".
Arrests	£750 per arrest	Greater Manchester Combined Authority (2019), Unit Cost Database : "Arrests – detained".
Prison	£107 per night in prison	Greater Manchester Combined Authority (2019), Unit Cost Database : "Average cost across all prisons, including central costs (costs per prisoner per annum)": £38,974/365 = £107/night).

Figure 4: Accommodation cost tariffs

Accommodation type	Accommodation grouping ¹⁰	Tariff	Source / information
Rough sleeping	Rough sleeping	No cost ¹¹	-
Living with family/friends	Family and friends	No cost	-
Night shelter ¹²	In accommodation (temporary or license i.e. no tenancy agreement)	£310 per week	DWP and DCLG (2016) Supported accommodation review: The scale, scope and cost of the supported housing sector , p.53: "Working-age claimants in Specified Accommodation average Weekly Housing Benefit award" (£173/week which we inflated to £187 at 2019 prices) plus p.64: "Estimated additional spend on supported housing beyond Housing Benefit for single homeless people" (£177.5m per annum /estimated 30,000 single homeless people = £113/week, which we inflated to £123/week at 2019 prices).
B&B/private hostel			
Emergency or assessment bed within a service			
Supported accommodation (licence)			

¹⁰ These groupings have been agreed with CFE Research to ensure that future analyses of accommodation use within the national MEAM Approach and national Fulfilling Lives evaluations are comparable.

¹¹ Accommodation costs are zero. Other costs associated with rough sleeping such as health service use costs are covered under service use.

¹² We considered introducing a separate tariff for night shelter accommodation because we understand provision of night shelter accommodation to cost much less than the accommodation grouping tariff of £310 per week. However, there is relatively low use of night shelters among the evaluation cohort, and changes in use over time are not statistically significant. We therefore have applied a broad tariff across the whole accommodation grouping so as to maximise comparability with the national Fulfilling Lives evaluation.

Accommodation type	Accommodation grouping ¹⁰	Tariff	Source / information
Supported accommodation (tenancy)	In accommodation (long-term supported, with tenancy agreement)	£310 per week ¹³	DWP and DCLG (2016) Supported accommodation review: The scale, scope and cost of the supported housing sector . See section above.
Own tenancy (social housing)	In accommodation (own or shared tenancy, with or without floating support)	£95 per week	Greater Manchester Combined Authority (2019), Unit Cost Database : “Housing benefit – average weekly award, across all tenure types” – average weekly award for single person with no dependents in May 2018 is £93, which we inflated to £95 at 2019 prices. (We have assumed that people in their own or shared accommodation will be receiving housing benefit.)
Own tenancy (private rented)			
Own tenancy (owner occupier)			
Shared tenancy			
Other	Other	N/A	N/A
Not given	Not given	N/A	N/A

¹³ We have applied the same tariff to “In accommodation (temporary or license i.e. no tenancy agreement)” and “In accommodation (long-term supported, with tenancy agreement)”. This is because we were unable to identify an up-to-date tariff which distinguishes between the two. However, we would expect the longer term supported accommodation to incur less cost than the temporary or license accommodation.

1.6 Local area programme lead interviews

From December 2019 through to February 2020 we conducted semi-structured interviews with MEAM Approach programme leads from 21 local areas¹⁴. 18 of these interviews were conducted by members of the Cordis Bright team over the telephone. Three of the interviews were conducted face-to-face during fieldwork visits (see section 1.7) in partnership with members of the expert by experience research group.

Please see section 5 for information on our approach to qualitative analysis.

1.7 In-depth field work in five local areas with a focus on MEAM partnerships

We visited five local areas during January and February 2020. All fieldwork was conducted in partnership with members of the expert by experience research group.

Fieldwork visits consisted of observations of one operational partnership meeting and one strategic partnership meeting in each area, plus interviews with four professionals who work at strategic and operational levels across a range of organisations within the partnership (plus three outstanding programme lead interviews – see section 1.6). The five areas were selected on recommendation by MEAM for their varied partnership structures and were invited to take part in the research on a voluntary basis. Professionals were invited to participate in interviews on recommendation by the local programme lead for their varied perspectives of the local work.

1.8 Consultation with MEAM staff

In December 2019 we consulted with 12 members of the MEAM staff team, including central management colleagues as well as regional partnership managers in the local networks team. This consultation was carried out over three telephone interviews and one focus group with 11 members of MEAM staff¹⁵, which was co-delivered by a member of the expert by experience research group.

1.9 E-survey of staff in local areas

From October 2019 to February 2020 we surveyed stakeholders involved in the planning and delivery of local work using the MEAM Approach, to explore their views and attitudes and to understand how effectively the MEAM Approach is

¹⁴ The year 3 evaluation included 26 areas which were active in the MEAM Approach network in year 3, but programme leads from 5 of these areas did not participate in an evaluation interview, although they were invited to do so.

¹⁵ Two staff members participated in both the focus group and a telephone interview.

working in their area. This is a repeat of the survey we ran in year 2 of the evaluation.

The e-survey had a total of 213 respondents across 22 local areas, 129 of which were full responses and 84 of which were partial. Please see section 4 for a description of the survey sample and analysis of the responses that relate to the MEAM Approach partnerships research theme.

1.10 Reporting

Approaches to analysing data gathered via the different methods are described in detail in chapters 3 to 5. A series of key findings were then identified by comparing and triangulating findings from different methods and data sources. The key findings included in the year 3 report were discussed, amended and agreed with the expert by experience research group and MEAM. Please see section 5 for more information on this process.

2 Local areas involved in the network

2.1 Overview

In this chapter we summarise the local areas in the MEAM Approach network and those included in the year 3 evaluation.

2.2 Number of areas in the network in 2019-20

As at July 2020, 31 local areas were involved in the MEAM Approach network.

Seven of the 31 current network members joined the network after the beginning of year 3 (i.e after 1st April 2019) and are therefore not included in the year 3 evaluation: two joined during year 3 and five during year 4. These areas will be included in the evaluation from year 4 onwards.

The year 3 evaluation covers 27 network areas, which are listed in Figure 5. This includes:

- The 24 areas above ($31-7=24$) that were already in the network at the beginning of year 3 (2019-20) and remained in the network throughout year 3.
- Two areas that were already in the network at the beginning of year 3 but left the network during year 3.
- Halton, which left the network in year 2 (2018-19) but from where CDF data is still included in the national dataset.

2.3 Key characteristics of areas

Figure 5 describes the 27 network areas in the year 3 evaluation against four typologies. The typologies and categorisation of areas were agreed in a workshop with the MEAM team. They are understood to describe structural and objective differences that are likely to affect how the MEAM Approach is implemented in different areas. Where appropriate we have applied these typologies as an analytical lens to the data.

Figure 5: Network area typologies

Local area	Year area joined the evaluation	Typology 1: Lead organisation	Typology 2: Support coordination model	Typology 3: Multiple disadvantage coordinator host organisation	Typology 4: Local authority type
Adur and Worthing	Year 1	VCS - housing and homelessness	Multiple disadvantage coordinator for clients model	VCS - housing and homelessness	Two-tier authority
Basingstoke and Deane	Year 1	Statutory sector – housing and homelessness	Multiple disadvantage coordinator for clients model	Statutory sector – housing and homelessness	Two-tier authority
Blackburn with Darwen	Year 1	Statutory sector – public health	Multiple disadvantage coordinator for clients model	VCS – consortium	Single-tier authority
Cambridgeshire	Year 1	Statutory sector – adult social care	Multiple disadvantage coordinator for clients model	Statutory sector – housing and homelessness	Two-tier authority
Cornwall	Year 1	Statutory sector – housing and homelessness	Multiple disadvantage coordinator for clients model	Statutory sector – housing and homelessness	Single-tier authority
Coventry	Year 1	Statutory sector – housing and homelessness	No specified cohort	No multiple disadvantage coordinator for clients	Single-tier authority

Local area	Year area joined the evaluation	Typology 1: Lead organisation	Typology 2: Support coordination model	Typology 3: Multiple disadvantage coordinator host organisation	Typology 4: Local authority type
Doncaster	Year 1	Joint leadership – all statutory ¹⁶	Multiple disadvantage coordinator for clients model	Statutory sector – housing and homelessness	Single-tier authority
Exeter	Year 1	Statutory sector – Housing and homelessness	No multiple disadvantage coordinator for clients model	No multiple disadvantage coordinator for clients	Two-tier authority
Hackney	Year 1	Statutory sector – public health	Multiple disadvantage coordinator for clients model	Statutory sector – public health	Single-tier authority
Halton	Year 1	Statutory sector ¹⁷	Multiple disadvantage coordinator for clients model	Statutory sector ¹⁷	Single-tier authority
Haringey	Year 3	Statutory sector – housing and homelessness	No multiple disadvantage coordinator for clients model	No multiple disadvantage coordinator for clients	Single-tier authority

¹⁶ In the Doncaster case this is different to two organisations co-leading. The MEAM Approach is being led by Complex Lives, which is an integrated health and social care partnership Alliance governed by the Accountable Care Partnership.

¹⁷ Halton has not been allocated to a statutory sector sub-category because the lead project, Waves, was under Children and Families.

Local area	Year area joined the evaluation	Typology 1: Lead organisation	Typology 2: Support coordination model	Typology 3: Multiple disadvantage coordinator host organisation	Typology 4: Local authority type
Hull	Year 1	Statutory sector – housing and homelessness	Multiple disadvantage coordinator for clients model	Statutory sector – housing and homelessness ¹⁸	Single-tier authority
North Lincolnshire	Year 1	Statutory sector – housing and homelessness	Multiple disadvantage coordinator for clients model	Statutory sector – housing and homelessness	Single-tier authority
Norwich	Year 1	Statutory sector – housing and homelessness	Multiple disadvantage coordinator for clients model	VCS – consortium	Two-tier authority
Oldham ¹⁹	Year 3	Statutory sector – public health	N/A	N/A	Single-tier authority
Plymouth	Year 1	Joint leadership - statutory and VCS	No multiple disadvantage coordinator for clients model	No multiple disadvantage coordinator for clients	Single-tier authority

¹⁸ Coordinators were in VCS until very recently but have now been taken in-house.

¹⁹ Oldham is not yet delivering and does not yet have an agreed support coordination model.

Local area	Year area joined the evaluation	Typology 1: Lead organisation	Typology 2: Support coordination model	Typology 3: Multiple disadvantage coordinator host organisation	Typology 4: Local authority type
Preston	Year 1	Statutory sector – housing and homelessness	Multiple disadvantage coordinator for clients model	VCS – housing and homelessness	Two-tier authority
Reading	Year 1	Statutory sector – housing and homelessness	Multiple disadvantage coordinator for clients model	VCS – housing and homelessness	Single-tier authority
Redcar and Cleveland	Year 3	Statutory sector – public health	Multiple disadvantage coordinator for clients model	Multiple host organisations – statutory and VCS	Single-tier authority
Southend-on-Sea	Year 1	Statutory sector – housing and homelessness	No multiple disadvantage coordinator for clients model	No multiple disadvantage coordinator for clients	Single-tier authority
Sunderland	Year 1	Statutory sector – housing and homelessness	N/A	N/A	Single-tier authority
Surrey	Year 1	Joint leadership – all statutory	No multiple disadvantage coordinator for clients model	No multiple disadvantage coordinator for clients	Two-tier authority

Local area	Year area joined the evaluation	Typology 1: Lead organisation	Typology 2: Support coordination model	Typology 3: Multiple disadvantage coordinator host organisation	Typology 4: Local authority type
West Berkshire	Year 1	Statutory sector – criminal justice/police	Multiple disadvantage coordinator for clients model	Statutory sector – housing	Single-tier authority
Westminster	Year 3	Statutory sector – housing and homelessness	Multiple disadvantage coordinator for clients model	VCS – housing and homelessness	Single-tier authority
Winchester	Year 3	Statutory sector – housing and homelessness	No multiple disadvantage coordinator for clients model	No multiple disadvantage coordinator for clients	Two-tier authority
Windsor and Maidenhead	Year 3	Statutory sector – criminal justice/police	Multiple disadvantage coordinator for clients model	Statutory sector – criminal justice/police	Single-tier authority
York	Year 1	VCS – housing and homelessness	Multiple disadvantage coordinator for clients model	VCS – housing and homelessness	Single-tier authority

3 Common data framework analysis

3.1 Overview

In this chapter we present analysis of the anonymised client-level data collected via the CDF according to the methodology described in section 1.5.

3.2 Summary of CDF data

The year 3 report uses anonymised client-level data collected via the CDF covering the period from 1 April 2017 to 31 March 2020. Figure 6 summarises the client-level data collected and shared with the evaluation by each local area, and the number of clients included in the valid sample for each element of data analysis.

Figure 6: Summary of CDF data availability at the end of year 3 and analysis sample sizes

Area	No. of clients:		No. of clients included in analysis sample for: ²⁰							
	In CDF	Who are returnees ²¹	HOS	NDTA	Accom.	Service use				
						A&E	Non-elective admissions	Mental health admissions	Arrests	Prison
Adur and Worthing	34	0	11	28	26	31	30	31	32	32
Basingstoke and Deane	21	5	3	0	5	10	10	10	9	10
Blackburn with Darwen	48	0	9	6	18	20	19	19	20	20
Cambridgeshire	31	0	8	23	9	0	0	18	18	18
Cornwall	9	0	9	2	8	9	9	9	9	9
Coventry	0	0	0	0	0	0	0	0	0	0
Doncaster	40	0	8	0	9	34	34	34	34	34

²⁰ Please see section 1.5.3 for a description of the inclusion criteria for each analysis sample.

²¹ In cases where a client returns to the cohort following a significant break in support, they are assigned a new unique reference number and treated as a new client.

Area	No. of clients:		No. of clients included in analysis sample for: ²⁰							
	In CDF	Who are returnees ²¹	HOS	NDTA	Accom.	Service use				
						A&E	Non-elective admissions	Mental health admissions	Arrests	Prison
Exeter	12	0	0	3	2	3	3	3	3	3
Hackney	28	0	0	3	3	20	20	20	20	20
Halton	32	0	0	0	0	1	1	1	1	1
Haringey	21	0	20	20	15	20	20	20	19	19
Hull	37	0	21	0	27	35	35	35	36	36
North Lincolnshire	23	2	9	0	14	12	17	17	18	18
Norwich	119	7	8	21	25	32	32	32	32	25
Oldham	0	0	0	0	0	0	0	0	0	0
Plymouth	0	0	0	0	0	0	0	0	0	0
Preston	16	1	4	0	1	9	9	9	9	9
Reading	0	0	0	0	0	0	0	0	0	0

Area	No. of clients:		No. of clients included in analysis sample for: ²⁰							
	In CDF	Who are returnees ²¹	HOS	NDTA	Accom.	Service use				
						A&E	Non-elective admissions	Mental health admissions	Arrests	Prison
Redcar and Cleveland	22	0	22	0	19	22	22	22	22	22
Southend	14	0	7	5	5	6	6	6	6	6
Sunderland	0	0	0	0	0	0	0	0	0	0
Surrey	0	0	0	0	0	0	0	0	0	0
West Berkshire	18	0	6	11	14	6	6	12	6	7
Westminster	3	0	2	0	2	2	2	2	2	2
Winchester	0	0	0	0	0	0	0	0	0	0
Windsor and Maidenhead	14	0	11	11	11	13	13	13	13	13
York	37	0	0	26	31	36	36	36	36	36
Grand total	579	15	158	159	244	321	324	349	345	340

3.3 Profile of the cohort

Note on the profile of the cohort

This section describes the profile of the cohort of clients *for whom data were shared with evaluators*. It therefore does not describe the profile of the whole cohort of clients supported by interventions developed using the MEAM Approach; there are clients whose data were not shared with evaluators, for example, because they had not given their explicit consent for data sharing. We do not assume that the profile of the clients in the evaluation cohort is similar to that of the whole cohort supported by interventions.

Neither does this profile describe the cohort of clients included in the HOS, NDTA, service use and accommodation analyses. Clients were excluded from those analyses if they did not meet eligibility criteria or if data were missing.

3.3.1 Size and location

We received data on 579 clients²², from 20 different MEAM Approach network areas²³.

This represents 45% of the 1,277 clients²⁴ we understand to have been supported by 21 network areas²⁵ between 1 April 2017 and 31 March 2020.

3.3.2 Age

The age of clients for whom ages were provided ranged from 18 to 72, with a mean age of 39 years (n=578).

3.3.3 Gender

Of the 578 clients for whom gender was reported, 66% identified as male and 34% as female. Of these, two clients identified as transgender.

²² This figure in fact refers to episodes of support rather than clients. Within this figure are 15 clients who received two or more episodes of support during the evaluation period. Although the unit of analysis in this report is technically episodes of support instead of clients, for simplicity (given the small number of returning clients) we use the term "clients" when discussing the findings.

²³ This data was of varying quality – not all data was provided for all clients in all quarters. One area which is supporting clients has not provided CDF data returns in year 3.

²⁴ 21 of these clients are known to have returned for a second episode of support.

²⁵ Three of the 27 areas included in the evaluation had not yet started supporting clients within the reporting period, and three areas did not yet have a specified cohort of clients.

3.3.4 Sexual orientation

Figure 7: Sexual orientation of the cohort

Sexual orientation	No. clients	%
Heterosexual	548	95%
Bisexual	12	2%
Gay	6	1%
Other	6	1%
Lesbian	4	1%
Valid total	576	100%
Not known / not stated	3	-
Grand total	579	-

3.3.5 Ethnicity

Figure 8: Ethnicity of the cohort

Ethnicity		No. clients	%
Asian / Asian British	Bangladeshi	1	0%
	Indian	1	0%
	Pakistani	2	0%
	Any other Asian background	2	0%
Black / African / Caribbean / Black British	African	5	1%
	Caribbean	14	2%
	Any other Black / African / Caribbean background	4	1%
Mixed / Multiple ethnic groups	White and Black African	2	0%
	White and Black Caribbean	7	1%
	Any other Mixed / Multiple ethnic background	5	1%
White	English / Welsh / Scottish / Northern Irish / British	514	89%

Ethnicity		No. clients	%
	Gypsy or Irish Traveller	1	0%
	Irish	6	1%
	Any other White background	12	2%
Other ethnic group – Any other ethnic group		1	0%
Valid total		577	100%
Not stated		2	-
Grand total		579	-

3.3.6 Nationality

Figure 9: Nationality of the cohort

Nationality	No. clients	%
United Kingdom	540	97%
Polish	5	1%
Jamaican	2	0%
Kenyan	2	0%
Portuguese	2	0%
Australian	1	0%
Lithuanian	1	0%
Nigerian	1	0%
Somalian	1	0%
Sri Lankan	1	0%
Turkish	1	0%
Ugandan	1	0%
Valid total	558	100%
Not known / not stated	21	-
Grand total	579	-

3.3.7 Current status of support

Of the 579 clients, 237 clients were known to have ended their support. The reasons for support ending are shown in Figure 10. For 338 clients support was ongoing at the time of their most recent service use return. For a final 4 clients, no service use data was ever reported and therefore their status is also unknown.

Figure 10: Reasons for clients ending support (n=237)

Reason for support ending	No. clients	%
Planned closure - support transferred to other organisation(s)	84	36%
Planned closure - no further support needed	49	21%
Unable to contact	28	12%
Planned closure - move outside area	27	11%
Deceased	19	8%
Unplanned closure - client decided not to accept support	15	6%
Prison sentence of over 12 months	8	3%
Excluded from service	3	1%
Residential rehabilitation	3	1%
Valid total	236	100%
Reason not stated	1	-
Grand total	237	-

3.3.8 Duration of support

The length of time for which clients had been supported at the end of year 3 ranges from 0 months to 35 months, with a mean of 12 months of support (n=575)²⁶. Figure 11 shows the distribution of clients' duration of support.

²⁶ This is not the same as the average total length of support, because for some clients support was still ongoing at the time of analysis. We have assumed that clients with no end of support date and no quarter 12 service use data were still receiving support at the end of quarter 12. All Halton clients are assumed to have ended support at the end of quarter 7, apart from those with an end of support date prior to this. Four clients whose support start and end date data contained errors were excluded from this analysis.

Figure 11: Distribution of clients' duration of support (n=579)

Duration of support	No. clients	%
0 to 3 months	129	22%
4 to 6 months	80	14%
7 to 9 months	70	12%
10 to 12 months	78	14%
13 to 15 months	46	8%
16 to 18 months	64	11%
19 to 21 months	17	3%
22 to 24 months	24	4%
Over 2 years	67	12%
Valid total	575	100%
Not available	4	-
Grand total	579	-

3.4 Homelessness Outcomes Star

Figure 12: Description of sample for HOS analysis

Characteristics of valid sample	Detail
Sample description	HOS data at baseline and end of support/most recent quarter of support (see section 1.5.3 for more detail)
Sample size	158
Average length of support for valid sample	10 months
Average length of time between time 1 and time 2 HOS ²⁷	9 months

²⁷ The average length of time between time 1 and time 2 is reported in terms of months because a client's quarterly HOS can be completed at any point during that quarter and the exact date of completion of each HOS

The **Homelessness Outcomes Star** is a tool for supporting and measuring change across ten areas in a person's life. The tool measures progress across the "Journey of Change" from a position of being "stuck", where people are not able to face the problem or accept help, through to being "self-reliant", where they can manage the issue without help.

is recorded in the CDF. It is important to note that this is not the same as the average duration of support for clients in the cohort, because the time 1 and time 2 HOS do not usually coincide with precise start and end dates for support.

Figure 13: Proportion of clients at each stage of the Journey of Change at start of support (%) (n=158)²⁸

Outcome area	Time 1 HOS (% of clients within threshold)				
	Stuck	Accepting Help	Believing	Learning	Self-reliance
Motivation	44%	32%	13%	8%	2%
Self-care	43%	29%	13%	12%	3%
Managing money	44%	35%	13%	5%	3%
Social networks	47%	35%	14%	4%	0%
Drug and alcohol misuse	47%	28%	11%	8%	6%
Physical health	38%	30%	23%	9%	0%
Emotional/mental health	48%	35%	12%	4%	0%
Meaningful use of time	51%	31%	12%	6%	0%
Managing tenancy/accommodation	50%	29%	15%	4%	1%
Offending	25%	22%	20%	11%	22%

²⁸ HOS falling within -1 to +3 months of the start of client's support were considered eligible time 1 data.

Figure 14: Proportion of clients at each stage of the Journey of Change at end of support/most recent quarter of support (%) and percentage point change from start of support (n=158) (statistically significant changes²⁹ in **bold**, darker shading indicates a higher proportion of the cohort are scored at this stage for the outcome area when compared to other outcome areas)³⁰

Outcome area	Time 2 HOS (% of clients within HOS stage of journey) / Percentage point change from time 1									
	Stuck		Accepting Help		Believing		Learning		Self-reliance	
Motivation	25%	-18 %	30%	-3 %	27%	+13 %	16%	+8 %	3%	+1 %
Self-care	22%	-20 %	23%	-5 %	29%	+15 %	23%	+11 %	2%	-1 %
Managing money	22%	-21 %	30%	-6 %	31%	+17 %	13%	+8 %	4%	+2 %
Social networks	20%	-27 %	34%	-1 %	34%	+20 %	9%	+6 %	3%	+3 %
Drug and alcohol misuse	30%	-17 %	34%	+6 %	18%	+7 %	9%	+1 %	9%	+3 %
Physical health	17%	-20 %	37%	+7 %	28%	+5 %	16%	+7 %	1%	+1 %
Emotional/ Mental health	29%	-18 %	34%	-2 %	27%	+15 %	9%	+5 %	1%	+1 %
Meaningful use of time	30%	-20 %	28%	-2 %	28%	+15 %	11%	+5 %	2%	+2 %
Managing tenancy and accommodation	25%	-24 %	29%	-1 %	22%	+6 %	19%	+15 %	5%	+4 %
Offending	20%	-4 %	13%	-9 %	21%	+1 %	16%	+5 %	30%	+7 %

²⁹ Significant to the 95% confidence level using the McNemar chi-square test, meaning that there is a 95% chance that the change is **not** due to chance.

³⁰ i) HOS falling within -1 to +3 months of the start of client's support were considered eligible time 1 data. ii) Quarter 13 HOS data were included as a proxy for quarter 12 data for eight clients. iii) Percentages are rounded to whole numbers - this introduces some rounding errors when comparing time 1 and time 2 percentages and percentage change..

Figure 15: Proportion of clients moving between Homelessness Outcomes Star Journey of Change stages between start of support and end of support/most recent quarter of support, and the average (mean) number of stages of change (n=158)

Area	Positive change		Stayed the same	Negative change	
	% of clients	Average no. stages of positive	% of clients	% of clients	Average no. stages of negative
Motivation	48%	1.4	37%	15%	-1.4
Self-care	47%	1.6	39%	14%	-1.5
Managing money	49%	1.6	37%	14%	-1.3
Social networks	52%	1.5	41%	7%	-1.5
Drug and alcohol misuse	37%	1.6	46%	16%	-1.5
Physical health	48%	1.3	39%	13%	-1.6
Emotional/mental health	45%	1.4	41%	15%	-1.3
Meaningful use of time	49%	1.5	35%	15%	-1.4
Managing tenancy/accommodation	52%	1.7	37%	11%	-1.4
Offending	37%	1.7	46%	18%	-1.5

Figure 16: Overview of the scale and direction of change experienced by clients between start of support and end of support/most recent quarter of support (n=158)³¹

Direction of change → Scale of change ↓	% clients making positive change by at least one Journey of Change stage	% clients staying the same	% clients making negative change by at least one Journey of Change stage
At least one outcome area	84%	89%	44%
At least two outcome areas	75%	75%	28%
At least three outcome areas	62%	60%	20%
At least four outcome areas	57%	51%	14%

Figure 17: Correlation between change in HOS score over time and length of time between start of support and end of support/most recent quarter of support HOS, using Spearman's rank (n=158)

Area	Spearman's rank correlation coefficient ³²
Motivation	0.10
Self-care	0.07
Managing money	0.18
Social networks	0.17
Drug and alcohol misuse	0.13
Physical health	0.09
Emotional/mental health	0.12
Meaningful use of time	0.16
Managing tenancy/accommodation	0.19
Offending	0.05

³¹ As there are a total of 10 HOS outcome areas it is possible for the same client to feature in more than one column in the same row of this table. For example, a client might make positive change by at least one Journey of Change stage in four areas on the HOS but remain at the same stage for a further four areas. Therefore percentage totals across the row can total to more than 100%.

³² Correlation coefficients range from -1 to 1, with 1 indicating perfect positive correlation, -1 indicating perfect negative correlation, and 0 indicating no correlation. Spearman's rank indicates here that any relationship between length of support and the extent of improvement experienced is weak. As a result, we have not applied significance testing to these analyses.

3.5 NDTA

Figure 18: Description of sample for NDTA analysis

Characteristics of valid sample	Detail
Sample description	NDTA data at baseline and end of support/most recent quarter of support (see section 1.5.3 for more detail)
Sample size	159
Average length of support for valid sample	14 months
Average length of time between time 1 and time 2 NDTA ³³	12 months

³³ The average length of time between time 1 and time 2 is reported in terms of months because a client's quarterly NDTA can be completed at any point during that quarter and the exact date of completion of each NDTA is recorded in the CDF. It is important to note that this is not the same as the average duration of support for clients in the cohort, because the time 1 and time 2 NDTA do not usually coincide with precise start and end dates for support.

Figure 19: Proportion of clients who returned each score for their NDTA at start of support (%) (n=159)³⁴

Area	Time 1 score (% of clients) ³⁵				
	8	6	4	2	0
Risk to others	17%	24%	23%	30%	6%
Risk from others	21%	19%	29%	27%	4%
	4	3	2	1	0
Engagement	31%	45%	11%	12%	0%
Self-harm (intentional)	11%	17%	26%	27%	19%
Self-harm (Unintentional)	42%	36%	14%	7%	1%
Stress	33%	39%	23%	6%	0%
Social effectiveness	13%	28%	33%	25%	1%
Alcohol and drugs	66%	21%	8%	4%	2%
Impulse control	33%	25%	25%	12%	6%
Housing	58%	20%	15%	6%	1%

³⁴ NDTA falling within -1 to +3 months of the start of client's support were considered eligible time 1 data.

³⁵ A reduction in NDTA scores indicates a decline in the indicators of multiple disadvantage and represents positive progress for the client.

Figure 20: Proportion of clients who returned each score for their NDTA at end of support/most recent quarter of support, and the percentage point change from start of support (n=159) (statistically significant changes in **bold**, darker shading indicates a higher proportion of the cohort are scored at this level for the outcome area when compared to other outcome areas)³⁶

Area	Time 2 score (% of clients) / Percentage point change from time 1									
	8		6		4		2		0	
Risk to others	4%	-13%	14%	-9%	24%	+1%	33%	+3%	25%	+19%
Risk from others	12%	-9%	14%	-4%	25%	-4%	37%	+10%	12%	+8%
	4		3		2		1		0	
Engagement	12%	-19%	33%	-12%	26%	+15%	19%	+7%	9%	+9%
Self-harm (intentional)	4%	-7%	9%	-8%	25%	-1%	31%	+4%	30%	+11%
Self-harm (Unintentional)	21%	-21%	23%	-13%	27%	+13%	21%	+14%	8%	+7%
Stress	11%	-21%	31%	-8%	35%	+13%	20%	+14%	2%	+2%
Social effectiveness	7%	-6%	13%	-15%	31%	-3%	44%	+19%	5%	+4%
Alcohol and drugs	38%	-28%	23%	+3%	19%	+12%	14%	+10%	5%	+3%
Impulse control	14%	-19%	13%	-11%	30%	+5%	31%	+19%	13%	+7%
Housing	21%	-38%	19%	-1%	25%	+10%	21%	+16%	14%	+13%

³⁶ Significant to the 95% confidence level using the McNemar chi-square test. ii) Percentages are rounded to whole numbers - rounding errors exist when comparing 2 time points.

Figure 21: Proportion of clients who made positive change, negative change or stayed the same between NDTA at start of support and end of support/most recent quarter of support, and the average (mean) size of change (n=159)

Area	Made positive change ³⁷		Stayed the same	Made negative change ³⁸	
	% of clients	Average size of change		% of clients	Average size of change
Risk to others	50%	-3.8	36%	14%	2.5
Risk from others	47%	-3.3	35%	19%	2.9
Engagement	55%	-1.7	31%	14%	1.3
Self-harm (intentional)	48%	-1.5	33%	18%	1.4
Self-harm (Unintentional)	56%	-1.8	33%	11%	1.4
Stress	57%	-1.5	30%	13%	1.4
Social effectiveness	50%	-1.6	36%	14%	1.5
Alcohol and drugs	46%	-1.8	42%	13%	1.3
Impulse control	55%	-1.9	33%	13%	1.6
Housing	56%	-2.3	37%	7%	1.3

³⁷ i.e. score decreased

³⁸ i.e. score increased

Figure 22: Overview of the scale and direction of change in NDTA score experienced by clients by clients between start of support and end of support/most recent quarter of support (n=159)

Direction of change → Scale of change ↓	% clients making positive change	% clients staying the same	% clients making negative change
At least one outcome area	91%	87%	55%
At least two outcome areas	84%	72%	35%
At least three outcome areas	71%	55%	20%
At least four outcome areas	65%	47%	13%

Figure 23: Correlation between change in NDTA score over time and length of time between start of support and end of support/most recent quarter of support, using Spearman's rank (n=159)

Area	Spearman's rank correlation coefficient ³⁹
Risk to others	-0.08
Risk from others	0.05
Engagement	-0.12
Self-harm (intentional)	0.00
Self-harm (unintentional)	-0.06
Stress	-0.02
Social effectiveness	-0.09
Alcohol and drugs	-0.09
Impulse control	-0.08
Housing	-0.23

³⁹ Spearman's rank indicates here that any relationship between length of support and the extent of improvement experienced is weak. As a result, we have not applied significance testing to these analyses.

3.6 Service use

Service use Figure 24: Description of samples for service use

Characteristics of valid sample	Detail
Sample description	Service use data available in first and last/most recent quarter of support (see section 1.5.3 for more detail).
Sample size	See table below
Average length of support for valid sample	13 months (across all service use types)
Average number of quarters between time 1 quarter and time 2 quarter ⁴⁰	5 quarters (across all service use types)

⁴⁰ The average length of time between time 1 and time 2 is reported in terms of quarters because quarterly service use data is collected after the end of a quarter and covers the whole quarter.

Figure 25: Change in use of services from start of support to last quarter/most recent quarter of support (statistically significant changes⁴¹ in **bold**)⁴²

Type of service use	Direction of change	Sample size	Valid sample as % of eligible clients	Total number of interactions		Mean no. interactions per client per quarter			
				Time 1	Time 2	Time 1	Time 2	Change	% Change ⁴³
A&E	↓	321	71%	254	118	0.8	0.4	-0.4	-54%
Non elective acute admissions	↓	324	72%	481	380	1.5	1.2	-0.3	-21%
Mental health admissions	↑	349	78%	212	242	0.6	0.7	+0.1	+15%
Arrests	↓	345	77%	227	135	0.7	0.4	-0.3	-41%
Nights in prison	↑	340	76%	1949	2226	5.7	6.5	+0.9	+14%

⁴¹ Significant to the 95% confidence level based on paired t-test.

⁴² i) 44 to 47 clients (numbers vary across service use type) began support in the last month of a quarter but did not have service use data available until the second quarter of support. Data from the second quarter of support were used as proxy baseline data for these clients. ii) Means are rounded to 1 d.p. – this creates some rounding errors in the change column.

⁴³ The percentage change in mean number of interactions per client per quarter should be interpreted with caution because of the very low level of mean interactions at time 1 – the relatively high percentage changes relate to small changes in mean service use in real terms.

3.7 Accommodation

Figure 26: Description of sample for accommodation analysis

Characteristics of valid sample	Detail
Sample description	Accommodation in first and last/most recent quarter of support (see section 1.5.3 for more detail). Clients with missing data for any nights are excluded.
Sample size	244
Average length of support for valid sample	13 months
Average number of quarters between time 1 quarter and time 2 quarter ⁴⁴	5 quarters

⁴⁴ The average length of time between time 1 and time 2 is reported in terms of quarters because quarterly accommodation data is collected after the end of a quarter and covers the whole quarter.

Figure 27: Client accommodation at beginning of support period and at end of support/end of most recent quarter of support, and the net change (n=244)
(statistically significant changes⁴⁵ in **bold**)⁴⁶

Accommodation grouping ⁴⁷	% of clients			Accommodation type	% of clients		
	Initial accom.	Last/ most recent accom.	Net change		Initial accom.	Last/ most recent accom.	Net change
Rough sleeping	57%	4%	-53%				
Family and friends	6%	8%	+2%				
In accommodation (temporary or license i.e. no tenancy agreement)	17%	38%	+21%	Night shelter	0%	1%	+1%
				B&B/private hostel	5%	8%	+4%
				Emergency or assessment bed within a service	7%	1%	-5%
				Supported accommodation (licence)	6%	27%	+21%

⁴⁵ Significant to the 95% confidence level based on McNemar chi-square test.

⁴⁶ Percentages are rounded to whole numbers - this introduces some rounding errors when comparing time 1 and time 2 percentages and percentage change.

⁴⁷ These groupings have been agreed with CFE Research to ensure that future analyses of accommodation use within the national MEAM Approach and national Fulfilling Lives evaluation are comparable.

Accommodation grouping ⁴⁷	% of clients			Accommodation type	% of clients		
	Initial accom.	Last/ most recent accom.	Net change		Initial accom.	Last/ most recent accom.	Net change
In accommodation (long-term supported, with tenancy agreement)	4%	7%	+3%				
In accommodation (own or shared tenancy, with or without floating support)	10%	25%	+15%	Own tenancy (social housing)	7%	17%	+10%
				Own tenancy (private rented)	3%	7%	+5%
				Own tenancy (owner occupier)	0%	0%	0%
				Shared tenancy	0%	0%	0%
Prison	6%	8%	+2%				
Other	0%	3%	+3%				
Not given	0%	7%	+7%				

Figure 28: Change in mean number of nights spent in different accommodation types between first quarter of support and last/most recent quarter of support (statistically significant changes⁴⁸ in **bold**) (n=244)⁴⁹

Accommodation grouping ⁵⁰	Mean no. nights per client per quarter			Accommodation type	Mean no. nights per client per quarter		
	Time 1	Time 2	Change		Time 1	Time 2	Change
Rough sleeping	30.1	8.7	-21.4				
Family and friends	13.2	8.3	-4.9				
In accommodation (temporary or license i.e. no tenancy agreement)	27.3	35.1	+7.8	Night shelter	0.3	1.3	+1.0
				B&B/private hostel	4.0	6.0	+2.0
				Emergency or assessment bed within a	5.8	1.8	-4.1
				Supported accommodation (licence)	17.1	26.1	+9.0

⁴⁸ Statistically significant to the 95 % confidence level based on paired t-test.

⁴⁹ i) Clients were excluded from analysis when the total number of nights accounted for or recorded as “unknown” were 2 nights above or below the total number of nights in the quarter. ii) 52 clients began support in the last month of a quarter but did not have accommodation data available until the second quarter of support. Data from the second quarter of support were used as proxy baseline data for these clients.

⁵⁰ These groupings have been agreed with CFE Research to ensure that future analyses of accommodation use within the national MEAM Approach and national Fulfilling Lives evaluation are comparable.

Accommodation grouping ⁵⁰	Mean no. nights per client per quarter			Accommodation type	Mean no. nights per client per quarter		
	Time 1	Time 2	Change		Time 1	Time 2	Change
In accommodation (long-term supported, with tenancy agreement)	2.5	6.3	+3.8				
In accommodation (own or shared tenancy, with or without floating support)	9.3	19.9	+10.7	Own tenancy (social housing)	5.6	14.1	+8.5
				Own tenancy (private rented)	3.1	5.4	+2.2
				Own tenancy (owner occupier)	0.4	0.0	-0.4
				Shared tenancy	0.1	0.4	+0.3
Prison	7.4	7.0	-0.4				
"Unknown"	1.6	5.7	+4.1				

3.8 Economic analysis

Figure 29: Mean service use costs per client from first quarter of support to last/most recent quarter of support⁵¹ (statistically significant changes in level of service use⁵² in **bold**)

Type of service use	Sample size	Valid sample as % of eligible clients	Mean cost per client per quarter		
			Time 1	Time 2	Change
A&E	321	71%	£131	£61	-£70
Non elective acute admissions	324	72%	£937	£740	-£197
Mental health admissions	349	78%	£261	£298	+£37
Arrests	345	77%	£493	£293	-£200
Prison	340	76%	£613	£701	+£87

⁵¹ i) See Section 1.5 for a breakdown of the economic tariffs used to calculate average cost per instance of service use. ii) 44 to 47 clients (numbers vary across service use type) began support in the last month of a quarter but did not have service use data available until the second quarter of support. Data from the second quarter of support were used as proxy baseline data for these clients. iii) Mean costs are rounded to whole numbers - this introduces some rounding errors when comparing between time 1 and time 2.

⁵² Significant to the 95% confidence level based on paired t-test, meaning that there is a 95% chance that the change is **not** due to chance. Significance tests are applied to the change in level of service use, not the estimated costs of those changes.

Figure 30: Mean accommodation costs per client from first quarter of support to last/most recent quarter of support⁵³ (n=244)⁵⁴ (statistically significant changes in use of accommodation type⁵⁵ in **bold**)

Accommodation grouping ⁵⁶	Accommodation type	Mean cost per client per quarter		
		Time 1	Time 2	Change
Rough sleeping	Rough sleeping	£0	£0	£0
Family and friends	Living with family/friends	£0	£0	£0
In accommodation (temporary or license i.e. no tenancy agreement)	Night shelter ⁵⁷	£1,211	£1,556	+£345
	B&B/private hostel			
	Emergency or assessment bed within a service			
	Supported accommodation (licence)			
In accommodation (long-term supported, with tenancy agreement)	Supported accommodation (tenancy)	£111	£277	+£166

⁵³ i) See Section 1.5 for a breakdown of the economic tariffs used to calculate average cost per instance of accommodation type. ii) The costs associated with nights in prison are reported in Figure 29.

⁵⁴ i) Clients were excluded from analysis when the total number of nights accounted for or recorded as “unknown” were 2 nights above or below the total number of nights in the quarter. ii) 52 clients began support in the last month of a quarter but did not have accommodation data available until the second quarter of support. Data from the second quarter of support were used as proxy baseline data for these clients. iii) Mean costs are rounded to whole numbers - this introduces some rounding errors when comparing between time 1 and time 2.

⁵⁵ i) Significant to the 95% confidence level based on paired t-test, meaning that there is a 95% chance that the change is **not** due to chance. ii) Significance tests are applied to the change in use of accommodation type, not the estimated costs of those changes.

⁵⁶ These groupings have been agreed with CFE Research to ensure that future analyses of accommodation use within the national MEAM Approach and national Fulfilling Lives evaluation are comparable.

⁵⁷ We considered introducing a separate tariff for night shelter accommodation because we understand provision of night shelter accommodation to cost much less than the accommodation grouping tariff of £310 per week. However, there is relatively low use of night shelters among the evaluation cohort, and changes in use over time are not statistically significant. We therefore have applied a broad tariff across the whole accommodation grouping so as to maximise comparability with the national Fulfilling Lives evaluation.

Accommodation grouping ⁵⁶	Accommodation type	Mean cost per client per quarter		
		Time 1	Time 2	Change
In accommodation (own or shared tenancy, with or without floating support)	Own tenancy (social housing)	£126	£270	+£145
	Own tenancy (private rented)			
	Own tenancy (owner occupier)			
	Shared tenancy			
“Unknown”	“Unknown”	N/A	N/A	N/A

4 E-survey analysis

4.1 Overview

In this chapter we present the findings from the year 3 e-survey. We present only the responses collected in year 3 and only analyse data that relates to the year 3 research theme of MEAM Approach partnerships. Additional data collected from the survey will be used in reporting for years 4 and 5 of the programme.

4.2 Sample

4.2.1 Sample description

The e-survey had a total of 213 respondents, 129 of which were full responses and 84 of which were partial. We asked all network areas to aim for at least 10 responses from local partners. However, as indicated in Figure 31, 13 of the 26 areas surveyed has less than 10 respondents and the number of local views represented in the survey responses varies greatly between areas.

Figure 31. Number of respondents per network area (n=213)

Network area	No. survey respondents
Adur and Worthing	20
Basingstoke and Deane	15
Blackburn and Darwen	11
Cambridgeshire	10
Cornwall	12
Coventry	1
Doncaster	10
Exeter	0
Hackney	8
Haringey	13
Hull	16
North Lincolnshire	11
Norwich	1
Oldham	9
Plymouth	0

Network area	No. survey respondents
Preston	2
Reading	5
Redcar and Cleveland	3
Southend-on-Sea	11
Sunderland	0
Surrey	13
West Berkshire	6
Westminster	12
Winchester	0
Windsor and Maidenhead	12
York	12
Total	213

We know the following about the survey respondents:

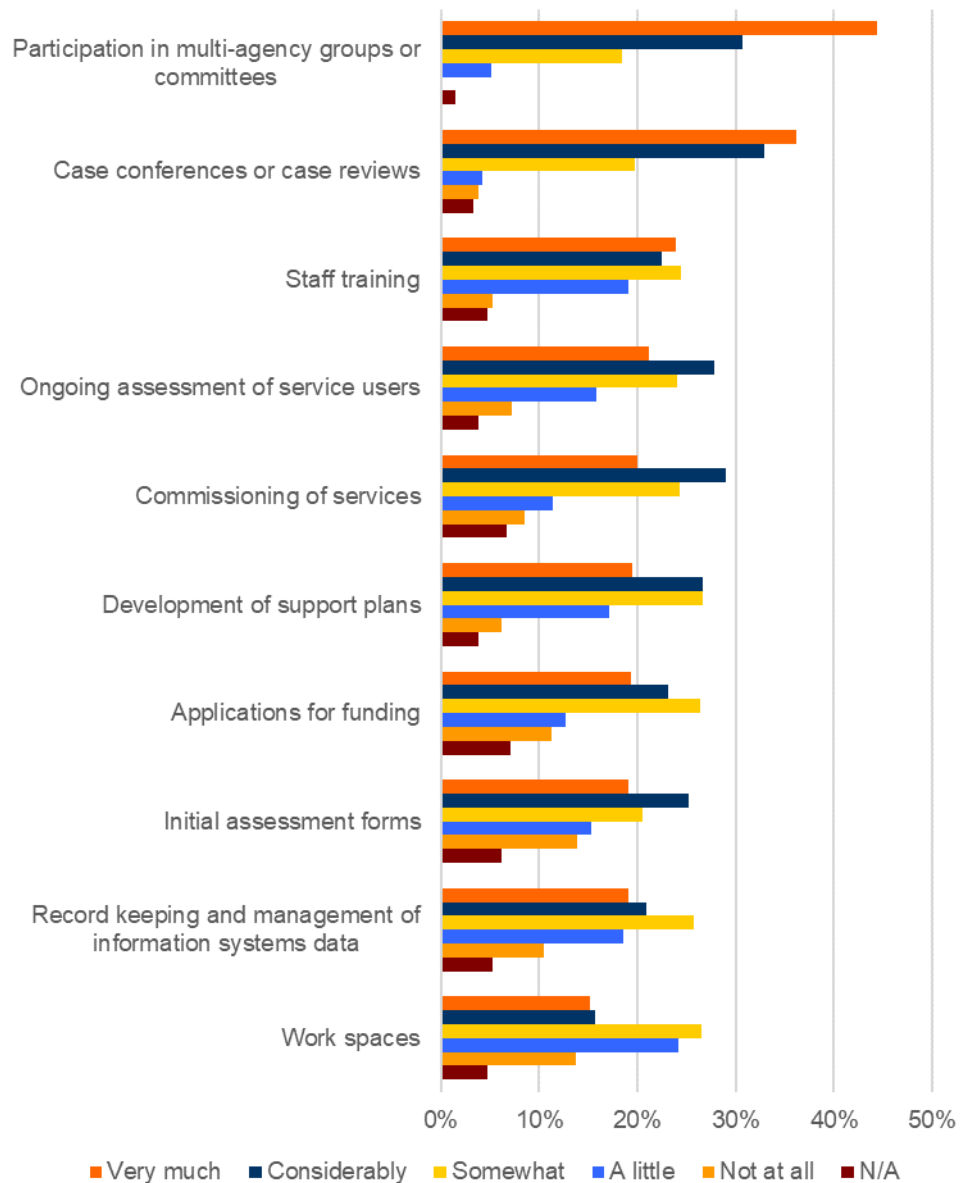
- **Service sector.** 37% identified as working or volunteering in the housing and homelessness sector (79), 11% in the multiple and complex needs/disadvantage sector (23), 10% in mental health and wellbeing (22), 10% in substance misuse (21), 6% in criminal justice (13), 5% in community safety (11), 5% in public health (10), 1% in physical health (2), and 1 respondent worked in education, skills and training. The remaining 15% of stakeholders (31) responded they worked in a sector not captured under the options listed.
- **Organisation type.** The majority of stakeholders reported working in the statutory sector (63%, 135), with a further 32% of respondents working in the voluntary and community sector (68) and 3% working in the private sector (6). 2% did not respond to this question (4).
- **Role.** 36% of stakeholders (76) described their work as operational and involving direct work with clients, 33% of stakeholders (71) described their role as one of operational management, 15% (31) described their role as strategic leadership, and 9% (20) described their role as related to commissioning. A further 7% of respondents (15) responded that their role was not captured under the options listed.

4.3 Analysis of responses relating to MEAM partnerships

4.3.1 Multi-agency working

Figure 32 shows that the perceived level of multi-agency working varies between respondents and varies between different types of multi-agency work. Participation in multi-agency groups or committees is happening “very much” or “considerably” for 75% (159) respondents, and case conferences or case reviews shared with other organisations is happening “very much” or “considerably” for 69% (147) respondents. However, sharing of work spaces (31% or 65 respondents), record keeping and management of information systems data (40%, 84) and initial assessment forms (44%, 93) are happening less according to our respondents.

Figure 32 To what extent does your organisation share the following activities with other organisations serving people experiencing multiple disadvantage? (valid n varies between 208 and 213; non-responses have not been included)



In Figure 33 we break down the responses into two models of support coordination (see typology 2 in section 2.3)⁵⁸. In general, stakeholders from network areas without a multiple disadvantage coordinator reported less

⁵⁸ Some areas are not included in this breakdown because there are too few areas in the typology subgroup to permit analysis. There is only one area (Coventry) with the third model of support coordination – that of having no specified cohort. There are also two areas that are not yet delivering and do not yet have an agreed support coordination (Oldham, whose data is excluded here, and Sunderland, from where we received no survey responses in any case).

positively on activities related to partnership working than those from network areas that do have a multiple disadvantage coordinator: the proportion of respondents responding “very much/considerably” from network areas without a multiple disadvantage coordinator was lower across every activity, with the exception of “work spaces.” For example, while 78% of respondents from network areas with a multiple disadvantage coordinator model in place (128) reported participating in multi-agency groups or committees “very much” or “considerably”, only 68% of those from local areas with no multiple disadvantage coordinator (25) reported the same.

However, this should only be interpreted as emerging evidence of a possible difference in experience between the two types of areas. The differences identified are not statistically significant⁵⁹; there is little data available for areas that are delivering support without a multiple disadvantage coordinator (responses from 3 out of a possible 6 areas, 37 respondents) compared to areas with a coordinator (responses from 17 out of a possible 17 areas, 166 respondents); and bias towards some areas’ experience is introduced into the analysis since the number of respondents varies between each area.

Figure 33: To what extent does your organisation share the following activities with other organisations serving people experiencing multiple disadvantage? (total valid n varies between 199 and 203; non-responses have not been included)

To what extent does your organisation share the following activities with other organisations serving people experiencing multiple disadvantage?		Multiple disadvantage coordinator (17 areas, n=166 including non-responses to some questions)	No multiple disadvantage coordinator (3 areas, n=37 including non-responses to some questions)
Commissioning of services	Not at all/ a little	16%	30%
	Somewhat	25%	22%
	Considerably/ very much	52%	43%
	N/A	7%	5%
Record keeping and management of information systems data	Not at all/ a little	25%	38%
	Somewhat	26%	27%
	Considerably/ very much	44%	30%
	N/A	6%	5%

⁵⁹ To the 95% confidence level using chi-square test of independence.

To what extent does your organisation share the following activities with other organisations serving people experiencing multiple disadvantage?		Multiple disadvantage coordinator (17 areas, n=166 including non-responses to some questions)	No multiple disadvantage coordinator (3 areas, n=37 including non-responses to some questions)
Staff training	Not at all/ a little	23%	30%
	Somewhat	24%	24%
	Considerably/ very much	48%	43%
	N/A	6%	3%
Initial assessment forms	Not at all/ a little	26%	35%
	Somewhat	20%	24%
	Considerably/ very much	46%	38%
	N/A	7%	3%
Ongoing assessment of service users	Not at all/ a little	19%	34%
	Somewhat	24%	23%
	Considerably/ very much	53%	40%
	N/A	4%	3%
Development of support plans	Not at all/ a little	21%	33%
	Somewhat	25%	25%
	Considerably/ very much	50%	39%
	N/A	4%	3%
Participation in multi-agency groups or committees	Not at all/ a little	4%	8%
	Somewhat	16%	24%
	Considerably/ very much	78%	68%
	N/A	2%	0%
Case conferences or case reviews	Not at all/ a little	7%	14%
	Somewhat	17%	24%
	Considerably/ very much	71%	62%
	N/A	4%	0%

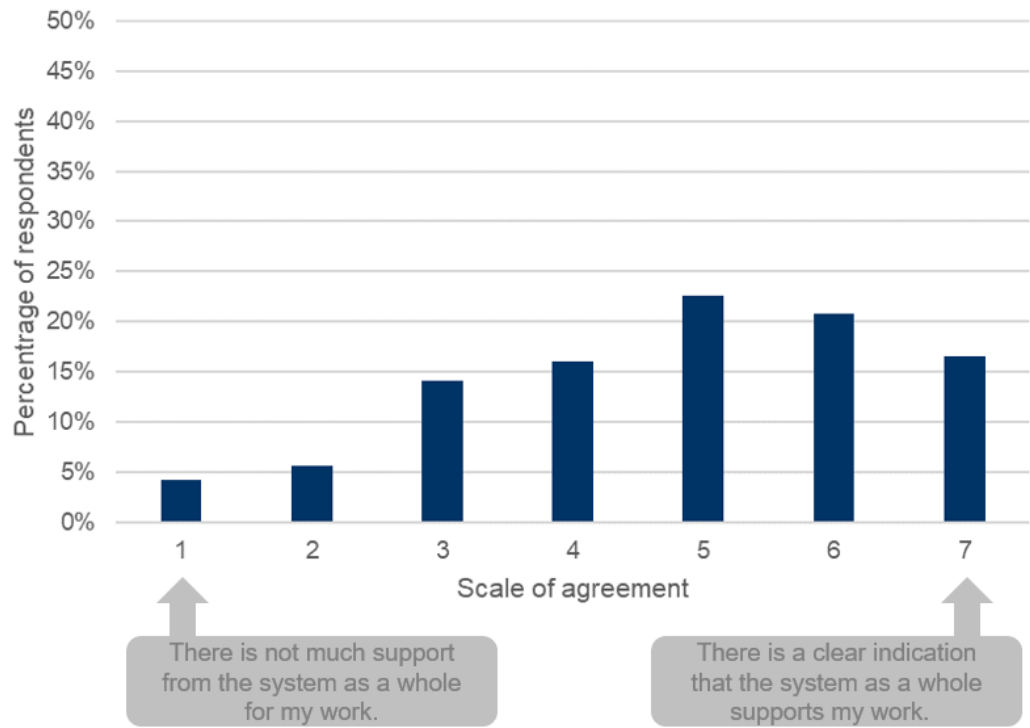
To what extent does your organisation share the following activities with other organisations serving people experiencing multiple disadvantage?		Multiple disadvantage coordinator (17 areas, n=166 including non-responses to some questions)	No multiple disadvantage coordinator (3 areas, n=37 including non-responses to some questions)
Applications for funding	Not at all/ a little	24%	27%
	Somewhat	27%	19%
	Considerably/ very much	43%	41%
	N/A	6%	14%
Work spaces	Not at all/ a little	38%	36%
	Somewhat	26%	25%
	Considerably/ very much	31%	33%
	N/A	5%	6%

4.3.2 System-wide support

We asked respondents whether they felt that their work linked to the MEAM Approach was supported by the wider system and there was some evidence that respondents felt this to be the case. (More respondents think there is support from the wider system for their work than those who think there is no or very little support.) However, the survey responses suggest there is a wide range of experience, and that the majority of those who feel their work is supported also think there is considerable room for improvement. On a 1 to 7 scale, where 1 indicates very little support from the system and 7 indicates clear indication of support from the system as a whole, the mean score reported by respondents was 4.75 (n=212).

We did not find any evidence of difference in experience relating to system-wide support depending on lead organisation type (statutory or VCS sector organisation) or local authority type (single-tier or two-tier authority).

Figure 34: Responses relating to the extent of support from the system for their work felt by respondents (valid n=212; non-responses (1) have not been included)



4.3.3 Success and challenges of local partnerships

Successes

When asked about the top successes of local work developed using the MEAM Approach, respondents most frequently commented on successes relating to partnership working. (The next most frequently reported types of success were the client-centred focus of the approach and improved housing outcomes for clients.)

Respondents highlighted a range of different successful elements of local multi-agency partnership working, including:

- More open lines of communication between professionals across agencies, including greater information sharing about clients.
- Better coordination of safeguarding and support.
- Responsibility being distributed amongst different agencies.
- An increase of partnership working between strategic and operational-level groups, as well as horizontally between services.

- Services influencing other services (in terms of buy-in to the value of the MEAM Approach).
- Sharing of good practice between agencies and services.

Challenges

When asked about the main challenges of local work developed using the MEAM Approach, respondents most frequently commented on issues related to the short-term nature of the funding, and the lack of resources and staff in local areas to deliver work effectively. The next most frequently reported challenges were related to partnerships and partnership working. Respondents highlighted a range of challenges pertaining to local multi-agency partnership working:

- Having sufficient leadership and management across the partnership to guide and support services and agencies to work together and achieve more joined up work.
- Achieving initial buy-in from partner agencies – achieving buy-in from mental health was flagged most frequently as a challenge, along with the police, housing and adult social care.
- Maintaining commitment from partner agencies (agencies are “bought in” initially, but over time participation drops off).
- Consistent strategic board membership.
- Information sharing/GDPR restrictions.
- Sharing of responsibility between partners/agencies.
- Understanding policies, systems and remits of other partner agencies.
- Restrictive remits of commissioned services.
- Time constraints of partners to focus on the MEAM Approach.
- Duplication of multi-agency forums, i.e. too much overlap between various partnership groups.
- Getting other services and professionals to understand and value the MEAM Approach.

Areas for development

When asked what they would change about local work developed using the MEAM Approach to increase efficacy, the most frequently reported areas for development were related to partnership working. Stakeholders identified a number of changes relating to partnerships and partnership working, which they believe would lead to more effective local work:

- Higher level of senior strategic buy-in, with some respondents noting that this was especially important in the initial implementation of work using the MEAM Approach in local areas.
- More clarity regarding the required levels of commitment to the MEAM Approach and joint working to be established with all partners when joining the partnership.
- Involvement of a wider range of agencies when first developing the partnership.
- Co-location of services.
- Consistent attendance from partners and stakeholders at partnership meetings – some respondents suggested that partners' attendance should be obligatory.

5 Approach to qualitative analysis and development of key findings

5.1 Overview

In this chapter we outline how we have worked with the expert by experience research group to develop the findings from qualitative consultation and to sense-test the report.

5.2 Preparation of data by Cordis Bright

Once all the fieldwork was complete, Cordis Bright completed an initial rapid thematic analysis of the data collected through the deep dive interviews and partnership meeting observations. Through this Cordis Bright identified five key topics emerging from the data:

- Connecting strategic and operational groups.
- Sustainability and strategic buy-in.
- Co-production.
- People facing multiple disadvantage achieving their goals.
- Strengths and challenges in implementing the MEAM Approach.

In preparation for further analysis with the expert by experience research group, Cordis Bright:

- a) Synthesised and summarised notes from the meeting observations.
- b) Selected a range of extended quotes from interviews in each of the five deep dive areas that relate to each of the five themes.

5.3 Analysis workshops with expert by experience research group

We discussed the selected extended quotes and meeting observation summaries on an area-by-area basis with the expert by experience research group during a day-long workshop. Themes emerging from the data under the five key topics were identified and discussed by the research group, and compared across areas. New themes and topics were also identified by the group.

We were originally due to analyse the qualitative data over the course of two day-long workshops. However, in the end only one workshop took place meaning that themes were identified based on data from two deep dive areas instead of all five – the second workshop was cancelled due to the COVID-19 pandemic crisis.

5.4 Follow-up analysis by Cordis Bright

A full in-depth thematic analysis was then conducted by Cordis Bright on all the qualitative data collected in year 3. The themes identified by the expert by experience research group formed the starting point for the analysis; we also identified additional themes.

5.5 Review workshop with expert research group

Once all analysis of data from fieldwork and consultation was complete (i.e. all analysis except that of the CDF data) findings from the different research methods were triangulated and discussed at an internal Cordis Bright team meeting. Ten “key findings” were identified based on this triangulated data.

These ten key findings were then shared and discussed with the expert by experience research group over the course of two virtual meetings. The expert by experience research group approved of the overall sense of the ten key findings. However, amendments were made to the framing of some of the findings considering their recommendations.

5.6 Reporting

The initial ten key findings were then further revised in line with the findings of the CDF data analysis. These ten key findings were shared with MEAM and revisions were made by Cordis Bright to break down some of the findings further. This resulted in 15 key findings, the substance of which broadly reflected the findings already agreed with the expert by experience research group.

Once key findings were agreed, the year 3 main report, MEAM Approach partnerships thematic report and this technical appendix were written up by Cordis Bright. These reports have been sense tested with the expert by experience research group and the evaluation steering group and agreed with MEAM.



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