

Final evaluation report (year 3) for the Coordinated Community Support Programme

A report by Cloud Chamber for The Children's Society and CCS partners

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Summary of key findings

Our evaluation of year 3 of the Coordinated Community Support (CCS) Programme has identified the following learning points described in more detail throughout this report:

CCS has supported organisations in four pilot sites to implement a digital referral system

Organisations based in Norfolk, Oldham, Tower Hamlets and Swansea are reporting an increase in referrals and more joint working. It is likely that this is leading to better outcomes for people accessing services and a more dignified experience for those navigating crisis support services. There is a mixed response about the extent to which people are more likely to access Local Welfare Assistance (LWA) and/or Discretionary Assistance Fund (DAF) as a direct result of the CCS Programme.

Digital referral systems, underpinned by local networks, have demonstrated that when implemented well they can:

- Support advice professionals to work efficiently, saving them time
- Improve transparency and accountability between organisations
- Improve the experience of people accessing crisis support

Digital referral systems work best when organisations in a local area have:

- •A strong network and track record of agencies working together
- •Capacity amongst Voluntary and Community Sector (VCS) organisations to take the time to learn how to use the new system
- •Trust and buy-in from a range of organisation types including some statutory and/or commissioned services
- •Digital literacy and/or high levels of support amongst professionals and volunteers who are likely to use the system
- •Ongoing support and training for users of the system
- •Investment to ensure that the system will be sustained over the long-term
- •Having a strong organisation to manage the system including promotion of the system and effective training / onboarding

In addition to the digital referral system the CCS Programme has supported organisations to increase access to their services

This as especially notable in years 1 and 2 of the Programme in response to the Covid pandemic and served as a way to a) build credibility of the CCS Programme locally and b) support organisations to engage with the Programme through added capacity. Examples include (amongst other things) funding access to food and supporting schools to access advice from Citizens Advice in Tower Hamlets. The Programme has also been credited with boosting visibility and awareness of smaller VCS organisations and their services.

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1. About the CCS Programme

About the Coordinated Community Support Programme

The Coordinated Community Support Programme

The Children's Society (TCS), in partnership with Buttle UK, the Lloyds Bank Foundation, Children in Need, The Church of England, The Legal Education Foundation, The Local Government Association (LGA), Trust for London, Smallwood Trust, Stepchange and Trussell Trust are delivering the Coordinated Community Support (CCS) Programme.

The Programme was devised in response to the localisation of welfare assistance in 2013, and research conducted by The Children's Society with The Church of England (the 'Not Making Ends Meet' report). In 2013, reform led to the establishment of Local Welfare Assistance (LWA) schemes, which are now administered by upper-tier local authorities in England. In Wales, the Discretionary Assistance Fund (DAF) provides two types of grant - the Emergency Assistance Payment (EAP) and the Individual Assistance Payment (IAP). The DAF is administered centrally by the Welsh Government, in contrast to the decentralised local welfare assistance model in England. The Not Making Ends Meet report (2018) highlighted that, the first port of call for crisis support was often voluntary sector or other statutory services - rather than LWA/DAF schemes. Families trying to access support tended to 'bounce around' different services trying but failing to access support, with negative implications for health and wellbeing.

The original aims of the programme were to:

- 1. Address the gap in emergency support provision left following the elimination of Crisis Loans and Community Care Grants through better networking of different local agencies (including the Local Authority) involved in the provision of emergency assistance.
- 2. Reduce repeat instances of financial crisis by addressing underlying causes of crises, as well as the immediate emergency

The CCS Programme has worked primarily in four local areas to improve coordination between locally-based agencies providing support (including grant support, advice, legal support, access to food and other services) to people in financial crisis.

Findings from our evaluation of <u>year 1</u> and <u>year 2</u> highlighted that the Programme, alongside wider joint responses to the pandemic by the VCS and local authorities, helped to forge relationships between agencies. This was despite a focus on increasing capacity of organisations to respond to evolving needs resulting from the pandemic. We also observed that the CCS Programme, through funding workstreams in year 1 (Oct 2019 - Sept 2020), helped to build trust with organisations in the four pilot sites which could be built upon in year 2 (Oct 2020 to Sept 2021), with more focus on coordination, longer term planning and development.

About the Coordinated Community Support Programme

In year 2, the CCS Programme increased its focus on local coordination and the adoption of underpinning digital referral mechanisms. It articulated the key conditions for local co-ordination:

- 1. A network of people who:
 - share a desire to achieve better outcomes collaboratively
 - have a shared understanding of the local environment in which agencies are operating
 - are motivated to act together "willing to leave your ego at the door".
- 2. An underpinning 'mechanism' that facilitates robust referrals across agencies. More than just the odd email....
- Capacity and legitimacy to lead the network, administer the referral mechanism and support collaboration including bridging between VCS and LA

In year 3 (Oct 2021 to Sept 2022), the focus was on operationalising learning from year 2 and creating a sustainable legacy from the programme. This is principally in the form of supporting the implementation of digital referral systems, although this is not the only Programme activity undertaken in the final year.

Report structure

The report has the following structure:

- Section 2 explores learning from the Programme overall, as well as key learning from each of the pilot sites.
- Section 3 examines impact beyond pilot sites, understanding the extent to which learning has been transferred to other localities and policy makers and others have been influenced by the programme
- Section 4 presents our conclusions and recommendations from the available evaluation evidence.

Please note content included in pink boxes are authored by the Programme's Learning Facilitator.

Change Narrative - a systems change programme with evolving goals

The Logic Model below is an evolution of the one set out at the beginning of year 2. The outcomes below are based on the evaluation evidence and articulate what was achieved in year 2 and intended outcomes for year 3.

Figure 1: Change narrative informed by year 2 data (source: Cloud Chamber)

from Year One in four pilot sites

Increased legitimacy for CCS to influence and

Increased levels of communication between organisations

support change

Joint understanding of the importance of a referral system Year Two
OUTCOMES in
four pilot sites



Reach and access

Improved capability for organisations to make appropriate interventions

Increased referrals to specialist services (robust and timely)

Improved ability for services and support to reach CYP and families (Tower Hamlets)

Coordination

Added capacity to existing advice networks (THCAN and NCAN) and initiating new networks (OCAN)

Organisations more likely to have a digital system

Partnership

Improved visibility of the CCS programme within some local authority teams

Year Two OUTCOMES beyond four pilot sites



Improved awareness of how to improve coordination between delivery organisations (beyond the 4 pilot sites) Intended outcomes and impact

Year Three
OUTCOMES in
four pilot sites



Greater number of people are referred and supported longer term (rather than signposted)

Increase in cross-referrals between VCS and LA (including to and from LWA / DAF) to improve the service experience for people accessing support

Improved sustainability
(resources and capacity) for
the network and referral
system developed in
4 local areas

Year Three
OUTCOMES beyond
four pilot sites



Improved awareness of why coordination matters amongst national decision makers / influencers

Improved coordination practice

Year Three IMPACT

People in financial hardship in 4 pilot areas are more likely to get effective and joined up support

People in financial hardship (in England and Wales) are more likely to get effective and joined up support

Decision makers /
influencers are more likely
to invest and support
coordinated approaches

The year 3 evaluation

Our approach

The evaluation is focused on assessing the contribution of the Programme to change, primarily at pilot site level (local systems change) with some consideration of contribution to influence beyond the four pilot sites (national systems change) too. We used a mix of quantitative and qualitative methods. This evaluation covers the funded activity from October 2021-May 2022, known as year 3 of the Programme. However, the impacts achieved are building upon years 1 and 2 of the Programme.

The year 3 evaluation had two broad evaluation questions:

- To what extent has coordination of crisis support been improved in the four pilot sites? Have systems changed and, if so, how?
- To what extent are stakeholders beyond the four pilot sites aware of CCS Programme learning? What has changed (or may change in the future) as a result?

Given that the bulk of the Programme investment in years 2 and 3 has been focused on supporting advice networks and their digital referral systems, much of our evaluation activity has focused on this too.

Quantitative data sources in year 3

- Monitoring data from eight funded organisations in year 3 (e.g. data collected from funded organisations on the reach of their projects) and funding data (collected centrally by TCS).
- Survey of organisations involved in the four pilot sites with 32 responses. All four pilot sites are represented, but to different degrees (i.e. 53% from Tower Hamlets, 25% from Oldham, 16% from Norfolk and

6% from Swansea).

 Digital referral network data from Tower Hamlets and Norfolk up until May 2022.

Qualitative data sources in year 3

41 people were consulted in total including:

- 22 people representing 18 VCS organisations.
- 10 people representing local authority and/or statutory services including social prescribers.
- Five members of TCS team including the CCS delivery team.
- Four Programme Board members from national partner organisations.
- Five team consultative calls with TCS team to hear about National Systems change activities, achievements and learning.
- Mosaic (TCS case management system) data logging communications between the CCS team and pilot site stakeholders.

Data sources from years 1 and 2

- Year 1 data included 19 stakeholders consulted and 56 responses to our survey.
- Year 2 data included 34 stakeholders consulted and 55 responses to our survey.
- Monitoring data and insight from 6-weekly calls with the delivery team has been collated throughout the 3 years of the Programme.

2. Coordinating crisis support in four pilot sites

What we are learning

Funded CCS activity

The Programme has distributed funding in each of the pilot sites. Funding was administered to VCS organisations and was primarily for work that would improve coordination.

In year 1, the CCS team chose to undertake smaller (in monetary terms) scale workstreams. There were limited proposals for coordination-specific workstreams. It was clear that capacity within organisations was limited and they struggled to invest time in proposals – this challenge was exacerbated by the Covid-19 pandemic. As a result, 15 workstreams were funded totaling just over £100k. Most of these workstreams were fairly modest in size and focused on improving access to services and building capacity of organisations.

In year 2 of the Programme, 15 workstreams were funded totaling nearly **£200k** with an **increasing focus on coordination**, with some workstreams still focused on increasing capacity.

£83k (although some of the work funded in year 2 was still being delivered during year 3). Work funded in year 3 focused specifically on developing and onboarding partners on **digital referral systems**. This reflects the CCS team's broad allocation of their time in year 3. In broad terms the CCS team report that the majority of their time has been on embedding digital referral systems in the four sites. In addition, the team also supported other activities including identifying ways to share learning with other localities and supporting other coordination activity in pilot sites - including supporting the development of Independent Food Aid Network

(IFAN) leaflets.

Figure 2: Funding allocated by CCS Programme by year and focus area (source: CCS team funding tracker)

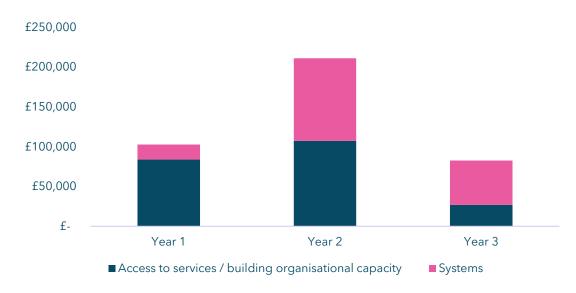


Figure 3: People supported by funds distributed in year 3 (source: CCS year 3 monitoring data)

	Percentage of people who access services (total 1670*)
Families with children	55%
People who identify as Black,	Asian and minority
ethnic (BAME)**	53%
People who have or had no re	ecourse to public funds
(NRPF)	52%

*Note that this is underreported as it does note include all people supported by the digital referral systems and just represents those who have been reported in grant holder monitoring ** The homogenisation of all ethnic minority groups into one acronym is considered problematic by Cloud Chamber and is used here to reflect the wording used in monitoring data

Referral systems have been the main focus for year 3

In all four pilot sites, the launching, utilisation and sustaining of referral systems has been the key focus of the CCS Programme in year 3. For many stakeholders, referral system development and implementation has become synonymous with the CCS Programme.

Each of the four pilot sites is at a different stage with their digital referral system. In Norfolk, for example, they had established a digital referral system before the CCS Programme was launched. This provided the digital infrastructure and initial learning regarding implementation at other pilot sites. In Tower Hamlets, they had a strong network of advice agencies and the digital referral system, supported by CCS, is currently less than two years old. Oldham have established the system, but are training and onboarding users. In Swansea, the digital referral system is not yet operational although launch is imminent.

Figure 4: The stages of implementing a digital referral system (source: Cloud Chamber)



In year 3 of the CCS Programme, the digital referral systems had the following number of organisations registered as users. Note that some organisations had multiple (independent) teams registered on the system.

Norfolk - 139 users. System is led by Norfolk Community Advice Network (NCAN) established in 2005 and set up to bring agencies together. The system was established before the CCS Programme was incepted, but its further development has been directly and indirectly supported by the Programme.

Tower Hamlets - 30 users. System is led by Island Advice since 2020 as a result of the CCS Programme. Island Advice have been an active member of the Tower Hamlets Community Advice Network (THCAN). The CCS Programme supported its implementation.

Oldham - Seven users. System has been managed by the Ancora project since 2021 as a result of the CCS Programme.

Swansea - currently no users as it is in the early stage. The system will be managed by Swansea Law Clinic following a tendering process led by the CCS Programme. The Swansea Law Clinic are a member of the Regional Advice Network, which is the network underpinning the system.

Summary of progress

The table opposite illustrates, in broad terms, how each pilot site is evolving with support from CCS Programme with respect to the key features of coordination as identified in year 2:

- Network of organisations who share a desire to achieve better outcomes collaboratively.
- Referral System to facilitate robust referrals.
- Resource to run the network and manage the referral system.
- Resource and legitimacy to manage the network and referral system in the longer term.

For the year 3 evaluation we've added an some additional features including that the referral system is widely used by a variety of organisations

- **Darker green** indicates some long term security (e.g. THCAN is an established network and likely to continue beyond the duration of the CCS Programme).
- **Mid green** indicates that the area is at the beginning of a process (e.g. Swansea have funding to develop the referral system but it has not gone live yet).
- **Lighter green** indicates that there are activities planned but have not materialised at time of writing (e.g. stakeholders are talking about identifying a funding source but have not had anything confirmed).
- **Grey** is where there has been no activity.

Figure 5: Key features of coordination in pilot sites (source: Cloud Chamber)

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	Network	Referral System	Referral System is well used	Resource during CCS Programme	Resource secured to manage long term
Baseline beginning of CCS Programme (summer 2019)					
Norfolk					
Oldham					
Swansea					
Tower Hamlets					
End of year	2 (summer 20	21)			
Norfolk					
Oldham					
Swansea					
Tower Hamlets					
End of year 3 (summer 2022)					
Norfolk					
Oldham					
Swansea					
Tower Hamlets					

Lessons learned from Norfolk 1/4

Key finding 1: The number of referrals made on the NCAN digital referral system continues to grow

The number of referrals made via NCAN's referral system has grown; between 2019/20 and 2021/22, the number of referrals has increased by 77% to 7,424.

This coincides with support from the CCS Programme, which has contributed to this growth through funding promotion and engagement, providing operational resources, networking, and informal mentoring. The number of registered organisations was 139 in 2021/22, an increase of 49% since 2019/20.

Over time, organisations registered with the system have on average made more referrals, with 29 referrals per organisation in year 1 increasing to 53 in year 3.

Figure 6: NCAN Summary statistics by Programme year (source: NCAN network data)

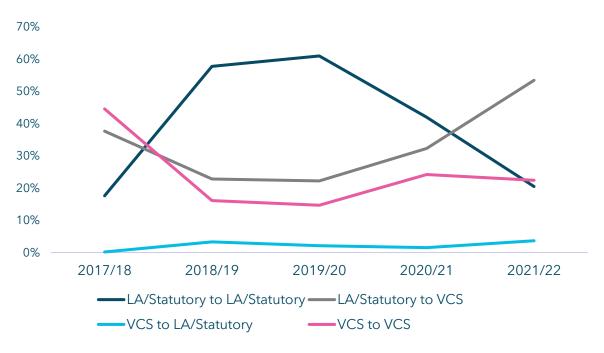
	Year 1	Year 2	Year 3
	2019/20	2020/21	2021/22
Registered organisations	93	119	139
Referring organisations	68	95	103
Receiving organisations	57	71	85
Referrals (accepted)	2,678	4,270	7,424*
Referrals per organisation	28.8	35.9	53.4

^{*} Annualised referrals, 2021/22 covers 1 October 2021 to 31 May 2022

Key finding 2: Referrals between the VCS and the LA/statutory sector are more common

Over time, the proportion of referrals from local authority (LA)/statutory services to the VCS has markedly increased - from 15% in 2019/20 to over half of all referrals (53%) in 2021/22.

Figure 7: NCAN referral routes by Programme year (% of annual referrals, source: NCAN network data)



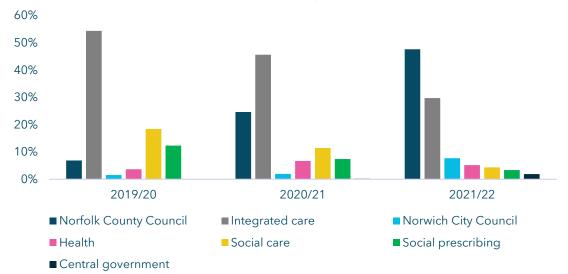
Lessons learned from Norfolk 2/4

Key finding 3: County Council teams are more engaged in the system

In 2019/20, integrated care teams and social care were common users. In the most recent year (2021/22), Norfolk County Council have overtaken integrated care as the most frequent user - being involved in nearly half of all referrals (48%). CCS has contributed to this by introducing NCAN to key decision makers within the County Council. The Council have since funded NCAN through their core advice funding.

 "I met her [NCC senior leader] at the first TCS meetings. The meetings brought us together, started collaboration and built trust" VCS stakeholder, Norfolk

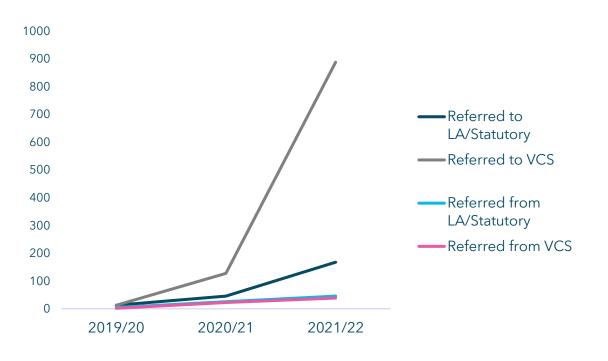
Figure 8: Statutory sector referrals in NCAN by type and Programme year (% of all referrals, source: NCAN network data)



Key finding 4: NAS is more integrated

NCAN supports the Norfolk Assistance Scheme (NAS), the county's LWA. Prior to the Programme, there were only a total of 33 referrals associated with NAS (i.e. to and from NAS). By 2021/22, this has grown to 1,141 (part way through the year). The majority of these are however referrals made by NAS to other statutory or VCS organisations (92%), rather than received by NAS.

Figure 9: NAS referrals in NCAN by Programme year (source: NCAN network data)



Lessons learned from Norfolk 3/4

Key finding 5: NCAN referral system features are valued and are promoting coordination

Our research with NCAN users highlights the organisational benefits of using the system, including greater efficiency and responsiveness of the referral. System users are able to make multiple referrals to different organisations using the same information. Referrals get to the right staff member quicker, and there is more transparency about the status of the referral; with the referrer knowing if a referral has been accepted or not. There are likely to be benefits to people who access services including speed of referral, not having to repeat their story, more assurance that the referral is in hand and that they are valued.

"NCAN gives assurance. If you were just looking on the internet [for somewhere to refer], it's more of a minefield and client themselves has to call them" VCS Stakeholder, Norfolk

"Its more collaborative - they [VCS organisations] are all there, and its easier to make contact" VCS Stakeholder, Norfolk

Furthermore, the system allows the secure transfer of sensitive personal data. The information held on each organisation or team using the system is valuable if a customer presents with a very specific issue. Within the system, organisations are able to communicate their ability to pick up referrals, which leads to more efficient allocation of referrals. Our data shows evidence that the system is facilitating contractual relationships, for example between advice agencies

responding to the pandemic. For some organisations the NCAN referral system helps to assign referrals between organisations, via the NCAN coordinator. For one organisation, NCAN is now their preferred referral route.

"The ease of access to the system encourages you to work with organisations in the statutory and third sector." VCS Stakeholder, Norfolk

Key finding 6: NCAN has secured longer term funding from Norfolk County Council to sustain the digital referral system and networking

NCAN have received funding from Norfolk County Council as part of the council's core funding offer to the advice sector. The funding is long-term in nature, spanning across eight years (although reviewed biennially). The funding recognises the contribution NCAN gives to the advice sector locally, and is funding – in part – a helpline for users to contact NCAN for help using the system, alongside continuation funding. This signals the value of referral systems widely adopted across a locality.

Lessons learned from Norfolk 4/4

Learning coordinator reflections

Reflecting on their progress through the CCS Programme in a group session in June 2022, representatives from the Norfolk pilot site said that:

- They were proud of the growth in the NCAN system in terms of membership and usage.
- They felt that the role of the VCS sector and the NCAN network had been recognised as a result of the programme.
- The most important enablers for coordination had been shared objectives; willingness to collaborate; effective and shared communication channels.

They valued the CCS programme for flexible funding, recognising that coordination requires support, and valuing the VCS in leading coordination.

They had a number of concerns for the future, including increasing volume, and complexity of demand; staff, volunteers and donations becoming harder to find; and stress on key local services.

"There's no point having a referral system if you don't fund the services to refer to."

Lessons learned from Oldham 1/3

Key finding 1: Coordination has not significantly improved in year 3 of the Programme

The CCS Programme was successful in years 1 and 2 for boosting the capacity, visibility and credibility of smaller VCS organisations in Oldham through a series of funds distributed to organisations in need. CCS also facilitated a number of meetings between agencies to build a shared understanding of the challenges in the borough.

In year 3, there has been limited evidence of improved coordination between agencies in Oldham despite the development of the Oldham Community Advice Network (OCAN) and digital referral system. Between November 2021 and April 2022, there were just 28 referrals logged on the OCAN referral system.

Key finding 2: There are some barriers facing VCS organisations to engaging with a digital referral system

The OCAN digital referral system hasn't been as well used as anticipated. Barriers include:

- Challenge for small organisations to have time / resources to attend the training.
- There has been lower than expected engagement of local authority and commissioned services and this reduces the incentive for some VCS organisations to use it.
- A lack of clarity over how client data might be used by in the future by the different partners involved.
- Lack of digital literacy and confidence amongst some

- professionals and volunteers who find adopting a new system overwhelming.
- Not seeing the value some VCS organisations describe the referral system as an 'extra piece of work' rather than as something which would enhance their work and free-up time.

"I thought the [OCAN] training online was far too much information to take in at one time" VCS organisation, Oldham

Key finding 3: There has been minimal engagement with the referral system from local authority, statutory partners and commissioned services

Local authority partners have engaged positively with the Programme in years 1 and 2. In year 3, they have been slow to adopt the referral system. At time of writing, there has been little movement from local authority teams to get onboarded onto the system. Some of the reasons for this include:

- There has not been a consistent lead contact within Oldham Council for the CCS Programme. No 'one person' or team at Oldham Council has taken ownership with regards to the OCAN digital referral system.
- There have been challenges reported with GDPR in the Council in relation to the system.
- Services commissioned by the Council (including those in the VCS) have not used the system and as a result there has not been much momentum on the system.

Lessons learned from Oldham 2/3

- There is a reluctance to share information" VCS organisation,
 Oldham
- "We've got the local authority and the commissioned services hiding behind the [excuse of] risk management, data protection. But then they'll ring us up and give us the same [client] information that they're hiding behind, so we've got double standards" VCS organisation, Oldham
- "In Oldham March 2020 [start of pandemic] we took our lanyards off we all joined together, GDPR wasn't an issue, governance wasn't an issue. We responded to crisis. Poverty is going to kill more people than Covid and yet we have gone back to that space of "us" [VCS] and "them" [statutory]. It is symptomatic of Oldham. 'If we [LA] release too much to vol sector then what is the point of us (LA)' big society rhetoric has had a detrimental impact on partnership. There is a lot of gatekeeping that happens" VCS organisation, Oldham

Key finding 4: Identifying the right agency to lead the development of a referral system is a critical success factor

The agency initially selected to lead the development of the referral system in Oldham has highlighted some learning about what works (and doesn't work) with regards to strong leadership of a network and associated referral system. The lead of a network

and referral system should:

- Proactively encourage VCS and statutory agencies to onboard onto the system.
- Be a strong and positive advocate for the system, identifying opportunities to grow membership.
- Have a track record of demonstrating leadership in the local VCS (e.g. through influencing and facilitating).
- Be recognised by the local authority as a credible and sustainable organisation with the ability to influence.
- Leaders of the referral system should be identified via a transparent process so that all members of the network are clear on the rationale for their appointment.

Recommended next steps for Oldham

- It is recommended that the OCAN network considers its purpose alongside other similar networks (such as Poverty Action Group) and determine the extent to which a digital referral system is desirable and achievable.
- At time of writing this report, a new lead agency has been identified for the network and referral system. This presents an opportunity to encourage local authority commitment to the initiative.

Lessons learned from Oldham 3/3

Learning coordinator reflections

Reflecting on their progress through the CCS Programme in a group session in June 2022, representatives from the Oldham pilot site said that:

- They were proud of forming respectful and thriving working relationships and driving forward OCAN
- They felt that, as a result of the programme, VCSE organisations as a whole, and some of the smaller ones in particular, were being taken seriously
- Seeing how the referral system had worked in other areas had been a breakthrough. For the Council, the breakthrough had been realising they had to "let go" and let the VCS lead
- The most important enablers for co-ordination had been acknowledgement of what they do; meeting on Zoom, which saved time; and political leadership at the Council.

They valued the CCS programme for believing in the organisations and working differently with them, funding without having to jump through too many hoops, and providing an external perspective and independent challenge.

They had a number of concerns for the future, including a huge, complex and growing volume of demand, and a feeling that crisis seems to be further embedded rather than alleviated after three years of the programme. They commented that "we have better relationships with partners but we don't have the resources we need", and said that the Council's move to place-based working was good, but the VCS was not always at the table.

Lessons learned from Tower Hamlets 1/3

Key finding 1: Coordination has improved significantly in Tower Hamlets as a result of the THCAN referral system

In year 3 of the Programme, coordination between services is reported to have improved with the THCAN digital referral system credited with much of this success. The referral system had 30 registered organisations in year 3, doubling from year 2. The number of referrals had increased in line with the increase in organisations registered. See the table below for data.

Figure 10: THCAN referral system summary statistics (source: THCAN network data)

	Year 2	Year 3
	2020/21	2021/22
Registered organisations	15	30
Referring organisations	12	21
Receiving organisations	10	14
Referrals (accepted)	203	429*
Referrals per organisation	13.5	14.3

^{*} Annualised referrals, 2021/22 covers 1 October 2021 to 31 May 2022

Our consultations with the sector demonstrated the value of the system in promoting collaboration:

"The THCAN referral system has been great. It has brought together the different advice agencies. We have received a lot more referrals than we would otherwise." VCS Stakeholder, Tower Hamlets

"I think it promotes certainly healthy partnership work, and it's definitely a better journey for the customer. [For example] I think there's an agreement and polite agreement in terms of how quickly referrals should be turned around" VCS stakeholder, Tower Hamlets

Key finding 2: Having a local authority team and social prescribers on the system has contributed to strong usage

There has been strong advocacy for the system amongst the Resident Support team (who administer LWA) at London Borough (LB) of Tower Hamlets. Stakeholders note that while historically there has been "some territorialism between THCAN and VCS" in the borough, the THCAN referral system has been a strong catalyst for working through this.

There has been an increase in referrals from the VCS to the local authority and this has been welcomed by all.

Social prescribers are heavy users of the system with six of the top ten users being social prescriber teams. Social prescribers can make (but do not receive) referrals. They are most commonly referring to advice agencies. This is likely to be because of the strong history and infrastructure for social prescribing in Tower Hamlets, being home a pioneer of social prescribing – the Bromley by Bow Centre.

Key finding 3: Further expansion of statutory agencies would strengthen the system

At time of writing, one team (Resident Support team) at the London Borough (LB) of Tower Hamlets are using the system and they are advocating for other teams within the council to use it too.

"For it to really reach its optimum would be to have different departments and other services on there" Local authority stakeholder, Tower Hamlets

Lessons learned from Tower Hamlets 2/3

Figure 11: THCAN referral sources by sector type

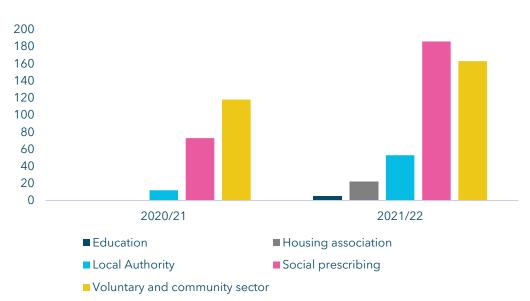
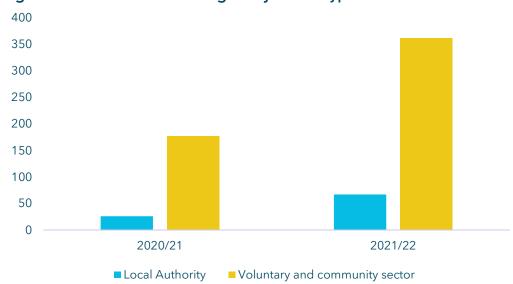


Figure 12: THCAN referral targets by sector type



Key finding 4: There are examples of services saying they've had significant efficiency savings as a direct result of the referral system

Users of the system report that it has made their professional practice much easier and, as a result, more efficient. One user based at LB Tower Hamlets estimates that the system saves them around 1-2 days per week.

- "The way I used to do before [the THCAN system] was a Google Search for advice partners. And that obviously is more time consuming than using the [THCAN] portal. So that's how I would normally do it. And then I would have to call the organisation, find out about the referral process, because not every website has the information on it that you need. So it would take a lot of time, it was more time consuming. And the THCAN [referral system] really helped minimise that. I can actually choose what support they [client] need, and it pops down which organisations can provide that level of support. It makes the referral process so much easier" Local Authority stakeholder, Tower Hamlets
- "Before the THCAN system, I had to keep on chasing [to find out if a referral had been picked up]. It was demanding. Now using THCAN it saves me 10 to 15 hours a week. I can focus on my caseload now" Local authority stakeholder, Tower Hamlets

Lessons learned from Tower Hamlets 3/3

Key finding 5: A successful school project with Citizens Advice

Three schools are actively referring directly to East End Citizens Advice Bureau (CAB) with a total of 334 referrals made to East End CAB in year 3 of the CCS Programme. With the advice and support provided, East End CAB calculate that £304,379 has been secured for families as a direct result of these referrals. This work has taken place in addition to referrals being made via the THCAN system.

Recommended next steps for Tower Hamlets:

- It is recommended that funding is identified to continue supporting schools to engage with the advice sector in the borough and use the digital referral system. It is important to recognise that teachers and pastoral professionals will need ongoing training and support
- It is recommended that additional teams (e.g. Early Help) from LB Tower Hamlets are encouraged to join the referral system
- It is recommended that funding is identified, perhaps from within LB Tower Hamlets, to continue with the THCAN digital referral system
- It is recommended that LB Tower Hamlets consider how to encourage their commissioned services to use the digital referral system

Learning coordinator reflections

Reflecting on their progress through the CCS Programme in a group session in June 2022, representatives from the Tower Hamlets pilot site said that

- They were proud of their work supporting clients in schools; proud of building partnerships, and developing the referral network and tool (THCAN). "The referral system is only a tool. It builds on relationships and organisations willing to work together"; and proud of better working together between the VCS and the Council
- They said that the "The digital THCAN referral system is a game changer"
- Enablers for coordination had been increased patience with each other; quarterly meetings to keep ensuring THCAN was being utilised, keeping people engaged, and bringing on more participants; and recognising that coordination doesn't just happen organically.

They valued the CCS programme for funding a project they had tried to implement for some time - the schools project.

Their concerns for the future centred around sustainability - the CCS project was another example of three-year funding then stopping.

Lessons learned from Swansea 1/2

Key finding 1: Existing networks have been used to share information more widely and deepen relationships between voluntary organisations

The use of existing meetings such as the Regional Advice Networks (RAN) are considered to have been vital in terms of shaping discussions and building awareness alongside a common purpose. A key element of this has been the questions asked by the CCS Programme team during meetings coupled with the ability to bring in fresh perspectives from places such as Norfolk.

• "Previously we had the connections, but they weren't linked. The project helped make the connections work. The management of the project required a lot of skill" VCS organisation, Swansea

Early projects such as the Citizens Advice Swansea Food Parcel Leaflet and the Housing Justice Cymru Citadel project were funded by the CCS Programme helped to build momentum towards more coordinated working.

Key finding 2: There is greater awareness of the need to join up support to help people in Swansea who are in crisis

As the project has evolved, the understanding of what is required to support people in crisis has grown and this was highlight during meetings organised by CCS. For example, the response to the Covid pandemic has highlighted the importance of education and health as important places where support can be provided but is sometimes hampered by not having the right connections or referral networks in place.

From a system perspective, the CCS Programme has highlighted where resources in the system are most under pressure and created a desire to develop tools which enhance capacity (such as the Hope in Swansea app which helps build connections with smaller organisations) and to participate in the new digital referral system under development. For the local authority, and many VCS organisations, these were seen as ways to move away from "firefighting" towards being able to take the time to consider people's circumstances more broadly and put an appropriate package of support in place.

Key finding 3: There is a common understanding of what needs to change and enthusiasm for a new referral network within the city

One of the key themes of all our conversations in Swansea over the three years of the CCS Programme has been the sense that organisations in the city, together with the local authority, already know each other well. However, this had been coupled with a recognition of local systems being capacity constrained and, too often, reactive to need. The new digital referral network is aiming to find ways of building local system capacity by understanding where resources are available and to identify who is best positioned to help. It will also be able to monitor what is being provided in a way that both improves support and enables planning and facilitates preventative interventions.

Lessons learned from Swansea 2/2

Interviewees report that as a result of the visibility and credibility that the Programme has developed over time through the existing networks, there is senior level buy-in and support from organisations across the city.

• "People know what's going on and are prepared to champion it" Local Authority stakeholder, Swansea

Expectations of what the new referral system will deliver are high among stakeholders in the city and may need to be carefully managed as the system launches and starts to grow

A key risk is that the new approach will be seen to duplicate elements of the existing Refernet (the online referral system used in Swansea Neath Port Talbot and run by the Citizens Advice) and therefore add administration and inefficiencies to key workers and volunteers. Ensuring clear guidance, training and comms about how to use the system when it launches may help to mitigate this risk

The ability to explain the benefits of new coordination approaches through user journeys and stories is an important step that will enable the city-wide conversation to move away from processes and on to the people who are supported with relevant data

There was some concern expressed about the impact of the cost-of-living crisis and the extent to which a more short-termist approach to support people prevails at the expense of thinking about the longer-term challenge of preventing crisis occurring in the first place.

• "We need to keep asking the question: how do you make sure crisis support isn't just something that always happens?" Local Authority stakeholder, Swansea

Learning coordinator reflections

Reflecting on their progress through the CCS Programme in a group session in June 2022, representatives from the Swansea pilot site said that

- They were proud of connecting with each other's organisations and identifying areas where they can complement each other's work. The VCS organisations felt they knew much more about the other organisations and what was going on in the city.
- They were also proud of developing the Hope in Swansea app, the IFAN referral leaflet, and agreeing the approach to the referral system
- Breakthroughs had been seeing what could be done with the referral system in other areas, and integrating CCS with the Regional Advice Network (RAN)
- Enablers for co-ordination had been regular informative meetings, as a group; and moving to Zoom/Teams

They valued the CCS programme for meetings where everyone could contribute (some of their other forums were too big); their ability to engage partners from an independent position; capacity to set up meetings to connect organisations; and adaptability (eg in shifting from a Swansea focus to one with a closer relation to the RAN).

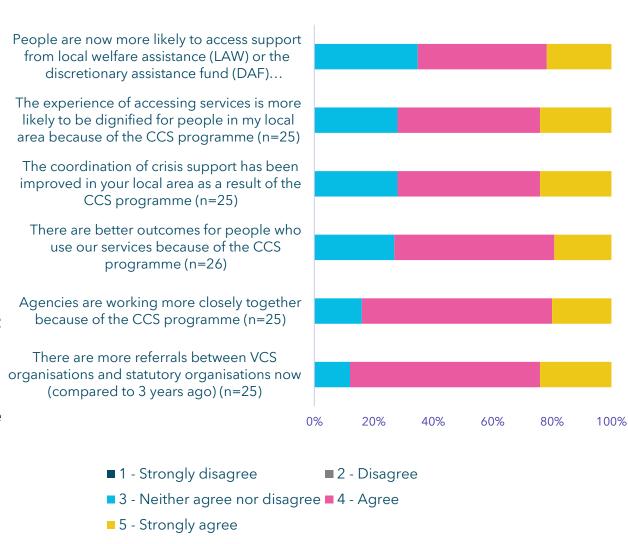
Distance travelled over the three year CCS Programme 1/2

Thirty-two (32) participants including organisations in the four pilot sites who have encountered the Programme responded to our year 3 survey. Where data is available for years 1 and/or 2, we have looked for general trends in changes over time. This data, triangulated with qualitative data from consultation with stakeholders in the pilot sites tells us the following:

CCS Programme has contributed to increased referrals and some evidence of improved coordination

- Most agree/strongly agree that there are more referrals between VCS and statutory organisations now compared with three years ago (69%)
- Most agree/strongly agree that agencies are **working more closely together** because of the CCS Programme (66%).
- Most agree/strongly agree that there are **better outcomes for people** who use our services because of the CCS Programme (60%).
- Most agree/strongly agree that the **coordination of crisis support has been improved** in their local area as a result of the CCS Programme (56%).
- Most agree/strongly agree that accessing services is more likely to be a more **dignified experience** for people in local areas because of the CCS Programme (56%).
- Just under half agree or strongly agree that people are now more likely to access support from LWA or DAF (compared to 3 years ago, 47%)

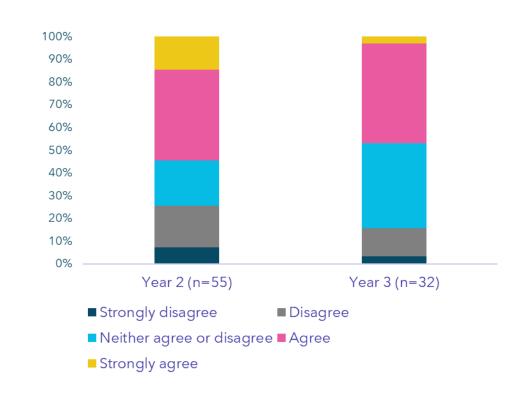
Figure 13: Extent to which pilot site agencies agree or disagree that CCS has contributed to outcomes



Distance travelled over the three year CCS Programme 2/2

- There has been little change reported in the **quality of communication** between organisations providing financial support in local areas between years 2 and 3 with around 50% describing communication as excellent or good in both years (n=32 for year 3; n=55 for year 2)
- There has been little change reported in the relationship between LA and VCS between years 2 and 3 of the Programme with similar numbers agreeing that there is a shared understanding of the challenges people face when accessing crisis support and stakeholders most commonly describing 'pockets of joint working' between the LA and VCS in both year 2 and year 3
- There has not been a significant change in the **reduction of barriers people face** when accessing crisis support reported
 amongst services in the pilot sites (with around 42% saying they
 can only address some of the barriers in both years 2 and 3)

Figure 14: Extent to which stakeholders agree that there is shared understanding between LA and VCS (source: Cloud Chamber Survey)



Collective learning from the four pilot sites 1/4

This sub section of the report summarises the common learning:

- The definition of coordination was intentionally underdefined at the beginning of the Programme so that pilot sites could identify the best solutions unique to their area. In all four areas, **a digital referral system** has been the preferred approach for pursuing coordination.
- Professionals who use the referral system state the benefits on their professional practice and the services they provide:
 - Improved their understanding and **awareness** of services available in their area.
 - Improved confidence in the **quality** of the services that agencies are able to refer onto with the referral system acting as a pseudo quality assurance system.
 - Improved **efficiency** due to the time saved when using the referral system (as opposed to 'scrapping around' to find suitable onward referral organisations).
 - Increased confidence that onwards referrals will be picked up effectively supported by the ability for agencies to turn off their referrals if they are at full capacity.
 - Improving **reach** to smaller, more local or more specialist organisations, which might not otherwise be known about, or which might not themselves be aware of services (including LWA/DAF).
 - Improving connection between organisations where people in crisis might be identified, including universal statutory services such as GP surgeries and local services such as community foodbanks, and organisations offering ongoing advice and support.
 - Delivering **warm referrals** rather than simply signposting. The referral system puts the onus on the receiving organisation to contact the

client, rather than expecting a client in distress or hardship to take the initiative in contacting another agency.

- All pilot sites demonstrate an optimism and intention to use data generated by the digital referral system to improve their **intelligence** of trends in crisis support. There is an intention to use this to support funding bids, identify need and put plans in place.
- **Capacity** is still a major challenge for some VCS organisations and cited as a barrier to learning how to use the system effectively. There is a risk that only larger, well resourced organisations will be well placed to use the system.
- In all four sites, the focus for coordination and associated referral systems has been via **advice networks**. This 'branding' of 'advice network' is not there to intentionally deter other types of services such as furniture provision, and food banks. The focus on advice networks does reinforce the point that the advice sector appeared to be the most willing to engage with a coordinated approach. This is due to a combination of the following:
 - Efforts were made by the CCS Programme to engage with foodbanks in all four sites but with limited take up
 - In Norfolk and Tower Hamlets, NCAN and THCAN pre-dated the CSS Programme and were receptive to investment. The RAN in Swansea was a structure being set up in tandem with CCS and had clear synergies with similar ambitions and priorities
 - The advice sector are somewhat more likely to refer to other services due to their nuanced understanding of different advice specialisms. Referrals are a core part of how advice professionals operate whereas other services do not necessarily view themselves as having a role to refer or had concerns about their ability to do so effectively.

Collective learning from the four pilot sites 2/4

- The importance of **high quality and ongoing training** to support professionals to use the referral system has been frequently mentioned by stakeholders in multiple sites. It is important to recognise that not everyone who uses the referral system is an advice specialist and some users would benefit from some training in the advice sector more generally in addition to the technical skills in using the app.
 - "I kept forgetting my password so I just gave up. It is a lot to remember. I need reminders of how to use it" VCS organisation, Oldham
 - "Schools are a bit scared. They don't feel skilled in making a referral. They email me or TCS to ask who to refer to. There is a training need. I'd like everyone to have a general training. [...] There is a lack of confidence to ask the right things. There is a need to try some need for trial and error" VCS organisation, Tower Hamlets
 - "I found [the training] was quite fast for me [...] I couldn't remember anything from the training. Therefore, I just thought it's best I just leave it alone" VCS organisation, Tower Hamlets
- There remains a **mixed picture of local authority engagement** in the development and onboarding onto referral systems. In some pilot sites, knowledge of the Programme and associated referral systems is patchy within local authorities. Survey data shows that roughly half of pilot site stakeholders agree that the LA and VCS organisations in their area have a shared understanding

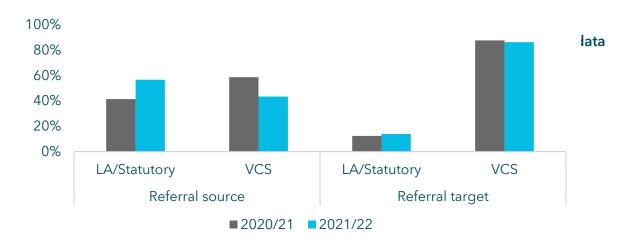
- of the challenges people face when they need to access support. This was the same in year 2 and year 3.
- In a couple of pilot sites there has been some fear amongst local authority stakeholders that VCS organisations may 'take work away' from the local authority - in one pilot site this has been resolved and referral system has contributed to improved trust between VCS and local authority organisations. Having local authorities using the system, contributes to legitimacy and is likely to attract VCS organisations to join the system too.
- In years 1 and 2 of the CCS Programme, funds were given to VCS organisations to **boost capacity**. This was especially welcomed during the peak of the Covid pandemic (2020) when demand for services was high. This also served to build visibility and trust in the CCS Programme. However, funding to boost organisational capacity has not necessarily translated into improved coordination practice.
- In three of the pilot sites, the CCS Programme took a key role in identifying a **lead agency** to manage the advice networks and associated digital referral system. Some were appointed via a competitive invitation to tender and others through informal conversations. Stakeholders in the pilot sites reflect that having an open and transparent process is more likely to generate strong leadership for the network and associated referral system.

Collective learning from the four pilot sites 3/4

 Where a referral system is in use, the VCS are receiving most referrals. In both Norfolk, the VCS are increasingly receiving a large proportion of referrals to LWA (although the exact number of awards made that otherwise would not have been made is not possible to calculate).

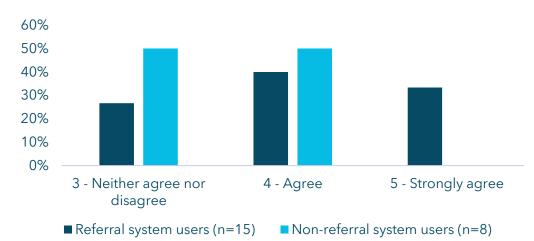
Figure 15: VCS receiving most referrals in Norfolk in 2021/22 (source: NCAN referral data)





- Network referral data in both Norfolk and Tower Hamlets suggests that digital referral systems have a role to play in increasing access.
- Overall, it is not clear if the CCS Programme has had much impact on increasing access to LWA. Just under half of survey respondents agree or strongly agree that people are now more likely to access support from LWA (compared to 3 years ago). In year 2, the evaluation found that knowledge of LWA in the English pilot sites remained low amongst VCS organisations. Conversely, quantitative evidence from survey respondents who used the THCAN and NCAN digital referral systems are more likely to strongly agree that access to LWA has increased (albeit a small sample size). While this suggests that the system has a role to play in increasing access, it is hard to generalise from a low sample.

Figure 17: Digital referral system users more likely to strongly agree that access to LWA has improved (source: Cloud Chamber)



Collective learning from the four pilot sites 4/4

Learning Coordinator reflections

In June 2022, the Programme's Learning Coordinator held reflective sessions with people from the four pilot sites who had been involved in the CCS Programme from the start. The collective learning from these sessions is summarised below.

1. Progress in working together locally

- All the sites felt proud of the progress they had made on a network and a referral tool - from wherever they started
- There were plenty of examples of individual organisations working together in different ways
- The programme's support for VCS organisations was felt to have raised their status in the local area, giving some organisations a "place at the table" for the first time
- All of the sites reported good/improved relationships between the VCS sector and the LA
- The sites had found it helpful to hear from Norfolk, and then Tower Hamlets, about how the referral system was working in practice

2. Conditions for local coordination

• The sites' reflections supported the key messages about coordination: willingness to work together, putting aside organisational priorities in favour of shared objectives.

- They were very positive about the referral system, but also clear that it was a tool to support the network, and underpinned good communication and organisational relationships
- They confirmed the view that coordination doesn't happen organically, it requires support, and needs long-term investment

3. Limitations and future concerns

The pilot site conversations highlighted the limitations to a focus on coordination: "There's no point in having a referral system if you don't fund the services to refer to". To use a cake metaphor - organising the slices better doesn't make the cake bigger, or magic new slices of cake into existence.

Looking ahead, there was concern about the future. Key fears were:

- Continued/increasing level of demand and complexity. The programme had not reduced the levels of crisis
- Pressures on staff and volunteers
- The CCS Programme funding coming to an end (another example of cyclical funding)

3. Impact beyond the four pilot sites

What we are learning

To what extent are stakeholders beyond the four pilot sites aware of CCS Programme learning? 1/2

About CCS and national systems change

Over the three years of CCS, the Programme has endeavoured to share the learning and advocate for systems change beyond the four pilot sites. This includes sharing with other localities and regions as well as with national decision makers including central government and strategic funders. This section summarises the extent and nature of learning beyond the four pilot sites and offers some reflection on what has worked and why.

1: The Programme has successfully engaged at multiple levels to raise awareness of CCS Programme learning

At a national government level, TCS has engaged with the Department for Work and Pensions (DWP), government advisors and Commons Select Committees regarding specific issues including free school meals and funding for the LWA. These calls for evidence have been informed by the CCS Programme. This has extended to more general discussions with policy groups such as the recent engagement with Bright Blue, an independent think tank, to discuss local needs in the pilot sites. These activities leverage not just the learning from the pilot sites, but also provide a means of sharing real-world examples of the scale and nature of local need and the implications of these for people in crisis. The Covid pandemic has meant that stakeholders at a national level have particularly valued these insights and they have enhanced the reputation and credibility of the Programme.

At a national stakeholder level, organisations such as the LGA (a

member of the Programme board) and CCS Programme funders have leveraged CCS insights in their own influencing activities as well as sharing information about the Programme in discussions with members.

At a Local Authority level, the network of learning partners has expanded beyond those initially named at the beginning of the Programme to include some neighbouring Authorities (such as Hackney and Newham in London, for example). This continues to provide opportunities to share specific examples of best practice and to consider some of the wider questions regarding how to coordinate support in a locality. This approach is also being used at a regional level including the Robust Safety Net initiative in London. There is aspiration for Welsh Government to pick up learning from Swansea given the momentum gained through Welsh Governments' Regional Advice Network (RAN) initiative.

- "We've had a good response to shared learning from London Councils. It has been rewarding to work with Newham and Camden. Good conversations with Hackney who have their own similar system - we identified 4 or 5 actionable things we can work on together. It has been very rewarding. Via these sessions I hope we will have a tangible effect" CCS project team member
- "It was news to them [London Boroughs via the London Councils) that they don't need to own it at LA and that a VCS org could lead a referral system. This had an impact for them. They realise it is not just the council who can lead it" CCS project team member

To what extent are stakeholders beyond the four pilot sites aware of CCS Programme learning? 2/2

Learning from the programme has also been shared with voluntary sector stakeholder networks, including the Access to Justice Network and Law Centres Network convened by the Access to Justice Foundation and a coalition of voluntary sector organisations working on issues relating to crisis and destitution, including Turn2Us, the Joseph Rowntree Foundation and StepChange. There have also been conversations with national organisations looking to encourage local affiliates to lead local coordination, such as Advice UK and the Trussell Trust's Pathfinder Programme. These conversations have focused on learning about the conditions for coordination, the value of a digital referral mechanism, and the need for coordination to be funded, rather than expecting it to happen organically.

2: This multi-audience approach avoids many of the weaknesses of traditional 'top-down' or 'bottom-up' strategies and has helped to maximise the reach of Programme learning

Stakeholders report that top-down approaches to improving co-ordination through National Government have traditionally not been successful due to the wide variation in local contexts. By contrast, a focus on bottom-up influencing requires understanding huge amounts of detail which would make the Programme difficult to engage with and be hugely resource intensive as a result.

The Children's Society is able to play the role of a convenor of expertise and catalyse more collaboration in the system to consider how structures and pathways can be improved at all levels. The fact that this expertise is based on practical issues and real-world challenges is valued by stakeholders.

 "There has been a shift in policy and MPs, civil servants etc. want to hear directly from people and the orgs working directly with people- having the grass roots connection" CCS Team member

3: However, a focus on operational and practical issues mean the bigger picture or policy asks are not always clear to some stakeholders

There have been some concerns during the Programme that the key lessons were extremely detailed and difficult to engage with. In this regard, the Programme Board has been helpful in encouraging the project team to report top-level learning in a clearer way. Although the level of engagement from Programme Board members has been mixed, the different perspectives brought to the table have been valuable in identifying the key messages to share with different audiences.

As a result, both the CCS team and Programme Board members felt that the lessons from the Programme had contributed to the discussion about coordination and wrap-around support and that this had shifted from being seen as a 'niche' part of the discussion to a more fundamental element of the wider debate about funding. Nevertheless, there continues to be a need to develop clearer policy asks based on an articulation of the benefits of improved coordination mechanisms:

- "If I'm a Chief Exec in a local authority, why should I do this? if I'm a charity why should I do this? Those are the key questions." CCS Programme Board Member
- "The problem isn't coordination the problem is poverty. Coordination is one means of supporting it." CCS Team Member

What impact has the Programme played in influencing change and what are the implications of this for TCS influencing approach? 1/2

1: It is challenging to attribute change directly to the Programme given the context of the Covid pandemic

The CCS Programme has enhanced the evidence base about experiences of financial crisis. It has also supported The Children's Society's ability to influence organisations supporting individuals at a time of national crisis.

- "It's difficult to disentangle the increase [in LWA] from the uptick in funding because of covid spending. However, it has really helped get a shared discussion about what these things actually mean. It has allowed assumptions to be tested and look at what was happening really. That's been the most beneficial aspect of it." CCS Programme Board Member
- "From a council perspective it has moved the discussion onwards in terms of bringing together organisations around common objectives" CCS Programme Board Member

From our interviews, it is clear that the Programme has led to more conversations happening among a wide variety of stakeholders and this has in turn contributed to more sharing of best-practice locally and nationally as well as informing policy asks regarding the level of funding. Nevertheless, it is important to stress that while this has been very positive, the original aims of the Programme were to create sustainable changes in terms of creating effective and efficient mechanisms through which more joined-up support can be provided by relevant organisations within a locality. The lack of stability during

the period of the Programme due to Covid-19, coupled with the current focus on the cost-of-living crisis, have made it challenging to get stakeholders to take a long-term perspective, particularly regarding addressing the underlying causes of crisis.

2: There are two underlying issues that act as a potential barrier to delivering wider impact through the Programme

Firstly, the stakeholders we interviewed highlighted the fact that discussions at a national level are largely focused on amounts of money rather than on how money should be allocated and potentially ring-fenced for coordination mechanisms. This was felt to be a major hurdle in terms of creating the conditions for sustainable change (with a focus on coordination).

Secondly, at a local level, there are considerable differences between the priority placed on tackling poverty and the resources allocated to it by different local authorities. It is felt that having more robust data sets from the Programme may help to demonstrate the financial and capacity benefits from investing in coordination mechanisms and that this will in turn lead to structural and pathway changes at a local area over the longer-term. This is in addition to sharing best practice and quick wins among those authorities that have already prioritised tackling poverty issues.

What impact has the Programme played in influencing change and what are the implications of this for TCS influencing approach? 2/2

3: There is potential to reframe the discussions around how to turn immediate crisis support into preventative crisis support and the potential cost benefits of that approach

Despite the challenges posed by the Covid and the cost-of-living crises, stakeholders we spoke felt this was creating a stronger appetite to move away from 'firefighting' towards creating sustainable change through improved pathways and structures. Capacity and financial constraints are reinforcing the need for greater collaboration in the four pilot sites as organisations recognise they can not do it alone. Moreover, there is desire among some stakeholders to create more stable conditions through which the routes into poverty can start to be addressed and the routes out of poverty improved. Building on these messages to create the conditions for change over the longer-term is likely to be well received by influencing partners.

• "Having a tool [digital referral system] that we've trialled really works for national policy makers – policy makers want to know the solution and the cost" CCS Programme team member

4: TCS is a well-respected and credible influencer for improved coordination to help reduce and alleviate poverty

• "TCS bring rigour and respect for what they do. If government were going to fund it [coordinated approaches], TCS would be involved and are respected." CCS Programme Board Member

The CCS programme has linked closely with the work of the child

poverty policy team and we received consistent feedback from Programme board members that the evidence from CCS has been well received and that the resultant discussions with stakeholders have been very positive. One of the reasons for this is the pragmatic nature of the recommendations,

 "There are many who would say this is pointless, [we] need proper funding; not make do and mend. This Programme shows that it's not "either or" but "yes and.." - that you need both more funding and more joined up support at a local level." CCS Programme Board Member

Where there was a sense that other influencing organisations in this space have very specific policy asks in this area, TCS was felt to be well positioned to adopt a more balanced approach that was consistent with their strategic objectives regarding child poverty. Moreover, the broad nature of issues raised regarding coordination and support meant that people valued the convening, or 'honest broker' role played by TCS in getting different voices heard amongst national decision makers including Central Government.

4. Conclusions and recommendations

Concluding comments 1/3

There are several ways in which support services can improve coordination. Within the CCS Programme, a strong network of agencies with a shared vision has been the core of improved coordination across the four pilot sites.

When such a network is in place and functioning, it is possible to build upon it to focus on improving coordination to provide more support to people in crisis. In all four pilot sites, a digital referral system has been identified as a way to achieve coordination, but each is at a different stage of their journey in terms of how established the local referral system is.

Coordination has multiple benefits including:

- ✓ People are more likely to receive high quality support in a timely way with a focus on their overall needs rather than referring to multiple different services and providers.
- ✓ Advice professionals are able to work efficiently, saving them time
- ✓ Transparency and accountability between organisations is improved

In the CCS Programme, improved coordination went some way towards:

- ✓ Supporting uptake of LWA / DAF
- ✓ Improving trust between VCS organisations and statutory agencies

✓ Improving data about community needs to inform planning.

There are three conditions for effective coordination including:

- A network of agencies or services who:
 - share a desire to achieve better outcomes collaboratively
 - have a shared understanding of the local environment in which agencies are operating
 - are motivated to act together "willing to leave your ego at the door"
 - have a history of joined-up working
- 2. An underpinning '**mechanism**' that facilitates robust referrals across agencies. In the four pilot sites, the digital referral system has been the selected mechanism.
- 3. Capacity and legitimacy to **lead** the network, administer the referral mechanism and support collaboration (including bridging between VCS and LA). A proactive mindset is important.

Overleaf we summarise the extent to which the outcomes for year 3 have been achieved and some additional conclusions around what makes a successful digital referral system.

Concluding comments 2/3

Outcomes type	Outcome	Evidence summary	Impact confidenc e level
Year 3 - pilot sites	Greater number of people are referred and supported longer term (rather than signposted)	Most agree/strongly agree that there are more referrals between VCS and statutory organisations now compared with three years ago (69%) corroborated by interviews with delivery partners in 4 pilot sites	
	Increase in referrals between VCS and LA including to and from LWA and DAF to improve the experience for people accessing support	Just under half agree or strongly agree that people are now more likely to access support from LWA or DAF (compared to 3 years ago, 47%) Most agree/strongly agree that there are more referrals between VCS and statutory organisations now compared with three years ago (69%)	Emerging impact
	Improved sustainability (resources and capacity) for the network and referral system	One pilot site (Norfolk) has secured long term funding for their system as a direct result of CCS support. Three other sites (Tower Hamlets, Oldham and Swansea) have had some indications that funding may be available in the future.	Emerging impact
Year 3 - national	Improved awareness of why coordination matters amongst national decision makers / influencers	The CCS Programme has multiple examples of influencing stakeholders beyond the four pilot sites. Some of this has been specific to why coordination matters (and some has been supporting calls for evidence on other issues)	Emerging impact
	Improved coordination practice	Limited evidence to suggest that agencies beyond the four pilot sites have made changes as a direct result of this Programme although conversations and influencing is still ongoing	Limited impact
Longer term impacts from the Programme	People in financial hardship in four pilot areas are more likely to get effective and joined up support	Most agree/strongly agree that there are better outcomes for people who use our services because of the CCS Programme (60%).	Strong impact
	People in financial hardship in England and Wales are more likely to get effective and joined up support	Limited evidence available	Limited impact
	Decision makers / influencers are more likely to invest and support in coordinated approaches	Limited evidence available	Limited impact

Concluding comments 3/3

Digital referral systems are one way to contribute to improved coordination and work best when built on strong foundations

Evidence from the CCS Programme suggests that digital referral systems work best when there is:

- A strong network and track record of agencies working together
- Capacity amongst VCS organisations to take the time to learn how to use the new system and dovetail it with any existing systems they may have. This includes a mindset that a new digital referral system will help make their work more efficient and effective
- Trust and buy-in from a range of organisation types including some statutory and/or commissioned services
- Digital literacy amongst professionals and volunteers who are likely to use the system and support where digital literacy is lacking
- Ongoing support and training for the professionals and volunteers who use the system
- Investment to ensure that the system will be sustainable in the long-term
- An organisation with capacity to lead the system, which includes promotion of the system and effective training / onboarding

In addition to the digital referral system, the CCS Programme has supported organisations to increase access to their services. This was especially notable in years 1 and 2 of the Programme in response to the Covid pandemic and served as a way to:

- a) Build credibility of the CCS Programme locally, and
- b) Support organisations to engage with the Programme through added capacity. Examples include funding access to food and supporting schools to access advice from Citizens Advice in Tower Hamlets.

The Programme has also been credited with boosting visibility and awareness of smaller VCS organisations and their services.

In conclusion, organisations based in pilot sites are confidently reporting an increase in referrals and more joint working. It is likely that this is leading to better outcomes for people accessing services and a more dignified experience of receiving support. There is a mixed response about the extent to which people are more likely to access LWA and/or DAF, although referral system users appear more likely to recognise a link.

Recommendations

Recommendations are written for the attention of the Programme Board including The Children's Society and partner organisations. Recommendations may also inform the design of any subsequent or successor Programmes, by TCS or other partners.

- For coordination of services to be effective, there needs to be preconditions in place including strong networks, strong leadership and engaged local authorities. Getting to this point of 'readiness' can take time and resource. Communications around the CCS Programme and any subsequent Programmes should build in time and resource for 'coordination readiness' work.
- 2. National programmes do have an important role to play in local initiatives as providers of credible expertise and a critical friend. Stakeholders in the pilots sites have consistently valued the role of TCS and partners in providing a 'fresh pair of eyes', additional capacity to their local areas and the ability to share good practice between sites. Programme Board partners should be aware that there is a role to play for such an intervention and it is welcomed in different localities.
- 3. The CCS team have been sharing learning with boroughs neighbouring to Tower Hamlets including Newham and Hackney. The Programme is also showing leadership in Greater Manchester, Greater London and parts of Wales. For any subsequent Programmes of a similar nature, it is recommended that learning partners are neighbouring to pilot sites as it is more likely there will be room to learn and develop together.
- 4. The Programme distributed funds to VCS organisations in the local pilot sites. The Programme took a coproduction approach to distributing this funding, allowing the CCS team to encourage applications where there were strong opportunities for organisations to benefit from receipt of funds. In some cases, the CCS team took a

- lead role in identifying opportunities. This approach also minimised a sense of competition and bureaucracy for VCS organisations in the sites. However, it is possible that some decisions about funding allocation especially with regards to leading of digital referral systems lacked transparency and may have benefited from a more open process. It is recommended that subsequent Programmes carefully consider the pros and cons of a coproduction approach to allocating funding.
- for the future. The Programme distributed funding to some VCS organisations to boost capacity, enhance access to services and/or ensure organisational survival. While this was worthy and beneficial, this has not always translated into outcomes for improved coordination. It is recommended that any subsequent Programmes recognise that while funding capacity and access to services is important, there should also be a commitment to working towards improved coordination in support of user outcomes. This learning should also be shared with other funders via the Programme Board.
- 6. Programme Board members have a role to play in advocating for coordination. There are opportunities for Programme Board members to spread the learning from CCS to other local authority areas. The LGA is well placed to continue to disseminate learning beyond the three years of CCS, contributing to a Programme legacy. It is recommended that Programme Board members are integrated into any communications strategies for the final months of the Programme and are encouraged to take opportunities to spread the learning from the CCS programme (beyond the four pilot sites).

Appendix - additional data

Summary of KPI data

KPI	Target (for end of	Quasi-	Year 1	Year 2	Year 3
1. N	Programme, year 3)	baseline	A	Λ.σ.σ.σ.σ. 20 ΓΓ.4	A 27 1 4 7
1: Numbers receiving support through LWA scheme increases	LWA recipients increase by 2,000 above baseline in Year 3 across the four pilot areas.	Number of awards for three pilot areas in 2018/19 = 8,510	Approx. 21,411 support awards in 3 pilot sites (excluding Norfolk)	Approx. 20,554 awards in 3 pilot sites (excludes Oldham who have not provided their data)	Approx. 27,147 awards across four pilot sites
2: Numbers receiving support through other crisis support schemes increase	Crisis support received through other sources increases by 1,600 above baseline in Year 3.	Number of awards made in 2018/9 = 2,821	384 - underreported in data provided from grant providers	94 - underreported in data provided from grant providers	236 onward referrals made by 8 funded organisations/proje cts
3: Numbers receiving referrals to other support services at point of crisis increases	360 successful referrals across the four pilots made through crisis support network in Year 3	Unknown	31 - underreported in monitoring data	300+ based on monitoring data provided	1,300+ based on monitoring data provided
4: Numbers requiring repeat crisis support decreases	Of those successfully referred for ongoing support, follow up evaluation finds increases in financial stability and resilience.	Unknown	Unknown	Unknown	Unknown
5: Widespread engagement of organisations is secured for a local crisis support network	At least 20 organisations engaged in each area in delivery of coordinated crisis support provision (80 across four areas).	Zero (0) organisations involved prior to CCS Programme launch	121 organisations engaged in Year 1, and over 20 in every area of the Programme (four areas)	In Oldham alone 50 members are part of the OCAN network. In Tower Hamlets 14 are on the THCAN referral system. In Norfolk 126 have ever been on the NCAN referral system (between 2017 and 2021) although cannot be attributed to the CCS Programme as it existed before the Programme launched	139 NCAN Norfolk, 30 TCAN, 7 OCAN = 176 registered network users. Not widespread in each area, only Norfolk. Wider engagement likely to be higher for each area.

Five Key Performance Indicators (KPIs) were set for the Programme at Programme-proposal stage. These are shown in the table opposite, and focus on receipt of and referrals into crisis support, as well as organisational engagement.

As explained in our evaluation of years 1 and 2, the KPIs are not necessarily the most useful metric to assess the contribution of the CCS Programme but are included here for completeness. This is partly due to:

- Limited availability of reliable data
- Burden on VCS organisations to collect and share the data
- Not reflecting the evolved outcomes of the Programme which focus on establishing a robust and sustainably funded referral system
- Not attributable to the CCS Programme (in the case of KPI 1, 2, 3 in particular)
- Programme delivery especially due to Covid-19 which has contributed to an increase in applications and awards for LWA and other grants
- Differing / inconsistent definitions and methods of identifying "crisis" amongst delivery partners
- Increase to LWA due to external factors such as Covid pandemic and cost of living increase in 2022

The Children's Society is proud to be working in partnership with the following organisations to deliver the Coordinated Community Support Programme



















With thanks to Programme Partners and Funders