



Coming together as What Works for Early Intervention & Children's Social Care

# Evaluation of the provision of data via Transform Data View (TDV) to housing officers in Somerset

**April 2023** 

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# **Acknowledgments**

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# About What Works for Early Intervention and Children's Social Care

The evaluation was conducted by the Early Intervention Foundation in 2021–22. What Works for Children's Social Care (WWCSC) and the Early Intervention Foundation (EIF) are merging. The newly merged organisation is operating initially under the working name of What Works for Early Intervention and Children's Social Care (WWEICSC).

To find out more, visit our websites at: https://www.eif.org.uk and https://whatworks-csc.org.uk.

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# **Executive summary**

This report presents findings from a feasibility evaluation conducted by the Early Intervention Foundation (EIF), now merging with What Works for Children's Social Care (WWCSC) and operating under the working name of What Works for Early Intervention and Children's Social Care (WWEICSC). The evaluation explores the provision of a data system (Transform Data View) to housing staff working in Somerset West and Taunton (SWT) and in Sedgemoor.

# Intervention being evaluated

Transform Data View (TDV) has been developed in-house by Somerset County Council (SCC). It draws together information from a wide range of data sources and presents a single view of the individual's and household's vulnerabilities and interactions with professionals.

# **Research questions**

The research questions were:

- 1. Evidence of feasibility: Is TDV operating as intended, and what are the enablers and barriers to the delivery of TDV?
- **2.** Evidence of promise: What are the potential benefits of TDV for families, practitioners and the wider service; and are there any unintended consequences?
- **3.** Evaluation feasibility: What is the most feasible way to assess the implementation and impact of TDV, and which outcomes are critical to measuring impact?

# **Methods**

Adopting a mixed-methods approach, this evaluation involved: analysis of administrative data; analysis of TDV user data; and administration and analysis of a baseline survey of housing staff (to collect information regarding the current practices of the staff and how they expected TDV can be embedded into their practices) and an endline survey (to gain a better understanding on how housing staff were using TDV). In addition, interviews with three housing staff were conducted to understand their usage and perceived outcomes for themselves and the families they are supporting, as well as observations of training and refresher training workshops. Findings from the different data collection methods were triangulated to draw conclusions. The evaluation undertook fewer qualitative interviews than intended due to challenges in recruitment. Response rates to surveys were also low.

# **Key findings**

The evaluation explored evidence of feasibility and evidence of promise, with key findings summarised below. Due to issues with recruiting housing staff members for interviews and low response rates to surveys, the findings are preliminary and may lack generalisability.

### **Evidence of feasibility**

The evaluation provided evidence of how the approach is operating as intended (as specified in the theory of change):

- Fidelity: The evaluation data suggested that the introductory training and refresher training was delivered as planned. Usage data indicated that around half of housing staff members who had received training had used TDV at least once during the evaluation. Housing staff were predominantly using TDV to search for individuals and view the individual's page ('individual view') which contained information about them as intended.
- Adaptation: With regards to how much these users were accessing TDV, the usage data displayed heterogeneity, with the number of sessions per role ranging from one session to eight sessions. The two housing staff in the Sedgemoor team used TDV considerably more than housing staff in the SWT teams.
- Dosage: In total, 51 housing staff members had received training. However, only 21 housing staff from SWT used TDV at least once during the evaluation. Evidence suggested this was due to delays in receiving confirmation of Disclosure and Barring Service (DBS) status and a limited number of cases where use of TDV was appropriate. Usage by housing staff, especially from SWT, was considered low. The 21 SWT staff members who used TDV used it for an average of four times, whereas the two Sedgemoor staff members used TDV an average of 11 times.
- Reach: Usage data indicated that housing staff in a number of different roles had access
  to and were using TDV. These included: case managers for lettings, housing, and debt and
  benefit; housing staff; estates officers; neighbourhood officers; and tenancy sustainment
  officers.
- Quality of training: There was a sense among housing staff that the training was delivered to high quality and provided them with the skills and knowledge to access and use TDV.
- Quality of TDV: There were mixed views about how easy TDV was to use. While some housing staff felt it was easy to use, others mentioned they found it difficult to understand the headings and acronyms used.
- Participant responsiveness: The high-quality introductory and refresher training was
  viewed as being fundamental to the successful implementation of TDV. Both quantitative
  and qualitative analysis indicated that training was generally viewed positively. Before
  using TDV, housing staff appeared to have high initial buy-in and enthusiasm for TDV.
  However, views on TDV were more mixed after housing staff had used TDV. While there
  had been some instances where TDV had been useful, housing staff reported concerns
  about the accuracy of data and frustration with missing data.
- Intervention differentiation: Housing staff agreed that TDV offers a new tool to provide
  housing staff with information about families they are supporting. Prior to TDV, housing
  staff were using a range of tools to gather data on families which they felt were not fit for
  purpose. Housing staff recognised that if TDV worked as intended, it would allow for a
  more efficient method of gathering information about families.

### What are the enablers and barriers to successful delivery of TDV?

A number of core enablers and barriers to the delivery of TDV were identified across different stages of implementation. These included access to high-quality training, initial buy-in and enthusiasm from housing staff members, being able to and knowing how to access TDV, and encouragement by managers to embed TDV in day-to-day practice.

### **Evidence of promise**

While our evaluation was not designed to detect causal impact of using TDV, housing staff perceived a number of benefits for families and practitioners:

- Practitioner outcomes identified by housing staff members centred on housing staff tailoring support to meet family needs, contacting a higher number of professionals, working more efficiently and having better communication with professionals.
- Family outcomes identified by housing staff members included families not needing to tell
  their story to multiple professionals, receiving timely support, and receiving support and
  communication tailored to their needs.

### **Unintended consequences**

Interviewed staff members reflected that there were minimal unintended consequences of TDV. Some of the unintended consequences they perceived families could experience included possible concerns among family members about their data appearing on a database which they did not consent to, and it being more difficult to find properties for 'hard to house' families. Housing staff were concerned TDV could cost them more time in instances of missing or inaccurate data.

### **Conclusion and recommendations**

Evidence gathered from the evaluation suggested that TDV was achieving some of its intended aims. Although housing staff cited many benefits of TDV, usage remained relatively low throughout the evaluation. If Somerset County Council wishes to continue with the delivery and potential roll-out of TDV to other housing teams or services, the evidence from this evaluation points to a number of recommendations that SWT could consider, including:

- Ensuring staff can be given access at or soon after the training session so that they can start using TDV to increase confidence and use from the start
- Ensuring the buy-in of housing team managers so that they ensure their staff have access to and are confident using TDV, and they remind staff to use TDV in their day-to-day practice
- Focusing on the practical aspects of using TDV in the training; providing recordings of the training; giving housing staff guidance which includes examples that make the potential uses and gains of TDV more tangible
- Reducing the number of acronyms used on TDV
- Providing contact details of an administrator who is able to amend inaccurate data on behalf of housing staff.

### **Recommendations for future evaluation**

Part of the evaluation was to assess the feasibility of conducting a future impact study on the approach. While the evaluation has provided some evidence of promise, usage remained relatively low among housing staff. Therefore, we do not currently recommend an impact evaluation be undertaken while usage remains low.

Instead, the evaluation team would recommend that Somerset County Council considers amending the delivery of TDV to increase usage and continues to monitor implementation with the modifications. We suggest doing this in the following ways:

Improving management data collection on the delivery of training

- · Continuing and improving usage data collection
- Collecting in-depth detail on housing staff members' views on use of TDV.

If usage of TDV increases and becomes embedded into housing staff practice, we would recommend Somerset County Council considers investigating the impact of TDV on practitioners as well as children and families through robust quantitative methods. We would suggest measuring key outcomes that are articulated in the theory of change through comprehensive administrative data collection and analysis, and the possible use of validated outcome measures.

# 1. Introduction

# **Project background**

The Supporting Families programme, funded by the Department for Levelling Up, Housing and Communities (DLUHC), aims to help thousands of families across England to get the help they need to address multiple disadvantages through a whole-family approach, delivered by keyworkers, working for local authorities and their partners.<sup>1</sup> A national impact evaluation demonstrateed that the programme has impact on certain outcomes, but local approaches vary substantially with little current understanding of what is effective within early help more broadly.<sup>2</sup> Local areas also face challenges in evaluating their local early help services and therefore struggle to know whether they are delivering effective practice to support families in early help.<sup>3</sup>

WWEICSC, formerly EIF, has been funded by the Supporting Families programme to work with a number of local areas to carry out feasibility and pilot studies on promising approaches to supporting families with multiple disadvantages. These feasibility and pilot studies aimed to:

- Test fidelity to the approach as well as the reach, participant views, and factors affecting implementation (feasibility study element)
- Assess the approach's evidence of promise and readiness for trial (pilot study element).

An initial assessment of the evidence was completed which informed the selection of prioritised topics with potential by DLUHC. One topic was joint whole-family working between early help practitioners, housing providers and homelessness services.

After a joint EIF and DLUHC call-out to local authorities (LAs) and initial scoping, EIF identified one area with a promising approach: Somerset County Council's data access pilot to housing practitioners.

The focus of this feasibility study is therefore to explore the provision of data about families to housing staff members via Transform Data View (TDV). Transform Data View has been developed in-house by Somerset County Council (SCC). It draws together information from a wide range of data sources and presents a single view of the individual's and household's vulnerabilities and interactions with professionals. The provision of data enables professionals to see a snapshot of previous professional involvements, and issues that the family are experiencing or have experienced, along with other information to better join up and tailor support to families. It is hoped that this will improve the support that families receive, leading to better outcomes.

<sup>1</sup> Department for Levelling Up, Housing and Communities. (2021). Supporting families. <a href="https://www.gov.uk/government/collections/supporting-families">https://www.gov.uk/government/collections/supporting-families</a>

<sup>2</sup> Ministry of Housing, Communities & Local Government. (2019). National evaluation of the Troubled Families Programme 2015 to 2020: Findings. https://www.gov.uk/government/publications/national-evaluation-of-the-troubled-families-programme-2015-to-2020-findings

<sup>3</sup> Taylor, S. Drayton, E., & McBride, T. (2019). Evaluating early help: A guide to evaluation of complex local early help systems. Early Intervention Foundation. https://www.eif.org.uk/resource/evaluating-early-help-a-guide-to-evaluation-of-complex-local-early-help-systems

### Local context

This feasibility and pilot evaluation was conducted to understand the feasibility and potential effectiveness of the provision of Transform Data View to housing staff, with the aim of informing the possible roll-out of a larger impact evaluation of Transform Data View involving a wider group of housing staff across more local authorities.

Somerset is a local area that experiences high levels of deprivation and there are a large proportion of children with multiple and often complex needs. Families with multiple needs are often at risk of homelessness. Overall, there appear to be three key factors that dramatically increase the likelihood of families experiencing homelessness: economic instability, housing instability<sup>4,5,6</sup> and domestic abuse/relationship breakdown.<sup>7,8</sup> According to the Children's Commissioner Office, in Somerset there were an estimated:

- 1.4 households per 1,000 households assessed as threatened with homelessness, with Somerset ranking 49th highest percentile out of 100 nationally
- 1.1 per 1,000 households assessed as homeless, with Somerset ranking 34th highest percentile out of 100 nationally.<sup>9</sup>

Housing staff members reflected in the theory of change workshop that often they do not know much about many of the families living in the homes, particularly if they are paying their rent on time and there are no issues of anti-social behaviour (ASB), for example. Information is usually collected on individuals who hold the tenancy agreement, with much less information collected on others living in the household, especially children. Families often do not disclose information which may help housing staff provide support, for example, when there is a new birth or change of tenancy. In some cases this is due to a reluctance to share personal details; in others it is because families are unclear about what information it would be useful to share. Delays in recording changes to family information – for instance, whether a family has moved house – results in housing staff accessing inaccurate data. This lack of a holistic view of the families' issues, complexities and vulnerabilities, was stated as inhibiting housing officers' ability to identify problems. This then means that intervention is provided at a later stage when families may have built up rent arrears or an ASB order for example. Housing staff members felt that information on families' needs was critical to helping them to best support families on an individualised basis.

Housing staff also explained that when they do start working with families, for instance due to rent arrears or ASB, many of these families often have multiple and complex needs such as gambling issues, drug or alcohol misuse, mental health issues, unemployment or job instability. Many of these families will have already worked with professionals (such as social workers, or the police) or may have multiple complex needs but are not being supported by other professionals. However, housing staff explained that they often do not know which other professionals and agencies (eg social worker, school staff, or an early help practitioner) have been previously working with these families. In order to gather this information, housing

<sup>4</sup> Downie, M., Gousy, H., Basran, J., Jacob, R., Rowe, S., Hancock, C., Albanese, F., Pritchard, R., Nightingale, K., & Davies, T. (2018). Everybody in: How to end homelessness in Great Britain. Crisis. https://www.crisis.org.uk/ending-homelessness/homelessness-knowledge-hub/international-plans-to-end-homelessness/everybody-in-how-to-end-homelessness-in-great-britain-2018/

<sup>5</sup> Annor, B., & Oudshoorn, A. (2019): The health challenges of families experiencing homelessness. Housing, Care and Support, 22(2), 93–105. https://doi.org/10.1108/HCS-12-2018-0036

<sup>6</sup> Baptista, I., Benjaminsen, L., Pleace, N., & Busch-Geertsema, V. (2017). Family homelessness in Europe: 7 EOH comparative studies in homeless. European Observatory on Homelessness Comparative Studies.

<sup>7</sup> Baker, C. K., Billhardt, K. A., Warren, J., Rollins, C., & Glass, N. E. (2010). Domestic violence, housing instability, and homelessness: A review of housing policies and program practices for meeting the needs of survivors. *Aggression and Violent Behavior*, 15(6), 430–439. https://doi.org/10.1016/j.avb.2010.07.005

<sup>8</sup> Bimpson, E., Reeve, K., & Parr, S. (2020). Homeless mothers: Key research findings. UK Collaborative Centre for Housing Evidence. https://housingevidence.ac.uk/publications/homeless-mothers-key-research-findings/

<sup>9</sup> Children's Commissioner Office. (n.d.). Local vulnerability profiles. https://www.childrenscommissioner.gov.uk/vulnerable-children/local-vulnerability-profiles/.

staff may ask families, but they reflected that families may not be able to accurately recall which agencies are supporting them. This limited a 'joined-up thinking' approach, which can make the referral process longer, risk duplication, and ultimately prevent individuals and families from getting the help they need in a timely way.

# Intervention being evaluated

In line with best practice, we have used the template for intervention description and replication (TIDieR) checklist to set out the approach being evaluated. Information included in the description below was gathered in an initial scoping phase through interviews with the Supporting Families coordinator in Somerset County Council, a theory of change workshop, and from data provided by Somerset County Council and evidence gathered on identified activities or approaches.

### **Brief**

Housing officer access to data on families via Transform Data View (TDV).

### Why

To provide housing staff with information on family vulnerabilities, past and current assessments and involvement of other agencies so they are in a better position to identify and support families by addressing issues early and having a joined-up working approach with other professionals.

### What

Transform Data View has been developed in-house by Somerset County Council. It draws together information from a wide range of data sources and presents a single view of the individual's and household's vulnerabilities and interactions with professionals. Using the Digital Economies Act 2017 (which provides a framework for sharing personal data for defined purposes across specific parts of the public sector), SCC is able to collate and share a data view for partners.

Data sources include: CAMHS, Capita (Education system), Children's Services data (LCS & EHM) Rio health system), Care works (Youth Crime), Eclipse (Adult Social Care), Young carers, NICHE (Police data), VCSE data, Halo (Substance Misuse data) and Domestic abuse.

Before being granted access, housing staff must first complete training and request access:

- Training: Housing staff attend a one-hour training workshop to introduce them to TDV.
- Request to access TDV: Once they have completed the training, housing staff request
  access to TDV through a weblink, enter their details, their managers details and DBS
  number. Once their manager agreed the permission and verified the DBS details, a request
  is sent for approval.
- Access to TDV: Once approval has been given, housing staff are given access to TDV and begin to use it in their day-to-day practice. The data system provides information on data protection and proportionate use when opened for the first time and on every subsequent log on.
- Refresher training: Housing staff attend an interactive training session during which they
  practise how to use TDV.

<sup>10</sup> BMJ. (2014). Better reporting of interventions: Template for intervention description and replication (TIDieR) checklist and guide. *British Medical Journal*, 348, g1687. https://doi.org/10.1136/bmj.g1687

Once the prerequisites have been met, housing staff can begin to use TDV in their day-to-day work:

• **Use of TDV:** When housing staff use TDV to look up an individual or a family, they will either look at one or multiple tabs. Each tab includes different types of information.

### Who provided

Through the secure Transform Data View platform, approved professionals are able to access information about a child, young person or family that they are supporting on a need-to-know basis. This evaluation focused on the usage of TDV among housing staff members in SWT in the Vacancy, General Tenancy Needs and Intensive Support teams. This includes:

- 10 case management officers who work with tenants who are not in sheltered housing (approximately 4,700 tenancies equalising about 600–700 properties per officer)
- 7 supported housing case managers who work with the approximately 900 sheltered housing tenants (mainly seniors) but with some complex families with intensive housing need
- Vacancy/re-letting officers who find suitable accommodation for tenants.

The evaluation also explored usage among two housing staff members in Sedgemoor.

### How and where

Training and refresher training is delivered online via Microsoft Teams. Housing staff access TDV on their work computers.

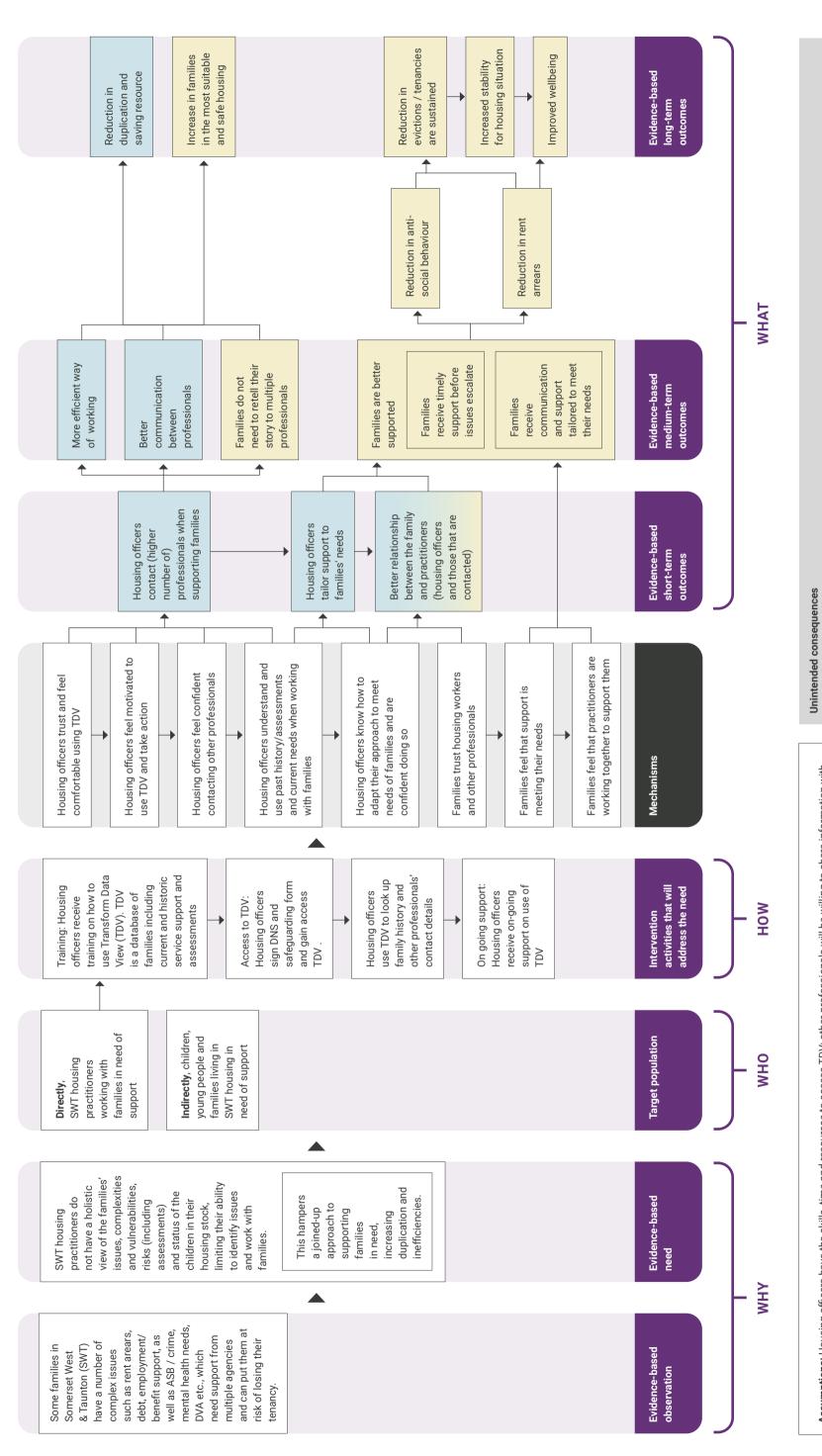
### When and how much

It is expected housing staff would access data about a family if the housing officer is working with the family or is alerted to the fact that the family may have needs not currently being supported (eg from other professionals or data showing rent has stopped being paid).

which was developed as part of the initial phase of the evaluation with Somerset. 17 Below is the high-level theory of change diagram

Practitioner / service level outcomes

vel outcomes Child / family outcomes



Assumptions: Housing officers have the skills, time and resources to access TDV; other professionals will be willing to share information with housing officers; TDV has up-to-date information on families.

Enablers: On-going support to access and use TDV; ease of access (TDV is not password protected). Barriers: Time and resources; reluctance to change way of working.

Easier to demonstrate to courts that sufficient support has been given leading to Increase in evictions

Social housing providers may decide not to house families at most need / vulnerable / with complex issues, or house them in less 'desirable' areas

<sup>11</sup> A more detailed, narrative theory of change was also developed and is available on request.

# 2. Methods

# **Evaluation aims and research questions**

This section sets out the aims and research questions of the feasibility and pilot study in Somerset.

### **Evaluation aims**

The purpose of the evaluation work is to explore the current implementation of TDV among housing staff working in Somerset West and Taunton (part of Somerset County Council) via a feasibility study and the feasibility of conducting impact evaluation on the approach via an initial pilot study.

### **Research questions**

Below is a high-level summary of the research questions that were answered in the evaluation. A full list is available in **Annex C**.

### 1. Evidence of feasibility

- **Fidelity:** Is the training being delivered as intended? Are housing staff members using TDV as intended?
- Adaptation: Are there any differences in the way TDV is being used across housing staff/teams?
- **Dosage:** How many housing staff have received training? How many housing staff are using TDV? How much/often are housing staff using TDV?
- **Reach:** Which housing staff have access to and are using TDV?
- **Quality:** Are the training/refresher training sessions being delivered to high quality? Is TDV fit for purpose?
- Participant responsiveness: How do housing staff feel about training and TDV? Is there anything that can be improved?
- Intervention differentiation: What is the value added of TDV and how does it differ to business as usual?
- Enablers and barriers: What are the enablers and barriers to successful delivery of TDV?

### 2. Evidence of promise

- **Potential benefits:** What are the potential benefits of the TDV for families, housing staff and the wider service?
- **Unintended consequences:** What are the actual or potential unintended consequences for families, housing staff and the wider service?

### 3. Evaluation feasibility

- What is the most feasible approach to assess the implementation and impact of TDV?
- Which outcomes are critical to measuring impact and how?

# Research design

The research design employed both quantitative and qualitative methods to address the feasibility and pilot study research questions above.

### **Quantitative research**

### **User data**

User data gathered from TDV provided insights into the number of housing staff accessing TDV, the time and date of each session, and the actions taken. The data team in SCC developed a report on PowerBI software to summarise the usage data. The data was anonymised and shared securely with the research team. The user data included 21 housing staff members from SWT and two from Sedgemoor. Although Sedgemoor was not the focus of the pilot evaluation, their usage data was included to explore differences between SWT and Sedgemoor as housing staff in Sedgemoor appear to have higher usage.

### Administrative data

We analysed administrative data collected by SCC as part of the pilot. This included training and refresher training attendance and number of requests for TDV.

### Survey with housing staff

A survey was administered to SWT housing staff at the beginning (baseline) and end (endline) of the evaluation. The baseline and endline survey was not administered to the Sedgemoor staff as the decision to include their data was made towards the end of the evaluation after the surveys had been administered.

The baseline survey collected information regarding the current practices of the staff and how they expected TDV could be embedded into their practices. The baseline survey was administered in December 2021 after SWT housing staff received in-house training on how to use TDV. The survey was administered to 43 SWT housing staff members and 13 responded to the baseline survey.

The endline survey was designed to gain a better understanding on how housing staff were using TDV and, where there had been limited usage, understanding their rationale behind not using the database. The survey was administered in August 2022. The survey was administered to 45 SWT housing staff members and 8 responded to the endline survey.

Both surveys were administered online via Microsoft Forms, taking approximately 10 minutes to complete.

### **Qualitative research**

### Theory of change workshop

Information collected from a theory of change workshop held at the beginning of the evaluation in December 2021 was also used to inform the evaluation. The workshop was held in person in December 2021 and was attended by 14 participants including strategic and operational representation: Supporting Families Co-ordinator, Transformation Information Manager, Case Managers in Sheltered Housing, Benefit and Debt Case Manager, Housing Landlord Specialist, Lettings Manager and Rent Arrears Officer. Workshop participants were identified by the evaluation lead in Somerset and invited to take part. The workshop involved several facilitated group sessions centred on developing a theory of change for the 'proof of concept' pilot. In discussions, attendees were asked their views on the purpose of approach, who it is for, as well as the outcomes they believe it achieves. They also considered how its core activities achieve outcomes and what the perceived enablers, barriers and unintended consequences of the approach are.

### **Observations of Transform Data View training**

EIF evaluators observed TDV training for housing staff in December 2021 and a refresher training session in February 2022. The purpose of these observations was to better understand delivery logistics, training content and participant responsiveness and engagement.

### Interviews with housing staff

Interviews were conducted online on Microsoft Teams between June and September 2022 with three housing staff members in total. Housing officers were invited to take part in interviews by an email from the evaluation team. Emails were sent to housing officers who had the highest usage of TDV. Background information about the participants is shown in Table 2.1. The aim of the interviews was to understand early implementation, including views of the training, TDV, and challenges and enablers for implementation, and to collect insights about the potential benefits for families and practitioners alike. The first two interviews were conducted with housing staff from SWT. The third interview was conducted with a member of housing staff from Homes in Sedgemoor. The decision was made to include this housing staff member in the sample because they had been identified as having high usage of TDV in comparison to housing staff from SWT. The evaluation team felt it would be important to capture the views of a housing staff member who had used TDV multiple times.

**TABLE 2.1.** Participant background information

| Participant             | Team      | Length of time | TDV usage to date  |                        |  |
|-------------------------|-----------|----------------|--------------------|------------------------|--|
|                         |           | in role        | Number of sessions | Total actions<br>taken |  |
| Housing staff member_01 | SWT       | 9 months       | 2                  | 20                     |  |
| Housing staff member_02 | SWT       | 10 months      | 8                  | 52                     |  |
| Housing staff member_03 | Sedgemoor | 25 years       | 7                  | 136                    |  |

# **Analysis**

### **Quantitative data**

Descriptive statistics were used to analyse both the user data and survey data.

### **Qualitative data**

All interviews were recorded and transcribed using Microsoft Teams. Data from interviews were analysed using inductive and deductive approaches to thematic analysis. This involved identifying key themes of interest based on the research questions and drawing out any unanticipated themes that emerged from the data.

# **Study limitations**

There are a number of limitations to the study which affect the quality of the evaluation data.

The number of participants involved in the pilot study was small and the number of active users and frequency of use of TDV was lower than expected among the SWT team. Therefore, caution should be taken with generalising findings from this evaluation.

We undertook fewer qualitative interviews with SWT housing staff than intended due to challenges in recruitment. The evaluation had originally planned to recruit 8–10 housing staff members and the final sample included three housing staff members. Housing staff either did not respond to invitations to take part or cited they were too busy. The response rate to the endline survey was very low despite respondents being given a four-week response window and reminders to complete the survey. It is possible there was self-selection bias among the housing staff who opted in to evaluation activities, either having strong positive or negative views about TDV that they wanted to share with the research team. Findings reported here from both interview and survey data do not necessarily represent the views of all housing staff involved in the pilot. To help address this limitation, we have incorporated findings from the theory of change workshop into the report. The workshop was attended by fourteen participants and is likely to be more representative of the views of housing staff in the pilot. We also interviewed a housing staff member from Homes in Sedgemoor as they had been identified as using TDV a high number of times in comparison to housing staff from SWT.

Due to the local area undergoing changes in the data system during the pilot, we were unable to obtain administrative data to explore child and family outcomes.

The pilot took place over a relatively short timeframe, with housing staff having access to TDV for approximately six months before the evaluation concluded. This means that we were unable to reliably determine how rates of usage, perceived impact and practitioner and family outcomes may have changed over time. Those we spoke to mentioned using TDV for a small number of cases for specific reasons. Those with low uptake may have had higher usage if they encountered scenarios for which it would have been appropriate to use TDV.

### **Ethics**

The evaluation followed EIF's ethical guidelines which were set out in the evaluation protocol. To ensure all participants were able to give informed consent we provided participants with a clear and accessible information sheet (see Annex D). To gather consent for taking part, we issued participants with a consent form which included explicit statements about what taking part involves and how data collected would be used, with tick boxes to allow participants to consent to each statement and, where appropriate, to decide not to take part in certain aspects of the study (see Annex E). Care was taken to ensure participants understood that they did not have to participate in research activities and could withdraw at any time. To reduce research burden, we ensured that qualitative interviews and surveys were kept short and easy to complete for participants. To ensure inclusion in research, we selected appropriate methodology to ensure no group was unreasonably excluded from the research. When conducting the research, we were aware of and sensitive to cultural, religious, gender, health, and other issues in the research population, always acting in a non-discriminatory way.

# **Data protection**

EIF complies with the General Data Protection Regulation (GDPR) when handling and storing data. The legal basis for data sharing for this evaluation is 'legitimate interest' and 'informed consent'. Participants received a link to EIF's Privacy Policy available on the EIF website which provides further information on how we collect data, what their rights are as research participants and how they can withdraw their data if they wish.

This report and other publications arising from this research will not identify any individual practitioner, family or child. SCC shared administrative data on the use of TDV. The service removed any identifying information from the data so that names and other identifying information not necessary for the evaluation were removed or replaced with a code. Therefore, all data was pseudonymised or fully anonymised.

# 3. Findings

This section provides findings of the evaluation. It assesses the implementation and delivery of the TDV support offer to housing staff and sets out a number of identified enablers and barriers to delivery of TDV. It also assesses evidence gathered on the impact of TDV for practitioners, families and the wider system.

# **Evidence of feasibility**

The following section aims to explore how TDV was implemented, including whether it was implemented as planned, whether there are differences in the way TDV was used across housing staff members and teams and how many housing staff members received training and accessed TDV.

### Training and refresher training

The **introductory training session** involved one session lasting for one hour. A series of five introductory training sessions were delivered between November 2021 and April 2022. The training session was delivered virtually over Microsoft Teams by the Supporting Families Coordinator and a Housing Advisor. On average, each session was attended by eight housing staff. The training covered the background to the Supporting Families policy, EIF's role in evaluation, introduction to why data is important, why TDV was built, what data was included, how to use TDV and the process for requesting access. At the end of the session, attendees were given time to ask questions.

The introductory training was well attended by housing staff members. In total, 51 housing staff members from across SWT and two housing staff from Homes in Sedgemoor received introductory training. Two out of eight respondents from SWT to the endline survey indicated that they had not attended training because they had either not been offered the training or had prior arrangements.

Once housing staff had completed the introductory training, they requested access to TDV through a weblink, and entered their own and their manager's details and their DBS number. Their manager then verified their details and a request was sent for approval. It was reported by SCC in regular meetings with the research team that some housing staff however did not have or know their DBS numbers which caused delays in them requesting access.

After attending the introductory training and receiving approval to access TDV, housing staff attended an optional **refresher training session** lasting for 45 minutes. The refresher training was also delivered virtually over Microsoft Teams by the Supporting Families Co-ordinator. A series of three sessions were delivered between April 2022 and September 2022. On average, each session was attended by three housing staff and in total, 10 housing staff received the refresher training. The refresher training was more of an interactive training session than the initial training, whereby housing staff practised how to use TDV. For instance, in the training session that we observed, one of the housing staff noted that they were having difficulties in finding the correct information and the facilitator demonstrated how to use TDV for a specific case.

Our analysis indicates that both the initial training and refresher training was delivered as intended. During the observed training and refresher sessions, housing staff demonstrated

mixed levels of engagement, with differences in the extent to which attendees contributed to discussions and asked questions. Interview data suggested that all interviewees were happy with how training was conducted, and felt the online format worked well. Housing staff who were interviewed did not have any suggestions on how training could be improved.

### Use of TDV by housing staff in their day-to-day practice

### Frequency of use

According to usage data, 21 out of 45 housing staff in SWT used TDV at least once during the evaluation (between 10 February 2022\* to 23 September 2022). Active users of TDV from SWT included housing staff from a range of housing services including Homelessness and Rough Sleeping, Tenancy and Debt and Benefit. The breakdown of the roles of these users can be seen in Table 3.1.

In the SWT team, there were 84 sessions<sup>†</sup> in total across the 21 active users, with housing staff using TDV an average of four times. With regards to how frequent these users are accessing TDV, the usage data demonstrates strong heterogeneity, with the number of average sessions per role ranging from one session to eight sessions.

In the Sedgemoor team, the two who had access used TDV at least once during the evaluation.<sup>‡</sup> Users were split between the roles of Housing Officer (n=1) and Neighbourhood Officer (n=1). Across both individuals, there were 22 active sessions in total. The housing officer used TDV seven times while the neighbourhood officer used it 15 times, higher than the average usage for the SWT team.

**TABLE 3.1.**Number of housing staff and average number of sessions per role (SWT and Sedgemoor)

| Role                          | Number of housing<br>staff using TDV per<br>role | Total number of<br>sessions per role | Average number of sessions per role |
|-------------------------------|--|--------------------------------------|-------------------------------------|
| SWT                           |  |                                      |                                     |
| Admin Case Manager/Lettings   | 1  | 1                                    | 1                                   |
| Case Manager Housing Options  | 1  | 4                                    | 4                                   |
| Case Manager                  | 3  | 8                                    | 2.6                                 |
| Debt and Benefit Case Manager | 1  | 2                                    | 2                                   |
| Estates Officer               | 1  | 8                                    | 8                                   |
| Front Line Worker             | 1  | 1                                    | 1                                   |
| Housing Officer               | 10   | 54                                   | 5.4                                 |
| Rough Sleep Navigator         | 1  | 1                                    | 1                                   |
| Tenancy Sustainment Officer   | 2  | 5                                    | 2.5                                 |
| Total                         | 21   | 84                                   | 4                                   |

Table continued on next page >

<sup>\*</sup> This is the first date that a member of the housing staff from SWT used TDV.

<sup>†</sup> A session equates to the use of TDV by a single user on a single day. A user may take multiple actions at multiple points during a day, but this would only account for one session.

For the Sedgemoor team, TDV was first used on 6 April 2022.

### < Table continued from previous page

| Role                  | Number of housing<br>staff using TDV per<br>role | Total number of<br>sessions per role | Average number of sessions per role |
|-----------------------|--|--------------------------------------|-------------------------------------|
| Sedgemoor             |  |                                      |                                     |
| Housing Officer       | 1  | 7                                    | 7                                   |
| Neighbourhood Officer | 1  | 15                                   | 15                                  |
| Total                 | 2  | 22                                   | 11                                  |

When looking at the user data according to monthly use, the number of TDV users generally fluctuated month-to-month across both teams (Figure 3.1, and Table A.1 in Appendix A). Among SWT users, the number of active users per month ranged from five in April and July to nine in August. The number of actions also fluctuated month-to-month by SWT and Homes in Sedgemoor teams (Figure 3.2).

FIGURE 3.1. TOTAL NUMBER OF USERS ACROSS TIME

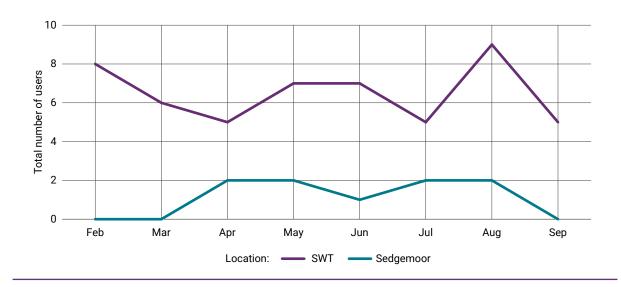


FIGURE 3.2. TOTAL NUMBER OF SESSIONS ACROSS TIME



### Actions taken on TDV

The usage data provides insight into the number of actions that were taken by users. Across the two teams 587 actions (SWT: 336 and Sedgemoor: 251) were undertaken (see Table 3.2 below, and **Annex G: TDV actions**). There were again differences across teams in the average number of actions, with a range of 1 to 52 in the SWT team. The number of actions was considerably higher in the Sedgemoor team, ranging from 115 to 136 actions among the two users.

**TABLE 3.2.**Total number of actions undertaken split across role

| Role                                | Total no. of actions | Average no. of actions per role |
|-------------------------------------|----------------------|---------------------------------|
| SWT                                 |                      |                                 |
| Admin Case Manager/Lettings (n=1)   | 1                    | 1.0                             |
| Case Manager Housing Options (n=1)  | 14                   | 14.0                            |
| Case Manager (n=3)                  | 41                   | 13.7                            |
| Debt and Benefit Case Manager (n=1) | 17                   | 17.0                            |
| Estates Officer (n=1)               | 52                   | 52.0                            |
| Front Line Worker (n=1)             | 1                    | 1.0                             |
| Housing Officer (n=10)              | 196                  | 19.6                            |
| Rough Sleep Navigator (n = 1)       | 1                    | 1.0                             |
| Tenancy Sustainment Officer (n=2)   | 13                   | 6.5                             |
| SWT Total                           | 336                  | 16                              |
|                                     |                      |                                 |
| Sedgemoor                           |                      |                                 |
| Housing Officer (n=1)               | 136                  | 136                             |
| Neighbourhood Officer (n=1)         | 115                  | 115                             |
| Sedgemoor Total                     | 251                  | 125.5                           |
| SWT and Sedgemoor Total             | 587                  | 25.5                            |

Usage data provides some indication of what housing staff used TDV for (Figure 3.3, and Tables B.1 and B.2 in Appendix B). Throughout the evaluation, the most common action taken by housing staff in both SWT and Sedgemoor was to search for individuals and view the individual's page ('individual view'). This page contains information about them (such as vulnerabilities, past involvement with services, etc). Between 10 February and 23 September 2022, housing staff from SWT searched individuals and viewed their pages on 150 occasions, accounting for 44.6% of the total actions undertaken on TDV by SWT users. Housing staff from Homes in Sedgemoor searched individuals a total of 132 times, accounting for 52.6% of the total actions undertaken by users from this team. This suggests that housing staff from both teams used TDV to seek out further information on an individual once they have been searched. Unfortunately, data is not collected on what professionals are clicking on while looking at an individual's page so there is currently no measure of which pieces of information within an individual's page were most useful.

The second most frequent action was viewing the family view screen, which was undertaken 100 times by SWT users and 102 times by Sedgemoor users, accounting for 29.8% and 40.6% of total actions respectively. This involves selecting the family records which are linked to the individual that has been searched. Seeing the 'data protection message' and viewing 'the address search' (n=31, 5.3%) were the two most infrequent actions undertaken.

TDV user data showed an average of 5.5 actions per session. Figure 3.3 presents a visual breakdown of the number of actions undertaken over time and across teams. For a breakdown of actions across the differing teams, please see Appendix B.

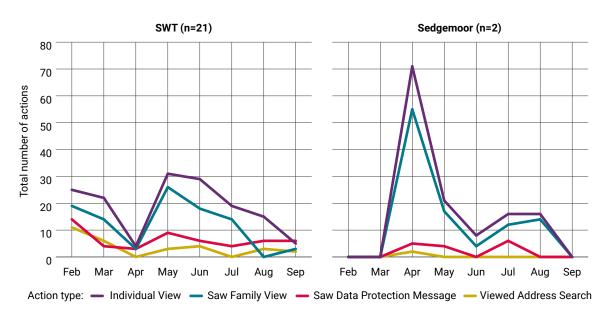


FIGURE 3.3. TOTAL NUMBER OF ACTIONS SPLIT ACROSS ACTION TYPE

Interviews with housing staff indicated that TDV was not being utilised in a consistent manner, supporting the quantitative findings above. However, case study 1 does show examples of how TDV has been used to facilitate the work of a Housing Estate Officer. In the first example within this case study, TDV was used to identify potential contacts working with an individual/family, while in the second, it was used to gauge the trustworthiness of an individual. It is promising to see housing staff use TDV in novel ways, not first hypothesised by the team at Somerset or EIF. For those in the rent arrears team, using TDV appears to be a 'last resort', as they used it for families who were not engaging prior to referring them to court.



### A housing officer's use of TDV

A housing officer explained during an interview that they had used TDV to identify the name of the social worker assigned to a family and look up their email address. The housing officer then contacted the social worker with their concerns and queries.

In another instance, the housing officer was working with a housebound individual who was possibly being exploited by persons of a criminal background. This particular individual was not listed on TDV, suggesting that they had 'fallen through the system'. However, their named associate was on the system but did not include any information on their history or professional contacts. However, it was reassuring to the housing officer that the name the individual gave the housing officer was on the system and allowed the worker to gauge the trustworthiness of the individual.

### Self-reported usage

Self-reported usage was explored in the endline survey that was administered to housing staff in SWT. Results showed that only three of the eight housing staff members who responded had used TDV in their practice, despite six of them saying they understood how to access TDV. The reasons given for using TDV were: to establish if a social worker was already involved; to gain access to accurate data about a family; or because the housing officer's manager had recommended it to them. Reasons given for not using TDV included: not having access; being able to access required information on a system they were already using; and not working with vulnerable children. Further insight into low usage was gathered from interviews, during which some housing staff explained that they had forgotten how to access TDV or had only worked on a small number of cases where TDV would have been useful. Qualitative data also indicated low usage among housing staff who had used TDV, with them noting that they have only used TDV in a limited capacity and noted that they used it on a 'case-by-case' basis.

There was evidence from the endline survey that housing staff were still using other sources to gather information about the individuals or families they were supporting. Other modes of information gathering included using the Housing Case Management System (6 out of 8 respondents) and contacting professionals either through email (7 out of 8) or phone (3 out of 8).

### Intervention differentiation

Prior to having access to TDV, the baseline survey indicated that housing staff were using a plethora of tools and data management systems to obtain information about an individual or family currently being supported. This included a Housing Case Management System (n=10); Homefinder Somerset (n=9) and contacting other professionals via phone (n=12) or email (n=13), suggesting there was a need for a unified system to access information on families which housing staff worked with.

The majority of housing staff (10 out of 13, 76.9%) who completed the baseline survey felt they did not have all the information they needed to effectively support the individuals and families they worked with. In the theory of change workshop, housing staff members noted that other agencies use a number of different data systems, which means they have to gather data from different sources in order to build up a comprehensive view about a family. They also noted that some professionals are reluctant to share data with other professionals who are not in their organisation. A further challenge was related to individual practitioners holding on to information about families without recording it, meaning that insights about families can be lost if those practitioners leave the profession.

Officers reported that they required further information on a broad range of factors, but most pertinently 'vulnerabilities (eg domestic abuse, crime, substance misuse)' (13 out of 13, 100%); 'other professional's involvement; either historic or present '(12 out of 13, 92.3%); and 'details about other significant adults within the household' (11 out of 13; 84.6%). In the theory of change workshop, participants felt that there was a demand for a data system that provided them with comprehensive data about the individuals and families they are supporting.

# **Enablers and barriers affecting delivery of TDV**

The following enablers and barriers to delivery were identified by housing staff during the baseline and endline surveys, interviews, and the theory of change workshop. Enablers and barriers are organised according to the sequence of intervention activities, beginning with training through to sustained use in day-to-day practice by housing staff.

### Access to high-quality training

The high-quality introductory and refresher training was viewed as being fundamental to the successful implementation of TDV. Both quantitative and qualitative analysis indicated that the training was generally viewed positively. During interviews, housing staff reported that the training was suitable, well-paced, and allowed them to adequately use TDV and address any concerns they had (such as data protection issues). However, in one interview a housing officer did reflect that the training included too much content on the history of TDV creation and future training would benefit from having a greater focus on why and how TDV should be used.

After the training, all respondents reported in the baseline survey (n=13, 100%) that they understood how to request access to TDV. Almost all of those that did respond either strongly agreed (n=3, 23.1%) or agreed (n=9, 69.2%) that the training gave them the information/knowledge required to use TDV. Only one respondent disagreed. In addition, the majority of respondents (n=9, 69.2%) felt confident using TDV after they had been provided with the initial training.

Responses to the endline survey administered in August 2022 found that of those who responded to the survey (n=8)) five respondents agreed (n=1, 12.5% strongly agreeing; n=4, 50% agreeing) that the training was helpful in providing the information/knowledge needed to use TDV. Although this indicates that the training provided sufficient information for accessing and using TDV, there was a sense from interviewed housing staff that in the time since training they had become less confident in knowing how to access and use TDV. This was echoed in the endline survey data which highlighted that the length of time which has passed since the training left one respondent feeling 'rusty' on using TDV.

### Initial buy-in and enthusiasm for TDV

After the training and before using TDV, housing staff appeared to have high initial buy-in and enthusiasm for TDV. In the baseline survey, housing staff identified a number of benefits. This included:

- Identifying vulnerabilities of adults (eg debt, antisocial behaviour, domestic abuse) (12 out of 13 respondents, equalling 92.3%)
- Access to data on other practitioner current/historic involvements (12 out of 13, 92.3%)
- Access to data on Lead Professionals email address (12 out of 13, 92.3%).

In the theory of change workshop, housing staff appeared engaged with TDV and spoke at length on the perceived benefits TDV could bring to their work. During interviews, housing staff expressed enthusiasm for TDV; however, this reduced over time due to a lack of management buy-in, among other factors which are discussed below.

### Being able to request access

In order to access TDV, individuals are required to provide details of their DBS certificates to confirm their suitability for having access to data about children or vulnerable adults. This is a requirement of the robust information governance that enables this matching and sharing

using the Digital Economy Act 2017. Housing staff faced delays in receiving confirmation of DBS status which meant they were unable to access TDV immediately after training. Individuals spoke of their frustration that this process seemed prolonged and was delayed due to higher management bureaucracy. The length of time between receiving training and requesting access appeared to decrease the initial enthusiasm that was noted by housing staff. To overcome such issues, the training format was subsequently altered so that housing staff request access during the training. They are asked to come to the training with their DBS number and manager's email address which they can enter at the end of the session.

### **Knowing how to access TDV**

There were mixed views about the ease of access. One housing officer interviewed felt that TDV was easy to access as it was only a 'click away'. They had used strategies to make access easier which included adding a link to the browser ribbon. However, a contrasting view from interviews was that it was difficult to remember how to access TDV and login details. Those who held this view said that they would have found it useful to receive reminders about how to access TDV.

### Management buy-in

The buy-in from senior management was perceived to be an important factor for encouraging housing staff to use TDV in their day-to-day practice. However, qualitative data indicated mixed views about the extent to which higher management promoted TDV. One officer noted that there had been 'buy-in' by their colleagues and managers, and provided an example where their manager suggested that it would be useful to use TDV when discussing a case. This reminded the officer to use TDV and helped them see why it would be useful to use in this particular case. On the other hand, two housing staff stated that TDV had not been endorsed or advertised by senior management.

It was noted that TDV could become a habit of use if it was better advertised. For example, if housing staff were introduced to TDV in their first week starting the job or if they received reminders about TDV through corporate newsletters/emails. It was felt these reminders would be particularly welcome when workloads are higher, and after some time had passed since training.

### Ease of use

There were mixed views about how easy TDV was to use. One interviewed housing officer noted no issues with TDV usability and felt that it was easy to navigate. Other housing staff, however, noted in both the interview and survey that they found it difficult to understand the headings and acronyms used. Endline survey data indicated that further training may be required to remind housing staff how to use TDV, with half of respondents (4 out of 8, 50.0%) noting that extra training would support them to be more confident in using TDV.

### Time and capacity to use TDV

Neither the qualitative or quantitative data indicated that housing officer felt capacity issues were a barrier to using TDV, and contrarily, felt that if the software works as intended, it will allow for a more efficient and fluent workflow. An interview participant did note however, that some professionals may be reluctant to take the time to learn TDV if they have not used it before or did not undertake training. It is important to note that the general lack of usage in TDV does not appear to be due to a lack of engagement or capacity; but rather due to administrative reasons (such as delaying of DBS checks) or the fact that they only had a small number of cases whereby TDV would be useful.

### Inaccurate or missing data

The lack of data accuracy was seen as a negative aspect of TDV. In one instance, a housing officer found an address which was eight years out of date, noting that this misinformation could result in consequences for both practitioner and family (such as the inability for families to receive timely help and intervention). This housing officer noted in the interview their frustration that they were unable to change the data themselves and did not know who to contact in order to change the data. Another housing officer noted the following, again reiterating the view that a process needs to be in place where data is routinely quality-checked.

'It should really be reviewed or way to find it, to be reviewed at least every six to 12 months because social housing is also an environment of fast change where you know tenants can start today and before 3 months sign they're evicted or they formed a partnership and they've moved into another place or you know ... it's fast paced.' Housing Officer 1

Alongside inaccurate data, housing staff reported there was missing data, and this served as another point of frustration. While TDV, in theory, should provide 'deep-dives' on the families included, housing staff reported that there remains gaps in the information available. One housing officer provided an example where an individual was listed as having a criminal record, but it was unknown what the criminal record was for.

Housing staff also noted in interviews that they would like to see greater cross-agency data, giving examples such as GP records, mental health services, police records and early assessment reports.



### A lack of response from other professionals

An income officer for Homes in Sedgemoor identified a point of contact for two different families. Both these families were at court referral level, and the next step with the rent arrear process was recovering cost through court action. TDV did not state the profession of the contact (eg social worker; mental health worker) but they were not a member of the housing staff in general. In each instance, the income officer sent an email to the contact, highlighting the importance of the need for a response but did not receive a response either time. The officer reported feeling frustrated and let down by the wider system (importantly, not TDV itself) as ultimately the lack of a response could mean a family is evicted. The income officer mentioned that they see the value of contact details being on TDV but questioned its usefulness if the contact does not reply.

As a caveat, in both instances, it appeared the professional was no longer actively working with the family. It is unknown if contacts would be more willing to reply if they were actively working with the families. Moreover, it brings into the question the accuracy of the data on TDV, and how to up-to-date the data available on it is.

Source: Income officer interviews.

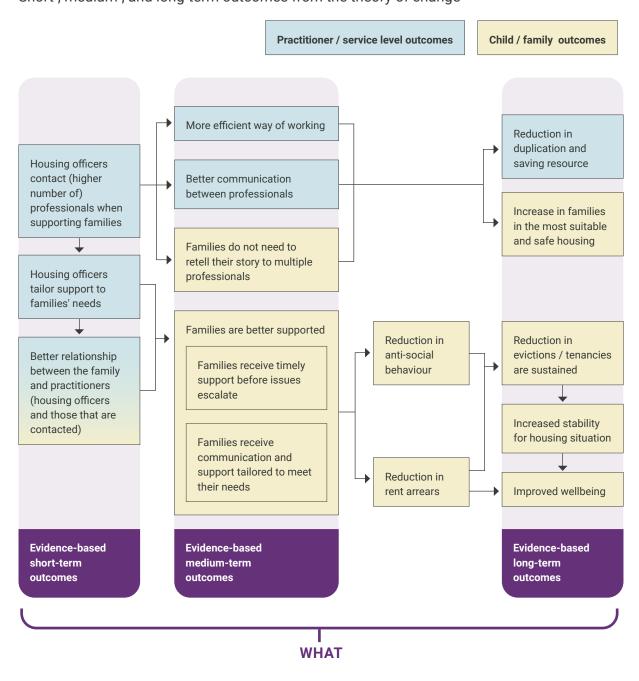
### Lack of response from other professionals

Interviews indicated a frustration by housing staff at the lack of wider engagement from professionals outside of housing staff. While the intention to use TDV to contact other professionals working with families is strong, it was felt that progress on a case can stop when housing staff fail to receive a reply from the professionals contacted. In particular, rent arrear staff were particularly discouraged by this lack of engagement as ultimately lack of contact could lead to a family becoming evicted, as elaborated in case study 2.

# Impact of TDV

This section reports on the perceived impact of TDV based on the outcomes identified in the theory of change (Figure 3.4) developed before the evaluation's fieldwork. This evaluation was not able to measure the causal impact of the offer as it obtained no evidence on the impact. Instead, this section draws on data on the perceived impact from the baseline and endline surveys, and qualitative interviews with housing staff. This section looks firstly at outcomes for practitioners and the wider service and then for families. The outcomes are organised according to the theory of change, with short-term and medium-term outcomes; however, the evaluation did not explicitly test this sequencing. We did not find evidence of long-term outcomes due to the relatively short length of the pilot so these outcomes are not discussed below.

**FIGURE 3.4.**Short-, medium-, and long-term outcomes from the theory of change



### Outcomes for housing staff and the wider service

Housing staff reflected on the benefits of TDV during the interviews and the endline survey. Overall, there was general consensus that TDV could make a difference to housing staff, although there were differing views on the extent and nature of the outcomes. This is partly because usage among housing staff has remained low, providing few opportunities for housing staff to directly experience the benefits of using TDV.

### Short-term outcome: Housing staff tailor support to families' needs

As set out in the theory of change, a key expected outcome was housing staff being able to tailor support to families' needs as it has the potential to provide housing staff with the 'full-picture' of the families they are working with. From interviews, it was felt that TDV could be used to inform how to approach a family or individual and how to shape the intervention given according to the needs of the family. For example, one interviewee noted:

'You wouldn't go all gung ho. So somebody who has a personality disorder, somebody who has had a traumatic past. You don't then go and say you don't clean your house. I will. You know, you can't do that. You then go around the other way and say, you know, we're here to help. Tell me about this.'

**Housing Officer 1** 

Similarly, housing staff felt that TDV could be used to judge whether a property is safe to visit and the actions required in order to ensure the officer's safety. Further examples include assessing whether a safeguarding approach is needed or whether a particular action is required to best support the family. However, no housing staff reported that TDV had resulted in them being better able to support families' needs, which could perhaps be attributed to low usage during the pilot evaluation.

# Short-term outcome: Housing staff contact (higher number) of professionals when working with families

Some interviewee respondents spoke about how, by using TDV, they were quickly able to identify other professionals working with families and access their communication channels (eg email/phone). However, as shown in case study 2, some were frustrated by the lack of response from other professionals in instances where they had contacted them by using their contact details from TDV.

Housing staff also reflected in the endline survey that TDV had helped them within their role as a housing officer because it has allowed them to see which other professionals are working with families.

### Medium-term outcome: Better communication with professionals

During interviews, housing staff recalled several instances where they had been able to look up the contact details of professionals who had previously been or were currently supporting families to flag concerns or find out extra information. TDV made it quicker and easier for housing staff to retrieve the contact details; however, due to low usage, housing staff did not have a sense of whether having access to TDV would improve communication between themselves and other professionals longer term.

# Medium-term outcome: More efficient way of working and reduction in duplication and saving resource

The results of the evaluation suggest that TDV may result in a more efficient way of working. Analysis of qualitative data indicated that TDV has made the process of searching for professional contact details quicker and easier for housing staff. As TDV provides information about families all in one place, there was also a view that having access to TDV improved efficiency for finding out background information about families. Improved efficiency was thought to reduce the levels of stress and frustration that housing staff may

face when they are unable to access information about families. However, housing staff noted that TDV would only increase their efficiency if the data was accurate and complete. There was concern that in instances where data is incorrect, housing staff may waste their time, for instance visiting addresses where the family no longer lives or contacting professionals who are no longer working in their roles.

### Other practitioner outcomes

The study was unable to collect evidence on whether TDV resulted in a better relationship between the family and housing staff and other professionals that are contacted. Recommendations on how to capture evidence on these outcomes are explored in the Recommendations for future evaluation section at the end of this report (see chapter 4).

### Outcomes for families (parents and children/young people)

Interviews indicated that housing staff perceived a wide range of benefits for families after they had begun using TDV. It should be noted that, at time of interview, housing staff did not have examples of where TDV had directly benefited families because they had not been using TDV for long enough. As such, the benefits discussed below have been hypothesised by the interviewed housing staff members.

### Medium-term outcome: Families do not need to retell their story to multiple professionals

Housing staff noted that by having access to a single system, previous actions undertaken with a family can be acknowledged. This will mean that housing staff will no longer have to contact other professionals for information on families, nor will they need to ask families the same questions asked by other professionals. This lack of reduplication can minimise family frustration with the service and ensure housing staff can have more efficient workflows, offering timely support to families in need. There were concerns in the theory of change workshop that when families become frustrated with housing staff, they can drop their level of engagement with the officers, minimising the effectiveness of intervention.

### Medium-term outcome: Families receive timely support before issues escalate

With access to a unified and comprehensive data system, housing staff felt that they would be able to offer quicker, and earlier, intervention because issues can be more easily flagged.

By receiving alerts/information at an earlier point in time, housing staff have more time to get to the 'root' of the potential issue. In the interviews, housing staff spoke of a 'snowballing effect' noting:

'because of issues from the past, they can't manage their money and because they can't manage their money, they don't pay their rent on time, and because they don't pay their rent on time, they could lose their tenancy. You know, it's like a snowball of events, you know, and from getting to the bottom of the issue, it could help address so many other things that will make sure they can be responsible contributing members of society and sustain their tenancy as they should.'

**Housing Officer 2** 

By having access to this data, at an earlier point in time, housing staff can assess whether there are underlying issues which contribute to the issue in hand (eg anti-social behaviour or rent arrears). By having this knowledge, they can develop a clearer strategy to provide intervention. Moreover, out of three respondents in the endline survey who had used TDV, one housing officer believed that having access to TDV helped the families they were working with because they were able to see which other professionals were working with families. They could therefore provide more timely support and more easily contact other professionals.

# Medium-term outcome: Families receive communication and support tailored to meet their needs

TDV provides housing staff with access to data which provides a clear picture of the individualised needs of each individual and family. Housing staff felt that by having access to this data, they would be able to provide more tailored advice and intervention for each of the families. For instance, they would be able to ensure they do not place families in properties located in an area which may be detrimental to the family (eg areas of conflict; areas where substance misuse may be higher). They would also be better informed to develop a support plan for familial intervention as officers have knowledge about past issues and family history. At endline, two out of the three respondents to the survey who had used TDV believed that TDV had helped the families they are working with because it has helped inform decision-making and identify professionals already working with the families.

### Other family outcomes listed in the theory of change

There were a number of other family outcomes highlighted in the theory of change which we were unable to collect evidence on due to not collecting data from families, low usage and TDV only being used for a relatively short length of time. These outcomes included: reduction in anti-social behaviour, reduction in rent arrears, increase in families in more suitable and safe housing, reduction in evictions, tenancies are sustained, increased stability for housing situation, and improved wellbeing. Recommendations on how to capture evidence on these outcomes are explored in the Recommendations for future evaluation section at the end of this report (see chapter 4).

### **Unintended consequences**

Housing staff were asked to reflect on the potential or actual unintended consequences of TDV during the theory of change workshop and interviews.

### **Families**

Qualitative data indicated that housing staff were concerned that families could become worried about being on a database which they did not explicitly consent to be on.

There was also a concern that by having access to more data, 'hard to house' families will be prevented from being offered a tenancy, and housing staff will be left to find them housing.

### **Housing staff**

While some housing staff reported time savings from using Transform Data View, there were concerns from some that the data system would cost them more time in instances of missing or inaccurate data. During interviews, one housing officer raised the concern that if the address is outdated, a housing officer will waste time visiting a property which the family no longer occupies.

Housing staff also acknowledged that if 'hard to house' families are prevented from being offered a tenancy, housing staff would be left to find them housing which would add to their workload and may lead to greater work stress.

# 4. Discussion

# **Discussion of findings**

This chapter sets out the findings in relation to the key research questions.

### **Evidence of feasibility**

### **Fidelity**

Is the training being delivered as intended?

The evaluation data suggests the introductory training and refresher training was delivered as planned. The introductory session provided an overview of what TDV is and how to use it, and the refresher training session was more of an interactive session, in which housing staff practised how to use TDV. Both training sessions were delivered virtually.

Are housing staff members using TDV as intended?

Usage data indicated that around half of housing staff members who had received training had used TDV at least once during the evaluation. Usage data provides some indication of what housing staff are using TDV for. Throughout the evaluation, housing staff were predominantly using TDV to search for an individual and view the individual's page ('individual view'), which contains information about them as intended. However, usage data does not show what individuals are clicking on when they view an individual's page.

### **Adaptation**

Are there any differences in the way TDV is being used across housing staff/teams?

There are differences in the way TDV is used across housing staff in different roles, with some using TDV more than others.

### Dosage

 How many housing staff members have received training? How many housing staff members are using TDV? How much/often are housing staff using TDV?

In total, 51 housing staff members had received training. Twenty-one housing staff in SWT had used TDV at least once during the evaluation. Across 21 users, there were 84 sessions in total, with housing staff using TDV an average of four times. There were two housing staff members from Sedgemoor using TDV who had used TDV seven and 15 times. TDV usage appeared to fluctuate month-to-month. Self-reported usage data also indicated only a small proportion of eligible housing staff members were using TDV in their practice, and among those who were using it, they were using TDV infrequently. Qualitative interviews indicated low usage, with participants indicating they had only used TDV on a 'case-by-case' basis.

### Reach

Which housing staff have access to and are using TDV?

Usage data indicated that housing staff in a number of different roles have access to and are using TDV. Active users of TDV from SWT included Homelessness and Rough Sleeping, Tenancy and Debt and Benefit staff. The two users from Sedgemoor were housing and

neighbourhood officers. There are differences in the way TDV is used across housing staff in different roles as discussed above with regards to Adaptation.

### Quality

 Are the training/refresher training sessions being delivered to high quality? Is TDV fit for purpose?

There was a sense among housing staff that the training was delivered to high quality and provided them with the skills and knowledge to access and use TDV. Housing staff felt confident in using TDV after only one hour's training, which suggests that the learning process also requires a low-time commitment. There were mixed views about how easy TDV was to use. While some housing staff felt it was easy to use, others mentioned they found it difficult to understand the headings and acronyms. Housing staff members felt additional training may be required to remind housing staff how to use TDV and answer any questions they may have.

### **Participant responsiveness**

 How do housing staff feel about training and TDV? Is there anything that can be improved?

The high-quality introductory and refresher training was viewed as being fundamental to the successful implementation of TDV. Both quantitative and qualitative analysis indicated that training was generally viewed positively. Before using TDV, housing staff appeared to have high initial buy-in and enthusiasm for TDV. However, views on TDV were more mixed after housing staff had used TDV. While there had been some instances where TDV had been useful, housing staff reported concerns about accuracy of data and frustration with missing data.

### Intervention differentiation

What is the value added of TDV and how does it differ to business as usual?

TDV offers a new tool to provide housing staff with information about families they are supporting. Before TDV was introduced, housing staff were using a range of tools to gather data on families which they felt were not fit for purpose. Housing staff recognised that if TDV worked as intended, it would allow for a more efficient method of gathering information about families.

### **Enablers and barriers**

What are the enablers and barriers to successful delivery of TDV?

A number of core enablers and barriers to the delivery of the approach were identified and included access to high-quality training, initial buy-in and enthusiasm from housing staff members, being able to and knowing how to access TDV, and encouragement by managers to embed TDV in day-to-day practice.

### **Evidence of promise**

### **Potential benefits**

 What are the potential benefits of the TDV for families, housing staff and the wider service?

Housing staff reflected on the benefits of TDV during the interviews and the endline survey. Overall, there was general consensus that TDV could make a difference to housing staff: they could more easily tailor support to families' needs, contact more professionals and experience a more efficient way of working. These outcomes were consistent with those listed in the theory of change. However, there were a number of other practitioner outcomes highlighted in the theory of change which we were unable to collect evidence on. These included: a better relationship between the family and practitioners (housing staff and those

that are contacted), better communication with professionals, reduction in duplication and saving resources.

Although the study did not collect data from families nor did it analyse family data, a number of benefits were identified by housing staff. Benefits included families not needing to retell their story to multiple professionals; receiving timely support before issues escalate; and receiving communication and support tailored to their needs. There were a number of other family outcomes highlighted in the theory of change which we were unable to collect evidence on. This included: reduction in anti-social behaviour; reduction in rent arrears; increase in families in more suitable and safe housing; reduction in evictions; tenancies being sustained; increased stability for housing situation; and improved wellbeing.

### **Unintended consequences**

 What are the actual or potential unintended consequences for families, practitioners and the wider service?

Interviewed staff members reflected that there were minimal unintended consequences of TDV. Some of the identified unintended consequences they perceived included possible concerns among family members about their data appearing on a database which they did not consent to and it being more difficult to find properties for 'hard to house' families. Housing staff were concerned TDV could cost them more time in instances of missing or inaccurate data.

### Conclusions and recommendations for TDV

TDV is designed to provide housing staff with access to information on family vulnerabilities, past and current assessments, and involvement of other agencies so they are in a better position to identify and support families by addressing issues early and having a joined-up working approach with other professionals. Evidence gathered from the evaluation suggests that TDV is achieving some of its intended aims. Although housing staff cited many benefits of TDV, usage remained relatively low throughout the evaluation. If Somerset County Council wishes to continue with the delivery and potential roll-out of TDV to other teams or services, the evidence from this evaluation point to a number of recommendations that it could consider to address the identified barriers to usage. These include making adjustments to training and TDV.

### **Training**

• Those who attended training reported it met their needs and enabled them to access and confidently use TDV, suggesting the content and delivery is fit for purpose. There was a view that the content on the history of the set-up of TDV could be reduced to enable more time to be spent on the practical aspects of how to use TDV. There was a group of housing staff who found it difficult to attend training or engage with the content due to other work demands. Therefore, providing a recording of the training alongside an information sheet that housing staff can revisit in their own time would be beneficial, and also possibly help housing staff remember how to access TDV after training.

### **TDV**

Although TDV seemed to be fit for purpose in general, there was an issue with housing
officers obtaining access, with delays in receiving confirmation of DBS status. Ensuring
staff can be given access at or soon after the training session is critical, so that they can
start using TDV to increase confidence and use from the start.

- Ensuring the buy-in of housing team managers also appeared to be important: they need to ensure their staff have access and are confident using TDV and remind them to use TDV in their day-to-day practice. There was a strong sense among housing staff that it would be useful to have more frequent communication from senior leadership and management about TDV to remind them to use the database in their day-to-day practice. SWT could consider increasing communication, for instance, including a section about TDV on emails that are sent out. Linked to this, there is evidence that housing staff have found TDV really useful when they have used it for specific cases, but general usage has remained low. Producing resources to make the potential uses and gains of TDV more tangible for housing staff during implementation could increase uptake: for instance, introducing a series of case studies illustrating scenarios when TDV has benefited housing staff and families. In addition, use of acronyms was perceived to be a barrier to understanding some of the content. It may be useful to provide a glossary page or allocate time in training to explain the meaning of common acronyms.
- Housing staff expressed frustration when they discovered data was inaccurate. In some scenarios they knew the correct information but did not know how to ensure it was updated on the system. Information about what to do in these circumstances should be covered in future training and reiterated to housing staff who have already attended training. In addition, they could be given an admin contact who is able to manually update the data.

Finally, we suggest that these findings are shared with the housing teams, even in a summary form.

### Recommendations for future evaluation

Part of the evaluation was to assess the feasibility of conducting a future impact study on the approach. While the evaluation has provided some evidence of promise, usage remained relatively low among housing staff. Therefore, we do not currently recommend an impact evaluation be undertaken while usage remains low.

Instead, the evaluation team would recommend that Somerset County Council considers amending the delivery of TDV to increase usage and continues to monitor implementation with the modifications.

### Implementation of TDV

We recommend **improving management data collection on the delivery of training**. It is recommended that data is collected on who participated in training. This would give a better understanding on the reach of the training. If this was linked to data on staff such as their team, their role or length of service, analysis could explore factors which may be influencing attendance.

We would recommend **continuing and improving usage data collection**. Due to several issues with data quality, the PowerBI report did not function as intended. One of the reasons was the way it uses data that participants have entered using free-text responses when they sign up to use TDV (eg their names and email addresses). If there are inconsistencies between this form and the records that are already on the system, this disrupts matching of data, leading to inaccurate usage figures in the PowerBI report. To gather further detail on usage, we have recommended that SWT includes a 'pop-up box', on which users select the reasons for using TDV and any reflections on the process. SCC are currently in the process of adding this to TDV.

In addition, we would recommend that more **in-depth detail on housing staff member's views of TDV** is collected. As part of the evaluation, we interviewed a small group of housing staff. Undertaking a similar exercise, every six months for example, could help explore perceptions of the offer and provide useful recommendations. Topic guides used in this evaluation (Annex F) could be used as templates. If these take place, we recommend that personnel skilled in interviewing, and independent to housing teams, be chosen to undertake these.

### Impact of TDV

We would recommend that Somerset focuses on the implementation of TDV before considering investigating the impact of TDV. If usage of TDV increases and becomes embedded into housing staff practice, we would recommend investigating the impact of TDV on practitioners as well as children and families through robust quantitative methods. We would emphasise initially prioritising a small number of key outcomes that are articulated in the theory of change which could be measured.

We would recommend that **Somerset establishes which key outcomes can be tracked using data that is already routinely collected**, such as family data on the number of evictions and stability of housing. For outcomes that are currently not captured, we would recommend the use of valid and reliable outcome measures to track changes over time.

# **Appendices**

# **Appendix A: Number of sessions and actions within sessions across time**

TABLE A.1.

Number of sessions and actions within sessions across time

|                  | SWT                 |                    | Sedgemoor      |                     |                 |                |
|------------------|---------------------|--------------------|----------------|---------------------|-----------------|----------------|
| Month            | No. of active users | No. of<br>sessions | No. of actions | No. of active users | No. of sessions | No. of actions |
| February<br>2022 | 8                   | 14                 | 69             | 0                   | 0               | 0              |
| March            | 6                   | 8                  | 46             | 0                   | 0               | 0              |
| April            | 5                   | 6                  | 10             | 2                   | 3               | 133            |
| May              | 7                   | 15                 | 69             | 2                   | 8               | 42             |
| June             | 7                   | 11                 | 57             | 1                   | 3               | 12             |
| July             | 5                   | 11                 | 37             | 2                   | 4               | 35             |
| August           | 9                   | 12                 | 32             | 2                   | 4               | 30             |
| September        | 5                   | 7                  | 16             | 0                   | 0               | 0              |
| Total            | -                   | 84                 | 336            | -                   | 22              | 252            |

# **Appendix B: Actions undertaken across roles**

**TABLE B.1.**Actions undertaken across roles (SWT)

| Role                                | Saw<br>individual<br>view | Saw family<br>view | Saw data<br>protection<br>message | Viewed<br>address<br>search | Total |
|-------------------------------------|---------------------------|--------------------|-----------------------------------|-----------------------------|-------|
| Admin Case Manager/Lettings (n=1)   | 0                         | 0                  | 1                                 | 0                           | 1     |
| Case Manager Housing Options (n=1)  | 5                         | 7                  | 1                                 | 1                           | 14    |
| Case Manager (n=3)                  | 16                        | 8                  | 10                                | 7                           | 41    |
| Debt and Benefit Case Manager (n=1) | 9                         | 5                  | 3                                 | 0                           | 17    |
| Estates Officer (n=1)               | 28                        | 21                 | 2                                 | 1                           | 52    |
| Front Line Worker (n=1)             | 0                         | 0                  | 1                                 | 0                           | 1     |
| Housing Officer (n=10)              | 88                        | 56                 | 32                                | 20                          | 196   |
| Rough Sleep Navigator (n=1)         | 0                         | 0                  | 1                                 | 0                           | 1     |
| Tenancy Sustainment Officer (n=2)   | 4                         | 3                  | 6                                 | 0                           | 13    |
| Total                               | 150                       | 100                | 57                                | 29                          | 336   |

**TABLE B.2.** Actions undertaken across roles (Sedgemoor)

| Role                        | Saw<br>individual<br>view | Saw family<br>view | Saw data<br>protection<br>message | Viewed<br>address<br>search | Total |
|-----------------------------|---------------------------|--------------------|-----------------------------------|-----------------------------|-------|
| Housing Officer (n=1)       | 68                        | 52                 | 14                                | 2                           | 136   |
| Neighbourhood Officer (n=1) | 64                        | 50                 | 1                                 | 0                           | 115   |
| Total                       | 132                       | 102                | 15                                | 2                           | 251   |