## **MEAM**

MEAM Approach evaluation Year 3 mid-year report

January 2020





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## 1 Introduction

Cordis Bright would like to thank everyone involved in shaping and delivering the evaluation to date. Particular thanks go to members of the expert research group for their help in designing research tools, carrying out fieldwork, analysing interview data and more. Thank you also to the local staff in MEAM Approach network areas who have participated in the research, collected and collated client-level data for the CDF, and facilitated our deep dive research visits; as well as to the clients who have participated in interviews and/or consented to their data being shared with the evaluation. Thank you as well to MEAM staff and to members of the evaluation steering group. The evaluation is much stronger for your advice, collaboration and participation.

#### 1.1 Overview

This is the year 3 mid-year report for the longitudinal evaluation of the MEAM Approach. The report provides a brief overview of the research planned for year 3 (section 2) and an assessment of the quality of the client-level data submitted to the evaluation to date (section 3). The report does not present findings from the evaluation research. This will be included in the year 3 end-of-year report, due to be published in Summer 2020.

#### 1.2 About the evaluation

The evaluation has been commissioned by the Making Every Adult Matter (MEAM) coalition and is being delivered by Cordis Bright, an independent research and consultancy organisation, in conjunction with the MEAM coalition team, local areas using the MEAM Approach and people with lived experience of multiple disadvantage. The evaluation is taking place over five years between 2017 and 2022.

#### 1.3 The MEAM Approach

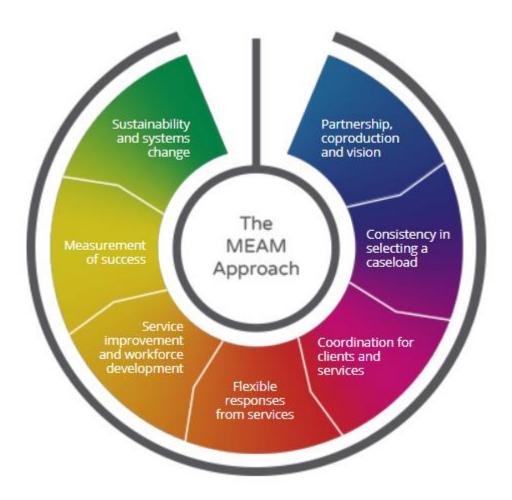
The Making Every Adult Matter (MEAM) coalition is formed of the national charities Clinks, Homeless Link, Mind and associate member, Collective Voice.

MEAM developed the MEAM Approach in 2013 as a non-prescriptive framework to help local areas to design and deliver better coordinated services for people facing multiple disadvantage <sup>1</sup>. The MEAM Approach includes seven core elements that should be considered by all local areas, but it does not prescribe a particular way in which these elements should be achieved. The framework is presented in Figure 1.

<sup>&</sup>lt;sup>1</sup> MEAM (no date) The MEAM Approach <u>www.meam.org.uk/the-meam-approach</u>

The MEAM Approach is currently being used by cross-sector partnerships of statutory and voluntary agencies in 28<sup>2</sup> local areas across England.

Figure 1: The MEAM Approach



Source: The MEAM Approach website (2019)3

## 1.4 Local areas in the MEAM Approach network

The MEAM Approach network of local areas has been developing since 2013. In 2017, supported by the National Lottery Community Fund, the coalition put in place a new cohort of MEAM Approach areas, which are receiving support from the MEAM Local Networks Team and working together to share practice and provide peer support.

<sup>&</sup>lt;sup>2</sup> Peterborough and Stafford joined the network during year 3 and are therefore not included in the rest of this report. They will be included in the evaluation from year 4 onwards.

<sup>&</sup>lt;sup>3</sup> The MEAM Approach website: www.meam.org.uk/the-meam-approach

As at December 2019, 28 local areas are involved in the MEAM Approach network. The areas are:

- Adur and Worthing
- Basingstoke and Deane
- Blackburn with Darwen
- Cambridgeshire
- Coventry
- Cornwall
- Doncaster
- Exeter
- Hackney
- Haringey
- Hull
- North Lincolnshire
- Norwich
- Oldham

- Peterborough
- Plymouth
- Preston
- Redcar and Cleveland
- Reading
- Southend-on-Sea
- Stafford
- Sunderland
- Surrey
- West Berkshire
- Westminster
- Winchester
- Windsor and Maidenhead
- York

#### 1.5 Further information

More information on the MEAM Approach, the network and the approach to the evaluation can be found in the previous evaluation reports, including:

- The live evaluation framework, produced in March 2018.
- The year 1 (scoping) report, produced in March 2018.
- The year 2 mid-year report, produced in October 2018.
- The year 2 report and methodology, produced in July 2019.
- The year 3 update to the scoping report, produced in May 2019.

These are available here: <a href="http://meam.org.uk/the-meam-approach/meam-approach-evaluation/">http://meam.org.uk/the-meam-approach/meam-approach/meam-approach/meam-approach-evaluation/</a>

## 2 Year 3 evaluation approach

#### 2.1 Introduction

In this section we set out the evaluation focus and data collection methods for year 3. These are based on an assessment of the evaluation's findings in year 2, suggestions raised by the evaluation steering group and lessons learnt from the evaluation to date.

#### 2.2 Year 3 research theme

The year 2 research provided considerable insight into the impact of the MEAM Approach for clients. In year 3 our research and analysis will focus on the local MEAM partnerships, including the structures that sit behind the frontline work of supporting clients, such as the operational and strategic groups. This will provide greater detail and insight into the impact of the MEAM Approach on local systems, the operational/strategic models being developed locally, and what difference these structures make and how. It will also help identify examples of good practice to support learning across the network.

In addition to the overarching research questions set out in the evaluation framework, our key research questions for year 3 are:

- 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.)?
- How impactful are different strategic and operational groups (or other MEAM Approach partnership structures)?
- 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?
- What are the key features for effective MEAM partnerships?
- What are the main challenges in setting up and running strategic and operational groups (or other MEAM Approach partnership structures)?

#### 2.3 Year 3 research methods

The key data collection methods for year 3 are:

- Local staff e-survey. This was in circulation across the network throughout November and December 2019 and January 2020<sup>4</sup>.
- Local lead telephone interviews. We conducted telephone interviews with MEAM Approach leads from the network areas over the month of December<sup>5</sup>.
- Deep dive fieldwork. In January, February and March 2020 we will be carrying out "deep dive" fieldwork in five local areas with a range of strategic and operational partnership models. We will agree the approach with each deep dive area, but we currently plan to attend two partnership meetings in each area. We will use these visits to learn from the local areas, understand local partnership structures and conversations, and identify examples of best practice in MEAM Approach partnerships. We will also carry out five face-to-face interviews with local staff from a range of services in each area.
- **Common data framework.** The collection of client-level outcomes and service use data will continue as in year 2.
- Interviews and focus group with MEAM staff. We conducted a focus group and telephone interviews with MEAM staff in December.

As in previous years of the evaluation, we are working closely with the evaluation's expert research group<sup>6</sup> throughout year 3 to develop research tools, carry out fieldwork (i.e. research visits, focus groups and face-to-face interviews), and analyse qualitative data.

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<sup>&</sup>lt;sup>4</sup> In the year 3 end of year report we will likely only analyse responses that relate to the MEAM partnership structures and working. However, we will present a comprehensive longitudinal analysis of the survey, including data from all years of the evaluation, in year 5.

<sup>&</sup>lt;sup>5</sup> We intend to interview MEAM Approach leads from each network area. However, not all interviews have been completed at the time of writing.

<sup>&</sup>lt;sup>6</sup> See year 2 report methodology annex for more information about the expert research group: http://meam.org.uk/the-meam-approach/meam-approach-evaluation/

# 3 Common data framework data quality check: key findings

#### 3.1 Introduction

In this section we present an assessment of the quality of the client-level data submitted to the evaluation by MEAM Approach network areas, covering the first two and a half years of the evaluation, i.e. the period from 1<sup>st</sup> April 2017 to 30<sup>th</sup> September 2019. This common set of data is collected on a quarterly basis from network areas working with a cohort of clients, as set out in the common data framework (CDF).

The key findings section:

- Presents a snapshot of the data quality on an area-by-area and data type-bydata type basis.
- Assesses the key strengths and weaknesses of the dataset to date.
- Identifies the key implications of the current data quality for our analysis.
- Provides recommendations for improving the dataset in future returns.

The client-level data requested from local areas is set out in Figure 2.

Figure 2: Client-level data requested via the CDF

| Data type                           | Details  |
|-------------------------------------|--|
| Client personal details             | Includes a range of demographic information plus support start date and accommodation at start date. Just one entry required per client (at the beginning of their support).   |
| Client outcomes                     | <ul> <li>The Homelessness Outcomes Star (this is the principal measure); and</li> <li>The New Directions Team Assessment (this is a secondary measure – areas are asked to prioritise the use of Homelessness Outcomes Star).</li> <li>Areas are asked to collect client outcome measures once per client per quarter, and also when the client experiences a significant change in circumstance.</li> </ul> |
| Client service use prior to support | The client's use of a number of key services is requested for each client for the 12 months  |

| Data type                                  | Details  |
|--|--|
|  | preceding the start of their support by interventions developed using the MEAM Approach. This data is ideally administrative data from housing, health and police partners. However, we also accept self-reported data.  |
|  | The types of service use data included in the CDF are:   |
|  | <ul> <li>Accident &amp; Emergency department attendances</li> <li>Non-elective acute hospital admissions</li> <li>Mental health inpatient admissions</li> <li>Nights in different types of accommodation (and nights not in accommodation).</li> <li>Arrests</li> <li>Nights in prison</li> </ul>  |
| Client service use during and post support | Use of the same key services is then requested on a quarterly basis for clients once they have started receiving support and for the first four quarters following their support end date. Quarterly data is also requested regarding the client's accommodation over the quarter, accommodation status at the end of the quarter and frequency of contact with interventions developed using the MEAM Approach. |

## 3.2 Key findings

### 3.2.1 Data quality summary

#### Number of network areas submitting CDF data returns

Since the beginning of the programme, we have received data from 19 network areas out of a possible total of 24 areas that have supported clients over the first two and a half years of the evaluation. A further five areas were not eligible – three because they were not yet supporting clients by 30<sup>th</sup> September 2019 and two (Stafford and Peterborough) because they joined the network during year 3 and will be part of the evaluation from year 4.<sup>7</sup>

<sup>&</sup>lt;sup>7</sup> These figures add to 29 (rather than the 28 areas currently in the network) because data is included from Halton, which left the network in year two and submitted data until that time. Data from Halton clients is therefore included in the national dataset.

#### Number of clients included in CDF

We have received data on a total of 5998 clients over the first two and a half years of the evaluation.

Proportion of all clients receiving intervention under the MEAM Approach whose data is included in the CDF

The proportion of clients areas are working with for whom we receive data varies from 12% to 100% between areas<sup>9</sup>. We are unable at this point in time to provide a reliable estimate for the proportion of clients supported across the whole network for whom we receive data, although we know that at least 890<sup>10</sup> clients have been supported across the network since 1<sup>st</sup> April 2017.<sup>11</sup> We will improve the data capture on this statistic for future reports.

#### Snapshot overview of data quality in each network area – year 3 quarter 2

In year 3 quarter 2 we received a data submission from 17 areas. Among the ten network areas which did not submit this quarter, three areas are not yet working with a cohort, four have not yet established data collection systems, one has not yet gained consent from clients to share data with the evaluation, one area was unable to submit a return due to staff capacity, and one area left the network during year 2. Two further areas, Stafford and Peterborough, will not be included in the evaluation until year 4.

Figure 4 presents an area-by-area overview of the number of clients in the CDF; the client personal information and previous service use data available for clients in the CDF; and the quarterly outcomes, service use, accommodation and engagement data submitted for clients in year 3 quarter 2. This summarises the data submitted by areas in year 3 quarter 2 and therefore indicates where network areas should focus on improving submissions in future quarters. It does not account for quarterly data provided by areas for previous quarters, and therefore is not an indication of the level of analysis that would be possible with the existing dataset.

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<sup>&</sup>lt;sup>8</sup> Three of these clients are known to be returning clients. This is because we understand one area to assign a new client ID to returning clients. The outcomes, service use, accommodation and engagement analysis in this report therefore treat the clients' first and second case as two separate clients. We include in this total count the case total instead of client total for the area in question to maintain alignment with the analysis presented elsewhere in the report.

<sup>&</sup>lt;sup>9</sup> This depends on the number of clients who consent to their data being shared with the evaluation.

<sup>&</sup>lt;sup>10</sup> 11 of these clients are known to be returning clients. See footnote 8 for more detail.

<sup>&</sup>lt;sup>11</sup> This is a minimum estimate. For some areas the number of clients supported since 1st April 2017 is unknown. For such areas, where possible we have based this estimate on the number of clients in the CDF instead. However, there are some other areas (Plymouth, Cornwall, Coventry) which we know to be supporting clients but have never submitted CDF data. For these areas, there is no proxy information and therefore no clients from these areas are included in the count.

Figure 3: Key for Figure 4, Figure 5 and Figure 6

| Colour | Detail   |
|--------|--|
|        | <b>High data quality:</b> data provided for <b>at least 75%</b> eligible clients in year 3 quarter 2 across all variables in the relevant section. |
|        | Medium data quality: data provided for at least 50% eligible clients in year 3 quarter 2 across all variables in the relevant section.             |
|        | Low data quality: data provided for less than 50% eligible clients in year 3 quarter 2 across all variables in the relevant section.               |

Figure 4: Overview of year 3 quarter 2 data quality by data type

| Local area               | Y3Q2 data? | Data provided once per client |  |  | Data provio<br>during sup                                | ded on a qua<br>port | arterly basis | for clients                           | basis for cl   | lients during                                      | n a quarterly<br>during support<br>rters post support |  |  |
|--------------------------|------------|-------------------------------|--|--|--|----------------------|---------------|---------------------------------------|--|--|---|--|--|
|                          |            | No. clients in CDF            | Client<br>personal<br>inform-<br>ation <sup>12</sup> | Previous<br>service<br>use<br>(complete<br>or partial) | No. clients<br>in CDF<br>receiving<br>support in<br>Y3Q2 | Y3Q2<br>HOS          | Y3Q2<br>NDTA  | Y3Q2<br>engage-<br>ment <sup>13</sup> | No. clients<br>received<br>support in<br>Y2Q2 or<br>later) <sup>14</sup> | Y3Q2<br>service<br>use<br>(complete<br>or partial) | Y3Q2<br>accomo-<br>dation                             |  |  |
| Total across network     | -          | 599                           |  | 339 (57%)  | 446  | 137 (31%)            | 153 (34%)     |                                       | 590  | 249 (42%)  | 226 (38%)   |  |  |
| Adur and<br>Worthing     | Yes        | 30                            |  | 0 (0%)   | 28   | 23 (82%)             | 23 (82%)      |                                       | 30   | 28 (93%)   | 26 (87%)  |  |  |
| Basingstoke and Deane    | Yes        | 14                            |  | 9 (64%)  | 11   | 5 (45%)              | 2 (18%)       |                                       | 14   | 8 (57%)  | 6 (43%)   |  |  |
| Blackburn<br>with Darwen | Yes        | 37                            |  | 37 (100%)  | 26   | 7 (27%)              | 3 (12%)       |                                       | 33   | 8 (24%)  | 8 (24%)   |  |  |
| Cambridge-<br>shire      | Yes        | 26                            |  | 24 (92%)   | 21   | 8 (38%)              | 20 (95%)      |                                       | 25   | 17 (68%)   | 18 (72%)  |  |  |

<sup>&</sup>lt;sup>12</sup> This column is based on data provided for seven personal information variables, therefore it is not possible to provide a count or percentage in this column.

<sup>&</sup>lt;sup>13</sup> This column is based on data provided for two engagement variables, therefore it is not possible to provide a count or percentage in this column.

<sup>&</sup>lt;sup>14</sup> This figure does not account for the reason for which support has ended. For some clients it may not have been possible for post-support data to be provided, e.g. in the case of a client passing away.

| Local area | Y3Q2 data?                                |                    |  |  | Data provid<br>during sup                                | ded on a qua<br>port | arterly basis | for clients                           | basis for cl   | lients during                                      | on a quarterly<br>ts during support<br>arters post support |  |  |
|------------|---|--------------------|--|--|--|----------------------|---------------|---------------------------------------|--|--|--|--|--|
|            |   | No. clients in CDF | Client<br>personal<br>inform-<br>ation <sup>12</sup> | Previous<br>service<br>use<br>(complete<br>or partial) | No. clients<br>in CDF<br>receiving<br>support in<br>Y3Q2 | Y3Q2<br>HOS          | Y3Q2<br>NDTA  | Y3Q2<br>engage-<br>ment <sup>13</sup> | No. clients<br>received<br>support in<br>Y2Q2 or<br>later) <sup>14</sup> | Y3Q2<br>service<br>use<br>(complete<br>or partial) | Y3Q2<br>accomo-<br>dation                                  |  |  |
| Cornwall   | No – no<br>approach to<br>data collection | 0                  | N/A  | N/A  | 0  | N/A                  | N/A           | N/A                                   | 0  | N/A  | N/A  |  |  |
| Coventry   | No – no<br>approach to<br>data collection | 0                  | N/A  | N/A  | 0  | N/A                  | N/A           | N/A                                   | 0  | N/A  | N/A  |  |  |
| Doncaster  | No – staffing / capacity issues           | 156                |  | 0 (0%)   | 134  | N/A                  | N/A           | N/A                                   | 156  | N/A  | N/A  |  |  |
| Exeter     | Yes                                       | 12                 |  | 12 (100%)  | 11   | 0 (0%)               | 11 (100%)     |                                       | 12   | 11 (92%)   | 10 (83%)   |  |  |
| Hackney    | Yes                                       | 23                 |  | 0 (0%)   | 17   | 0 (0%)               | 4 (24%)       |                                       | 21   | 14 (67%)   | 14 (67%)   |  |  |
| Halton     | No – no<br>longer in<br>network           | 32                 |  | 29 (91%)   | 26   | N/A                  | N/A           | N/A                                   | 32   | N/A  | N/A  |  |  |
| Haringey   | Yes                                       | 6                  | 15   | 6 (100%)   | 6  | 6 (100%)             | 6 (100%)      |                                       | 6  | 6 (100%)   | 6 (100%)   |  |  |
| Hull       | Yes                                       | 32                 |  | 23 (72%)   | 28   | 25 (89%)             | 0 (0%)        |                                       | 32   | 25 (78%)   | 25 (78%)   |  |  |

<sup>&</sup>lt;sup>15</sup> 100% data provided for all categories except for age.

| Local area              | Y3Q2 data?                                |                    |  |  | Data providuring sup                                     | ded on a qua<br>port | arterly basis | for clients                           | basis for c  | ded on a qua<br>lients during<br>l quarters p      |                           |  |  |
|-------------------------|---|--------------------|--|--|--|----------------------|---------------|---------------------------------------|--|--|---------------------------|--|--|
|                         |   | No. clients in CDF | Client<br>personal<br>inform-<br>ation <sup>12</sup> | Previous<br>service<br>use<br>(complete<br>or partial) | No. clients<br>in CDF<br>receiving<br>support in<br>Y3Q2 | Y3Q2<br>HOS          | Y3Q2<br>NDTA  | Y3Q2<br>engage-<br>ment <sup>13</sup> | No. clients<br>received<br>support in<br>Y2Q2 or<br>later) <sup>14</sup> | Y3Q2<br>service<br>use<br>(complete<br>or partial) | Y3Q2<br>accomo-<br>dation |  |  |
| North Lincs             | Yes                                       | 18                 |  | 9 (50%)  | 13   | 0 (0%)               | 3 (23%)       |                                       | 18   | 9 (50%)  | 8 (44%)                   |  |  |
| Norwich                 | Yes                                       | 95                 |  | 73 (77%)   | 34   | 13 (38%)             | 25 (74%)      |                                       | 95   | 34 (36%)   | 32 (34%)                  |  |  |
| Oldham                  | Not eligible –<br>no cohort               | N/A                | N/A  | N/A  | N/A  | N/A                  | N/A           | N/A                                   | N/A  | N/A  | N/A                       |  |  |
| Plymouth                | No – no<br>approach to<br>data collection | 0                  | N/A  | N/A  | 0  | N/A                  | N/A           | N/A                                   | 0  | N/A  | N/A                       |  |  |
| Preston                 | Yes                                       | 14                 |  | 14 (100%)  | 6  | 5 (83%)              | 0 (0%)        |                                       | 14   | 5 (36%)  | 2 (14%)                   |  |  |
| Reading                 | No – no<br>consent                        | 0                  | N/A  | N/A  | 0  | N/A                  | N/A           | N/A                                   | 0  | N/A  | N/A                       |  |  |
| Redcar and<br>Cleveland | Yes                                       | 21                 |  | 21 (100%)  | 19   | 19 (100%)            | 0 (0%)        |                                       | 21   | 19 (90%)   | 19 (90%)                  |  |  |
| Southend                | Yes                                       | 14                 |  | 14 (100%)  | 14   | 11 (79%)             | 12 (86%)      |                                       | 14   | 12 (86%)   | 12 (86%)                  |  |  |
| Sunderland              | No – no<br>approach to<br>data collection | 0                  | N/A  | N/A  | 0  | N/A                  | N/A           | N/A                                   | 0  | N/A  | N/A                       |  |  |
| Surrey                  | Not eligible –<br>no cohort               | N/A                | N/A  | N/A  | N/A  | N/A                  | N/A           | N/A                                   | N/A  | N/A  | N/A                       |  |  |

| Local area                | Y3Q2 data?                  | Data provid           | · · · · · · · · · · · · · · · · · · ·                |  |  | ded on a qua<br>port | arterly basis | Data provided on a quarterly basis for clients during support and up to 4 quarters post support |  |  |                           |
|---------------------------|-----------------------------|-----------------------|--|--|--|----------------------|---------------|---|--|--|---------------------------|
|                           |                             | No. clients<br>in CDF | Client<br>personal<br>inform-<br>ation <sup>12</sup> | Previous<br>service<br>use<br>(complete<br>or partial) | No. clients<br>in CDF<br>receiving<br>support in<br>Y3Q2 | Y3Q2<br>HOS          | Y3Q2<br>NDTA  | Y3Q2<br>engage-<br>ment <sup>13</sup>   | No. clients<br>received<br>support in<br>Y2Q2 or<br>later) <sup>14</sup> | Y3Q2<br>service<br>use<br>(complete<br>or partial) | Y3Q2<br>accomo-<br>dation |
| West<br>Berkshire         | Yes                         | 17                    |  | 17 (100%)  | 6  | 2 (33%)              | 0 (0%)        |   | 15   | 7 (47%)  | 1 (7%)                    |
| Westminster               | Yes                         | 2                     |  | 2 (100%)   | 2  | 2 (100%)             | 0 (0%)        |   | 2  | 2 (100%)   | 1 (50%)                   |
| Winchester                | Not eligible –<br>no cohort | N/A                   | N/A  | N/A  | N/A  | N/A                  | N/A           | N/A   | N/A  | N/A  | N/A                       |
| Windsor and<br>Maidenhead | Yes                         | 13                    |  | 13 (100%)  | 11   | 11 (100%)            | 11 (100%)     |   | 13   | 11 (85%)   | 10 (77%)                  |
| York                      | Yes                         | 37                    |  | 36 (97%)   | 33   | 0 (0%)               | 33 (100%)     |   | 37   | 33 (89%)   | 28 (76%)                  |

Whole programme overview of data quality in each network area – beginning of programme to year 3 quarter 2

As well as looking at data quality in year 3 quarter 2, we have also examined the quality of all the data provided over the programme up to year 3 quarter 2. This is based on data from 19 areas. An overall data quality summary is provided in the tables at Figure 5 and Figure 6. These tables build a picture of the data available for analysis of outcomes achieved.

| Local area             | No. clients | HOS and NDTA data                                     |   |  |  |  |  |  |
|------------------------|-------------|---|---|--|--|--|--|--|
|                        | in CDF      | No. clients<br>supported for<br>2 or more<br>quarters | No. (%) clients<br>with at least 2<br>HOS | No. (%) clients<br>with at least 2<br>NDTA <sup>17</sup> |  |  |  |  |
| Total across network   | 599         | 496   | 189 (38%)                                 | 158 (32%)  |  |  |  |  |
| Adur and Worthing      | 30          | 26  | 23 (88%)                                  | 25 (96%)   |  |  |  |  |
| Basingstoke and Deane  | 14          | 13  | 0 (0%)                                    | 0 (0%)   |  |  |  |  |
| Blackburn with Darwen  | 37          | 29  | 10 (34%)                                  | 3 (10%)  |  |  |  |  |
| Cambridgeshire         | 26          | 22  | 4 (18%)                                   | 20 (91%)   |  |  |  |  |
| Cornwall               | 0           | N/A   | N/A                                       | N/A  |  |  |  |  |
| Coventry               | 0           | N/A   | N/A                                       | N/A  |  |  |  |  |
| Doncaster              | 156         | 153   | 65 (42%)                                  | 0 (0%)   |  |  |  |  |
| Exeter                 | 12          | 12  | 0 (0%)                                    | 12 (100%)  |  |  |  |  |
| Hackney                | 23          | 20  | 0 (0%)                                    | 9 (45%)  |  |  |  |  |
| Halton                 | 32          | 32  | 0 (0%)                                    | 0 (0%)   |  |  |  |  |
| Haringey <sup>18</sup> | 6           | 6   | 0 (0%)                                    | 0 (0%)   |  |  |  |  |

<sup>&</sup>lt;sup>16</sup> This table describes the data available for analysis using the approach used in our year 2 end of year report: i.e. analysis of distance travelled between clients' first and most recent HOS/NDTA entries.

<sup>&</sup>lt;sup>17</sup> Some of these figures total more than 100% of the number of clients supported for 2 or more quarters, because the length of time for which clients are supported is based on whether or not local areas have supplied an end date for a client' support. These figures do not capture instances wherein a client has ended support and then re-started support subsequently, where they have not then been assigned a new client ID. We are now encouraging local areas to create new client IDs where this is the case. Alternatively, where cases are temporarily closed due to being unable to contact a client and then re-opened once contact re-established, we are encouraging local areas to retrospectively remove end dates once contact is re-established. However, this approach has not yet been applied uniformly across all areas.

<sup>&</sup>lt;sup>18</sup> Year 3 quarter 2 was the first data submission for Haringey. The low proportion of eligible clients with two HOS or NDTA in Haringey is related to the fact that, while data collection only started in year 3 quarter 2, clients started receiving support prior to this. Hence clients have received support for two or more quarters while data has only been collected for one quarter.

| Local area             | No. clients | HOS and NDTA data                                     |   |  |  |  |  |  |
|------------------------|-------------|---|---|--|--|--|--|--|
|                        | in CDF      | No. clients<br>supported for<br>2 or more<br>quarters | No. (%) clients<br>with at least 2<br>HOS | No. (%) clients<br>with at least 2<br>NDTA <sup>17</sup> |  |  |  |  |
| Hull                   | 32          | 27  | 27 (100%)                                 | 0 (0%)   |  |  |  |  |
| North Lincs            | 18          | 11  | 0 (0%)                                    | 0 (0%)   |  |  |  |  |
| Norwich                | 95          | 42  | 8 (19%)                                   | 27 (64%)   |  |  |  |  |
| Oldham                 | N/A         | N/A   | N/A                                       | N/A  |  |  |  |  |
| Plymouth               | 0           | N/A   | N/A                                       | N/A  |  |  |  |  |
| Preston                | 14          | 7   | 6 (86%)                                   | 0 (0%)   |  |  |  |  |
| Reading                | 0           | N/A   | N/A                                       | N/A  |  |  |  |  |
| Redcar and Cleveland   | 21          | 18  | 18 (100%)                                 | 0 (0%)   |  |  |  |  |
| Southend               | 14          | 14  | 14 (100%)                                 | 14 (100%)  |  |  |  |  |
| Sunderland             | 0           | N/A   | N/A                                       | N/A  |  |  |  |  |
| Surrey                 | N/A         | N/A   | N/A                                       | N/A  |  |  |  |  |
| West Berkshire         | 17          | 15  | 0 (0%)                                    | 0 (0%)   |  |  |  |  |
| Westminster            | 2           | 2   | 2 (100%)                                  | 0 (0%)   |  |  |  |  |
| Winchester             | N/A         | N/A   | N/A                                       | N/A  |  |  |  |  |
| Windsor and Maidenhead | 13          | 12  | 12 (100%)                                 | 12 (100%)  |  |  |  |  |
| York                   | 37          | 35  | 0 (0%)                                    | 36 (103%)  |  |  |  |  |

Figure 6: Overview of overall data quality for service use and accommodation data as at end of year 3 quarter 2<sup>19</sup>

| Local area               | No. of clients in |           | ce use data: no<br>to support an | Accommodation data: No. (%) clients with accommodation data for all |           |           |   |
|--------------------------|-------------------|-----------|----------------------------------|---|-----------|-----------|---|
|                          | CDF               | A&E       | RE NEL MH adx. Arr               |   | Arrest    | Prison    | quarters during support (complete or partialError! Bookmark not defined.) |
| Total across the network | 599               | 150 (25%) | 148 (25%)                        | 133 (22%)   | 178 (30%) | 177 (30%) | 165 (28%)   |
| Adur and Worthing        | 30                | 0 (0%)    | 0 (0%)                           | 0 (0%)  | 0 (0%)    | 0 (0%)    | 6 (20%)   |
| Basingstoke and Deane    | 14                | 2 (14%)   | 0 (0%)                           | 0 (0%)  | 0 (0%)    | 1 (7%)    | 2 (14%)   |
| Blackburn with Darwen    | 37                | 7 (19%)   | 6 (16%)                          | 6 (16%)   | 7 (19%)   | 7 (19%)   | 5 (14%)   |
| Cambridgeshire           | 26                | 0 (0%)    | 0 (0%)                           | 0 (0%)  | 11 (42%)  | 11 (42%)  | 11 (42%)  |
| Cornwall                 | 0                 | N/A       | N/A                              | N/A   | N/A       | N/A       | N/A   |
| Coventry                 | 0                 | N/A       | N/A                              | N/A   | N/A       | N/A       | N/A   |
| Doncaster                | 156               | 0 (0%)    | 0 (0%)                           | 0 (0%)  | 0 (0%)    | 0 (0%)    | 5 (3%)  |
| Exeter                   | 12                | 3 (25%)   | 3 (25%)                          | 3 (25%)   | 3 (25%)   | 3 (25%)   | 3 (25%)   |
| Hackney                  | 23                | 0 (0%)    | 0 (0%)                           | 0 (0%)  | 0 (0%)    | 0 (0%)    | 14 (61%)  |
| Halton                   | 32                | 0 (0%)    | 0 (0%)                           | 0 (0%)  | 0 (0%)    | 0 (0%)    | 1 (3%)  |
| Haringey                 | 6                 | 0 (0%)    | 0 (0%)                           | 0 (0%)  | 0 (0%)    | 0 (0%)    | 0 (0%)  |

<sup>&</sup>lt;sup>19</sup> In some areas (for example Westminster) the low counts are due to the fact that clients started receiving support prior to the start of data collection, and therefore service use and accommodation data has been provided for the first quarter of data collection but not for the first quarter in which clients received support.

<sup>&</sup>lt;sup>20</sup> Post-support data has also been collected for some clients but this is not included in this summary.

| Local area             | No. of clients in | Overall service use data: no. (%) clients with service use data for 12 months prior to support and all quarters during support <sup>20</sup> |           |           |           | Accommodation data: No. (%) clients with accommodation data for all |   |
|------------------------|-------------------|--|-----------|-----------|-----------|---|---|
|                        | CDF               | A&E  | NEL       | MH adx.   | Arrest    | Prison  | quarters during support (complete or partialError! Bookmark not defined.) |
| Hull                   | 32                | 0 (0%)   | 0 (0%)    | 0 (0%)    | 9 (28%)   | 9 (28%)   | 16 (50%)  |
| North Lincs            | 18                | 0 (0%)   | 0 (0%)    | 0 (0%)    | 8 (44%)   | 8 (44%)   | 7 (39%)   |
| Norwich                | 95                | 56 (59%)   | 57 (60%)  | 57 (60%)  | 58 (61%)  | 58 (61%)  | 46 (48%)  |
| Oldham                 | 0                 | N/A  | N/A       | N/A       | N/A       | N/A   | N/A   |
| Plymouth               | 0                 | N/A  | N/A       | N/A       | N/A       | N/A   | N/A   |
| Preston                | 14                | 9 (64%)  | 9 (64%)   | 9 (64%)   | 9 (64%)   | 9 (64%)   | 5 (36%)   |
| Reading                | 0                 | N/A  | N/A       | N/A       | N/A       | N/A   | N/A   |
| Redcar and Cleveland   | 21                | 4 (19%)  | 4 (19%)   | 4 (19%)   | 4 (19%)   | 4 (19%)   | 4 (19%)   |
| Southend               | 14                | 3 (21%)  | 3 (21%)   | 3 (21%)   | 3 (21%)   | 3 (21%)   | 3 (21%)   |
| Sunderland             | 0                 | N/A  | N/A       | N/A       | N/A       | N/A   | N/A   |
| Surrey                 | 0                 | N/A  | N/A       | N/A       | N/A       | N/A   | N/A   |
| West Berkshire         | 17                | 17 (100%)  | 17 (100%) | 2 (12%)   | 17 (100%) | 15 (88%)  | 1 (6%)  |
| Westminster            | 2                 | 0 (0%)   | 0 (0%)    | 0 (0%)    | 0 (0%)    | 0 (0%)  | 0 (0%)  |
| Winchester             | 0                 | N/A  | N/A       | N/A       | N/A       | N/A   | N/A   |
| Windsor and Maidenhead | 13                | 13 (100%)  | 13 (100%) | 13 (100%) | 13 (100%) | 13 (100%)   | 11 (85%)  |
| York                   | 37                | 36 (97%)   | 36 (97%)  | 36 (97%)  | 36 (97%)  | 36 (97%)  | 25 (68%)  |

#### 3.2.2 Data quality - strengths

#### Client personal details

Client personal details are now reliably reported for clients by all areas, with many areas reporting on all personal information for 100% of their clients. Sexual orientation, ethnicity and age are slightly less well reported than the other personal characteristics. We understand the under-reporting of ethnicity in some cases to be related to clients not identifying with any of the given categories in the CDF template. We will amend the ethnicity categories from year 3 quarter 3 onwards in light of this.

#### Engagement with support

Data is also provided relatively reliably on **engagement with support**, although there is still room for improvement. Information was provided on the frequency of contact with support and the number of services involved in support during year 3 quarter 2 data for 57% and 60% of relevant clients respectively. 42% of clients have this data for each quarter of their support.

#### Continually improving data quantity and quality

Overall, the quality and quantity of the data returns are improving with each quarter, with more areas returning more frequently the correct data for all relevant clients on a quarterly basis. The level of data cleaning and clarification required is also falling with each quarter.

# 3.2.3 Data quality - areas for improvement, implications for analysis and recommendations

This is the second year of data collection under the CDF and we appreciate that local areas have dedicated significant time and effort to setting up data collection processes and returning data. The improvement in data collection since the end of year 2 is promising, and we will continue to work with local areas to build on the size and robustness of the available dataset, as well as the proportion of clients about whom data is available to the evaluation.

However, there are some key areas for improvement, which are detailed below. We also set out the challenges that these gaps in data pose to delivering a robust assessment of the changes brought about by the MEAM Approach. Finally, we provide recommendations for how data collection can be improved.

In the table below we discuss the data collected at a national level. However, it should be noted that the quality of data provided varies between areas. Some areas may be performing very well in the "key areas for improvement"; some areas may be performing less well in areas that are not mentioned here as requiring improvement. MEAM Approach areas should discuss their progress on data collection with their partnerships manager.

Figure 7: Key areas for improvement

| Data type  | Areas for improvement   | Implications for analysis  | Recommendations   |
|--|---|--|---|
| Service use<br>during, before<br>and after<br>MEAM | Provision of service use data for each client during each quarter of support. For example, we only hold A&E attendance data for all quarters during which they received support for 37% (224) clients. (That figure is 38%, 35%, 40% and 40% for NEL, mental health admissions, arrests and nights in prison respectively). This is also a concern when looking at year 3 quarter 2 data in isolation: we received complete or partial service use data <sup>21</sup> for only 42% (249) of the eligible clients (i.e. clients who received support during year 3 quarter 2 or ended support in the previous four quarters).  Provision of service use data for clients in the four quarters after the end of support. There is very little post-support data provided. We only hold A&E attendance data for all eligible | The low rates of data provision reduce the valid sample size considerably.  A smaller sample size reduces statistical power, i.e. reduces the extent to which we can be confident that any changes in outcomes for clients about whom data is available are representative of the outcomes that would be achieved for another similar group of clients supported by interventions developed using the MEAM Approach. | <ul> <li>Provide quarterly service use data for all clients while they are receiving support as a priority.</li> <li>Develop data sharing procedures with partner organisations so as to increase the proportion of service use data collected from administrative sources. This has several advantages: it reduces burden on coordinators and clients for the data collection, and it enables the collection of quarterly service use data retrospectively. It will also likely improve the rate of</li> </ul> |

<sup>&</sup>lt;sup>21</sup> Complete" data refers to the case where a client has data for all five types of service use during the quarter. "Partial" data is where a client has data provided for some but not all data types during the quarter.

| Data type          | Areas for improvement   | Implications for analysis                                | Recommendations   |
|--------------------|---|--|---|
|                    | quarters post-support for 3% (6) of the 178 clients who have ended support. We only have data on 3% of relevant clients for the other four service types too.  Provision of previous service use data for all clients. This data has only been provided in full for 44% (263) of clients in the dataset. A further 13% have partial data but 43% (260) have no previous service use data.  Provision of administrative data from partner organisations. The majority of the service use data (59%) is self-reported as opposed to being from administrative sources (41%). Areas have been able to provide more administrative data for police interactions (53% for arrests and 52% for prison nights) than for health services (34%, 34% and 32% for A&E attendances, NEL and mental health admissions respectively). |  | collection of previous service use data.  Based on feedback from network areas about the challenges of collecting post-support data, and the low level of provision of this data to date, we will no longer be requesting post-support service use data from network areas. |
| Accommodation data | Provision of data on nights in different types of accommodation   | As with service use data, the gaps in accommodation data | We encourage all areas to:  |

| Data type | Areas for improvement  | Implications for analysis   | Recommendations  |
|-----------|--|---|--|
|           | over the quarter for each client during each quarter of support. This consists of the number of nights clients have spent in different types of accommodation over the quarter as well as clients' accommodation at the end of the quarter. However, we only have data on nights in accommodation (partial or complete) <sup>22</sup> for all quarters of support for 28% (165) clients. When looking at the data for year 3 quarter 2 alone, the picture is not dramatically improved: we only received information on clients' nights in accommodation (complete or partial) for 38% (226) of the eligible clients.  Provision of accommodation data for clients in the four quarters after the end of support. We have post-support accommodation data for all relevant quarters for only 3% (5) of the 178 clients who have ended support. | reduce the valid sample size, which is likely to reduce the extent to which we can be confident that the outcomes for clients about whom data is available are representative of the outcomes that would be achieved for another similar group of clients supported by interventions developed using the MEAM Approach. | <ul> <li>Provide information on all clients for each quarter during which they have received support.</li> <li>Develop data sharing links with partners in order to collect accommodation data from administrative sources rather than self-reported data. As with service use data, this approach has several advantages: it may reduce burden on coordinators and clients for the data collection, and enable the collection of quarterly accommodation data retrospectively.</li> <li>Based on feedback from network areas about the challenges of collecting post-support data, and the low level of provision of this data to date, we will no longer be requesting post-support</li> </ul> |

<sup>&</sup>lt;sup>22</sup> Complete" data refers to when all 92 days of the quarter are accounted for across the range of accommodation types for a client. "Partial" data is when 1 to 91 days of the quarter are accounted for.

| Data type                     | Areas for improvement  | Implications for analysis   | Recommendations  |
|-------------------------------|--|---|--|
|                               | Provision of administrative data from partner organisations. 72% of the accommodation data provided was self-reported as opposed to being administrative data from partner organisations.  |   | accommodation data from network areas.   |
| Homelessness<br>Outcomes Star | Completion of HOS for each client in each quarter of support, including at baseline. Collection of HOS is improving, but there is still considerable room for improvement in the regularity of completion. HOS is the priority outcomes measure for the evaluation, yet only 55% (329) of clients in the dataset have at least one HOS entry, and only 27% (159) have a HOS entry at baseline <sup>23</sup> .  Currently, only 38% of clients (189) who have been supported for two quarters or longer have a second (or subsequent) HOS entry, and only 19% (95) also have a first HOS entry at baseline. Of these, only 70 clients have the second (or | The current sample size is likely to reduce the extent to which we can be confident that the outcomes for clients about whom data is available are representative of the outcomes that would be achieved for a similar group of clients supported by interventions developed using the MEAM Approach.  Where HOS data is not collected on entry and on a quarterly basis thereafter, the HOS figures may not provide a complete and upto-date reflection of clients' outcomes. This reduces the extent to which analysis of | Complete HOS with all clients during each quarter of their support, including a first HOS at baseline (i.e. up to one month before start of support and up to two months after start of support).  We encourage areas that are not currently completing or submitting HOS to:  Start completing and/or submitting HOS data for all |

<sup>&</sup>lt;sup>23</sup> Baseline scores should be completed within the first two months of a client's engagement or up to one month in advance of their engagement

| Data type                                  | Areas for improvement   | Implications for analysis   | Recommendations   |
|--|---|---|---|
|  | subsequent) HOS recorded in their most recent quarter of support.  Increase the number of areas completing HOS. Of the 19 areas for which we have CDF data, eight areas are not currently submitting HOS data. Of these areas, some have started to roll out the use of HOS with clients (but have not provided this information in submissions to date), some plan to start using HOS, and some areas do not plan to use HOS due to local service regulations. | change over time in outcomes is likely to accurately reflect change for a client over the whole period for which they have been supported. This is particularly significant if no HOS is completed on entry or during a client's last quarter of support. | clients on a quarterly basis as soon as possible.   |
| New Direction<br>Team<br>Assessment        | The <b>NDTA data</b> follows a similar pattern to HOS. For example, 58% of clients (347) have at least one NDTA. However, only 45% of clients (270) have an NDTA at baseline, and of these only 81 clients have a second (or subsequent) NDTA recorded in their most recent quarter of support.   | The implications for analysis are the same as reported above for HOS.   | We make the same recommendations to areas as per HOS above. However, given that HOS is the priority outcomes measure, we recommend that local areas prioritise the improvement in the collection and submission of HOS data over the NDTA data. |
| Differences in approaches to collating and | Treatment of returning clients. We understand that some network areas are treating returning clients in different ways. In some areas the returning client  | In the cases where the returning client is not assigned a new CURN, we have an end of support date for these clients and  | We encourage all areas to take the following approach with returning clients:   |

| Data type           | Areas for improvement   | Implications for analysis   | Recommendations  |
|---------------------|---|---|--|
| submitting CDF data | is not assigned a new client unique reference number (CURN). In other areas the client is assigned a new CURN once their case has opened. | therefore they are treated as having ended support. In this report this means that our count of the number of clients receiving support during year 3 quarter 2 will be a slight under-estimate <sup>24</sup> . If unaddressed in future analysis this will mean that service use and accommodation data collected during a client's second round of support will be inadvertently treated as post-support data.  In the cases where the returning client is assigned a new CURN, we are currently unable to identify returning clients unless local areas inform us. These clients would be double-counted in the current dataset. | <ul> <li>Where there has been a significant break in a client's support or a planned decision to end a client's support, a new CURN should be allocated for the returning client.</li> <li>Where clients lose contact with the service, MEAM recommend cases are kept open for some time instead of being closed immediately. However, if cases are closed temporarily as a client is out of contact for a short period and then re-opened once contact is regained, we ask areas to keep the same CURN and remove the case closure entry retrospectively once contact is regained.</li> <li>We will introduce a flagging</li> </ul> |
|                     |   |   | system into the CDF template so  |

<sup>&</sup>lt;sup>24</sup> This nature of the problem means that we do not know how many clients this applies to. However, we currently understand it to apply to at least three clients from three network areas.

| Data type | Areas for improvement  | Implications for analysis  | Recommendations   |
|-----------|--|--|---|
|           |  |  | that returning clients with a new CURN can be flagged as returnees and linked to their previous CURN.   |
|           | Recording of service use and accommodation data when a client starts or ends support mid-way through a quarter. We understand that some areas are only including accommodation and service use data for the portion of the quarter during which the client is receiving support. All quarterly accommodation and service use submissions should cover the whole three months of the quarter. We are working with areas to identify historic data that has been entered incorrectly and to amend this data wherever possible and/or account for this in our analysis. | Recording of data covering only part of a client's first or last quarter of support will provide an artificially low level of service/accommodation use, and therefore will skew our analysis of change in service/accommodation use over time unless corrected and/or adjusted for. | <ul> <li>Submit accommodation and service use data covering the whole three months of the quarter, regardless of start/end date for support.</li> <li>Where this is not possible, areas should inform Cordis Bright.</li> <li>Where an incorrect approach has been taken historically, areas should inform Cordis Bright and agree the best resolution: correction or adjustment of the historical data.</li> </ul> |



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