

Solent Jobs Programme Evaluation

Final report

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Learning and Work Institute

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Executive Summary

This report presents the findings from the mixed method evaluation of the Solent Jobs Programme (SJP), which was part of the Southampton and Portsmouth City Deal agreement with national government.

The programme was funded by the European Social Fund (50 per cent) and City Deal/local matched funds. The programme delivery started in Summer 2016. The programme ended in December 2018.

The programme aimed to provide employment related support to at least 1,200 long term workless adults with disabilities and health conditions across the Solent Local Enterprise Partnership area. People in a range of different benefit groups were eligible for support, alongside lone parents.

As well as supporting participants into work, it was intended to improve participants' wellbeing and their self-efficacy where possible. The programme comprised:

- intensive case management, skills and employability support;
- mental and physical health support, and;
- employment support and a subsidised job (known as a Transitional Employment Programme or TEP, which is based on an Intermediate Labour Market model).

Overall, 1153 people registered to take part in SJP. Participants experienced a range of barriers to employment, which often interacted with one another. This included long-term unemployment, a lack of qualifications, multiple health conditions and living in a workless household.

Referrals and engagement

94 per cent of referrals were from Jobcentre Plus. Referrals increased as the programme gained momentum and referral staff became more familiar with the programme. Activities that were felt to increase referrals included SJP staff being based in Jobcentre Plus, gaining senior-staff buy-in and regular communication.

The proportion of participants in different benefit groups changed slightly during the delivery period. It is likely that the main reason for this was the introduction of Universal Credit, which replaced several legacy benefits. There were efforts increase the number of ESA claimants being referred, as they were a key target

group. Successful methods included introducing mandatory interviews for this group, limiting referrals to ESA only and involving health partners and Work Programme providers.

42.5 per cent of those referred registered with the programme across the three providers. Wheatsheaf Trust supported the most participants as they covered the largest geographical footprint.

Research findings showed that engagement was enabled by positive relationships with the referral organisation, familial support and being aware of the unique elements of the programme. Potential participants also liked the voluntary nature of the programme. The most common suggestion to increase engagement was to advertise the programme more widely, using a range of methods.

Factors which helped to sustain engagement included participants having a good initial impression of their adviser, informal, person-centred discussion, participants being clear on how the programme could help them and staff setting goals which were realistic and therefore achievable.

Partnership working and service integration

SJP aimed to promote partnership working and service integration in the Solent area, especially between employment and health services. Where partnerships were established this enabled programme participants to access a range of support, based on their needs. Furthermore, the flexible delivery model enabled programme leads to introduce provision based on identified support needs.

However, referrals from wider organisations were limited which prevented further engagement from residents with disabilities and health conditions. Staff turnover, the programme length and data sharing issues were additional barriers identified which prevented further integration.

Participant views and experiences of SJP

Employment support (such as improving participants CVs, attendance at Job Clubs and completing mock interviews) was the most common type of support recorded, followed by health and wellbeing support. Participants were grateful for the range of internal and external support available. Participants spoke highly of the programme when they had received sequential support, that addressed pressing needs first, and when they had a good relationship with their adviser who they found easy to contact.

Participants were less positive about their experiences of the support when they encountered issues once they entered the workplace; when they had specific employment aspirations and their adviser struggled to source relevant opportunities; when they felt as if they received generic support, and; when the support ended, and they were unclear why.

Employer engagement

The delivery of employer engagement differed to what was initially envisaged because it was more driven by individual preferences rather than generic activity. Strong links with local employers was one of the most important elements of the programme because this led to a range of opportunities for participants.

Successful employer engagement resulted from having a dedicated business engagement manager who was familiar with the local labour market and could build trusting relationships with employers. Case studies and good news stories helped to promote the programme, and when employers discussed their experiences with other organisations this helped to influence engagement.

Outcomes

Intermediate outcomes reported by participants included increased confidence and motivation, recognition of their transferable skills, gaining new skills, improving their health and wellbeing and feeling more ready to enter employment.

Just over ten per cent of participants registered to take part in a work taster. Of these participants, ten per cent left because they found employment and 78.5 per cent completed the work taster.

Just over a fifth of participants registered to take part in a TEP, 39 per cent of whom left after finding work and 43 per cent of whom completed the placement. The TEP was viewed as key to engagement and outcomes being achieved. This was because it changed participants views about work, increased their confidence, and allowed them to make the transition back to employment in a supportive environment.

28 per cent of participants moved into open employment and 17.5 per cent of participants sustained their role for at least 26 weeks. This job entry rate is higher than other comparable programmes. The average time taken to move into employment was five months. Those with a severe mental illness had the highest employment rate compared to other conditions, and there was little difference

between the proportion of employment outcomes of those over 50 years old and those under 50: demonstrating that the programme was able to overcome barriers to employment.

Barriers that prevented outcomes included changes to advisers and the frequency of contact, participants health, employer practices, transport issues and the length of the programme. Universal Credit was felt to have impacted delivery, unlike the Work and Health programme because this was introduced more recently.

Impact assessment and Cost Benefit Analysis (CBA)

The impact assessment involved matching the programme Management Information (MI) against data from the Labour Force Survey on the basis of nine variables, including gender, primary and secondary health conditions and length of time out of work.¹ We then used multivariate regression analysis to double check that the estimated treatment effect (impact of participation in SJP) was not being biased by the influence of other factors.

The different models estimated all indicated that SJP had a positive and statistically significant impact on job entry within 12 months for its participants. The findings suggest a treatment effect of between 7.0 and 8.7 percentage points on the job entry rate.

The Cost Benefit analysis considered intervention costs (e.g. referral costs, programme delivery costs, administration costs and costs falling on employers or participants); the economic benefits in terms of additional economic output of people being in employment who otherwise would not have been; non-employment benefits resulting from participants being in work (for example health improvements or reductions in criminal activity), and; redistribution benefits as SJP participants can be assumed to be generally living in low income households.

The results of the CBA show that for every £1 of costs, the programme provided an estimated £1.76 of benefits. When sensitivity analyses were undertaken all the results for the benefit to cost ratios stayed above one and therefore, in all scenarios the benefits of the programme exceed its costs.

¹ Our preferred approach would have been to use DWP administrative data for both the SJP participants and the counterfactual groups against which they are compared but we not able to gain access to this data.

Recommendations

Based on the research findings we have made the following recommendations:

Referrals and engagement

- Engaging ESA claimants in new provision through Jobcentre Plus cannot solely be done within the DWP business as usual regime due to the limited time work coaches spend with this group of claimants.
- Linked to this, work coaches need to be adequately briefed on the programme so that they feel confident to make referrals. Success stories can help them, and their caseload see the benefits of provision.
- To raise awareness, programmes should be advertised widely, in a variety of locations. Marketing should be tailored towards the target group(s) to make it seem relevant. Marketing should use online and offline methods as potential participants may not have access to the internet or the digital skills to utilise it effectively. The unique elements of the programme should also be highlighted as this will help to differentiate the programme from other provision.
- Mandatory initial interviews work well to increase engagement in a programme because it gives programme staff the opportunity to sell the programme to those who are unconvinced when they are referred.

Delivery of support

- There are benefits of devolved employment programmes that can tailor provision to meet the needs of the local labour market and population.
- Local authorities are potentially well placed to co-ordinate and directly deliver programmes due to their wide networks and local accountability.
- Similarly, there are benefits of involving local delivery organisations and hiring staff with local knowledge.
- Partnership working with local services can play an important role in ensuring that a range of support is available and co-location is beneficial to raise awareness of a programme and create referral pathways and warm handovers.
- Use of the TEP in employment programmes for people with disabilities and health conditions should be considered on future programmes.

- There is merit in including employer engagement roles when designing staff structures as this requires a different skill set to frontline delivery staff and enables those staff to focus on supporting their caseload.

Programme evaluation

- Methods of collecting programme data should be considered during the design stage to enable progress to be monitored, detailed analysis to be conducted and lessons to be learnt about delivery.
- Data sharing is a key issue, which is preventing more robust approaches being taken to assess impact. This needs to be resolved with government departments.

1. Introduction

The Solent Jobs Programme (SJP) was part of the Southampton and Portsmouth City Deal agreement with national government. The programme was funded by the European Social Fund (50 per cent) and City Deal/local matched funds. The programme delivery in the two cities began in June 2016, before being rolled out to the wider Solent areas in August 2016. The programme ended in December 2018.

The programme aimed to provide employment related support to at least 1,200 long term workless adults with disabilities and health conditions across the Solent Local Enterprise Partnership (LEP) area.² As well as supporting participants into work, it was intended to improve participants' wellbeing and their self-efficacy where possible. The programme comprised:

- intensive case management, skills and employability support;
- mental and physical health support, and;
- employment support and a subsidised job (known as a Transitional Employment Programme or TEP, which is based on an Intermediate Labour Market model).³

It aimed to promote partnership working and service integration in the Solent area, especially between employment and health services. It was focused on addressing skills shortages in the Solent area and moving clients into the business growth sectors identified by the Solent LEP, where permanent jobs were expected to be more likely. It also aligned with the government's Work and Health agenda, and commitment to reducing the disability employment gap.

The programme was developed to meet the needs of Employment Support Allowance (ESA) claimants, as success rates for this group had been very low in previous programmes, and to test new approaches to supporting people with disabilities and health conditions into work. Such efforts were hoped to also reduce benefits dependency and demand on public services and improve the local labour

² The Solent Jobs Programme is particularly targeted at areas of deprivation including Southampton, (and Totton and parishes in the Waterside), Portsmouth and Havant, Gosport and the Isle of Wight.

³ TEPs provide paid work on a temporary contract combined with job search activities to help participants move into open employment. They aim to give those who are most removed from the labour market a bridge back to the world of work by improving participants' general employability.

market, whilst making the case for sustained local funding in the future by demonstrating the effectiveness of devolved programmes.

Learning and Work (L&W) has been commissioned to conduct the evaluation of the programme, comprising assessments both of its impact and implementation. Research conducted has included several waves of qualitative research with participants, staff, other partners and stakeholders, analysis of programme management information and an impact assessment.

This is the final programme evaluation report, which builds on the initial and interim findings. The initial report provided a detailed description of the programme and the case for reform, and included a summary of key delivery lessons, building on an assessment of the programme's early implementation and qualitative research with stakeholders, staff and participants.

The interim report explored participant, staff and stakeholder views and experiences of the programme to consider what was working well and areas for improvement. It also demonstrated programme outcomes between June 2016 and December 2017 and explored enablers and barriers to such outcomes being achieved.

This final report assesses the additional impact of SJP by considering whether participants would have achieved employment outcomes in the absence of the programme. It also includes an assessment of the costs and economic benefits of the programme, both to Southampton City Council and to the wider public purse. Finally, it draws on the qualitative research to highlight learning about engaging and delivering support to people with disabilities health conditions and achieving sustained employment and wellbeing outcomes.

2. Implementation against objectives

Overall, the research found that:

- Partnerships with health and wellbeing services in the Solent area enabled programme participants to access a range of support, based on their needs.
- The flexible delivery model enabled programme leads to introduce provision based on identified support needs.
- Referrals from wider organisations were limited which prevented further engagement from residents with disabilities and health conditions. Staff turnover, the programme length and data sharing issues were additional barriers identified which prevented further integration.
- The TEP was viewed as key to engagement and outcomes being achieved. This was because it changed participants views about work, increased their confidence, and allowed them to make the transition back to employment in a supportive environment.
- The delivery of employer engagement differed to what was initially envisaged and became more tailored to individual job and career preferences rather than strategic activity.
- Strong links with local employers was one of the most important elements of the programme because this led to a range of opportunities for participants.
- Successful employer engagement resulted from having a dedicated business engagement manager who was familiar with the local labour market and could build trusting relationships with employers. Case studies and good news stories helped to promote the programme.

This chapter considers the main aims of the programme and views and experiences of delivery to demonstrate good practice and challenges in delivering local, integrated employment and wellbeing programmes. It draws on several waves of research, which included interviews with programme stakeholders, frontline staff and programme partners.

The Solent Jobs Programme had several key policy objectives. This included to:

- support people with disabilities and health conditions into employment, and where possible to improve participants' wellbeing and wider lives, to reduce benefits dependency and reliance on public services;
- to address skills shortages within the Solent area;
- to promote partnership working and service integration in the Solent area, especially between employment and health teams, and;
- to test a new approach to supporting this group, and to demonstrate the benefits of devolved initiatives.

Partnership working and service integration

As a result of the programme several interventions were introduced in the Solent area which aimed to test integrated working between employment services and health and care services locally. These were viewed as important in encouraging health professionals to consider employment and employment support as something that their patients could benefit from and work towards.

Furthermore, by developing partnerships with local health and wellbeing services, **Solent Jobs Programme (SJP) was able to offer specialist support to participants in varying circumstances, with a range of needs.** This meant that provision could be tailored. External provision was available to support individuals with mental health issues, learning difficulties and physical disabilities. There was also external support focused on promoting healthy lifestyles and the link between good health and good work.

The delivery model was flexible, so the programme leads could introduce additional services to support the programme in response to staff and participant feedback. For example, Occupational Health support was introduced during delivery following feedback from advisers that they struggled to provide suitable advice for those with complex and unfamiliar conditions.

Staff thereafter highlighted how useful it was to have occupation health support on a pre-employment programme. They believed that this led to better condition management amongst participants and raised awareness of the importance of general wellbeing.

Solent NHS Trust Occupational Health and Wellbeing Service

Solent NHS Trust Occupation Health and Wellbeing Service was contracted to provide clinical support to programme participants and to deliver wider education and training to programme staff. In total four training sessions were delivered which covered topics such as diagnosis and the impact of pain. The aims of the partnership were to give programme staff the confidence to address health barriers and to change participants attitudes about 'not being able to work'.

A duty nurse was available to support staff and conduct triage. Participants deemed suitable for the support were seen by a nurse within five days and by a doctor within two weeks. Direct support was provided to around 50 participants, and service targets were adjusted to reflect the complexity of need of individuals that were referred.

An interview respondent working for the service felt that lots of lessons had been learnt from involvement, about the complexity of need of participants and about systems and processes required to effectively provide support and report on this.

Another offer which staff found to be beneficial was the ability to refer participants with diagnosed or undiagnosed autism to complete an employment profiling tool. Advisers explained that this had a positive impact on both participants and employers because it helped both parties better understand how the individual in question would operate in the workplace.

Portsmouth University: Autism Profiling

The Autism Centre for Research on Employment (ACRE) at Portsmouth University received funding from Department for Health to develop an autism profiling tool. The Individual Employment Profile (IEP) offers a comprehensive assessment for people with Autism Spectrum Disorder who are in employment or actively seeking employment.

The IEP includes an employability profile which aims to support people to better understand which jobs could be right for them; and a cognitive profile which is intended to help employers better understand an individuals' strengths and weaknesses, and what reasonable adjustments could be beneficial in the workplace.

ACRE were keen to test this tool and get evidence of how it worked in practice, and Solent Jobs Programme gave them the opportunity to do this. Around 50 assessments were completed for SJP participants, and the contract was extended as there was an evident need for the service.

Employment advisers were invited to training events about the IEP to understand who could benefit from this and how to make referrals. Advisers made referrals by completing an online form. This was felt to be more cost effective and quicker than other methods and meant that the profile could be completed within one week. Questions covered areas such as mental health and learning disabilities and/or difficulties as well as communication skills, career interests and employability skills.

Feedback from advisers about the tool included that it was 'robust' and 'very valuable', when identifying opportunities with participants and speaking to employers about adjustments that may be needed. However, some participants found the questions and outputs hard to understand and their adviser had to explain things to them. Not all participants were willing to share the findings with employers, but some found it helpful to explain their condition to their manager.

The funding received from the SJP contract meant that ACRE was able to improve the assessment process and make the software more efficient. They will be launching the free IEP service in 2019.

Other health and wellbeing provision that staff felt improved the delivery model included a two-day nature therapy course which aimed to help develop mental, emotional and sensory resilience. This was popular amongst clients, and Solent Jobs participants who took part and could work, did achieve an employment outcome. Furthermore, the SAFE choices course was believed to help participants to look at their barriers to employment and wellbeing differently.

SAFE course

SAFE New Futures is a small mental health charity based in Southampton that provides support and training to long term unemployed people across the Solent area.

SAFE tailored a three-day course, based on Cognitive Behavioural Therapy (CBT) to fit with Solent Jobs Programme, focussing on mental health support.

SAFE initially piloted two courses and then ran 11 three-day courses with ten people in each. Participants who were referred, after their adviser had filled in a referral form, had an interview assessment to ensure that they met the criteria and to identify their needs and objectives for the course.

The course involved a range of 45-minute modules which aimed to unpick the reasons why people were struggling to move forward and to identify their strengths and transferable skills. It aimed to increase participants resilience and self-belief and because of the group setting, gave participants the chance to support one another.

Co-location of Solent Jobs staff in a GP surgery and pain clinic in Southampton was another example of good practice to integrate the programme into local health services. Having a presence in these organisations also meant that staff could ask questions about the programme and address any concerns, and referrals could include a warm handover.

The **strong partnership between Southampton and Portsmouth councils** was felt to have continued throughout the delivery of the programme, and there is now joint-working on skills provision, careers advice and post 16 participation.

However, **less progress was made in engaging local authority family services and housing teams** in the programme due to communication and difficulties and differing service priorities.

Furthermore, as explained in more detail in Chapter 3 below, **referrals from wider agencies were limited** throughout the delivery period. This prevented greater engagement from residents with health conditions and disabilities that were not engaging with Jobcentre Plus and further partnership working.

Other barriers which prevented further integration and greater number of referrals to partner organisations included:

- **Staff turnover:** because efforts to raise awareness and understanding of the support offer had to be repeated when there were staff changes at either the SJP providers or partner organisations.
- **The programme length:** embedding additional services and referral routes in the programme was recognised as time and resource intensive. Therefore, having a longer programme could have resulted in higher referrals, as familiarity of such options and ways of working increased.
- **Data sharing issues:** issues around sharing participant information and incompatible I.T. systems meant that it was sometimes difficult for partners to keep track of referrals made and participants progress. For Jobcentre Plus, data on individuals who engaged in the programme had to be hand-

delivered and inputted into their system manually. This proved to be resource intensive and time consuming.

Testing the Transitional Employment Programme approach

A key aim of SJP was to test new approaches to supporting the target group. When the programme was being designed, there was a steer from central government to test the Transitional Employment Programme (TEP) model because it was unique in the context of devolved programmes, and therefore could be compared to other approaches.

The TEP comprised a subsidised job for up to 25 hours per week paid at the National Living Wage for up to six months.⁴ The TEP was not available to those participants assessed as capable of entry to employment within 3-6 months, as it was felt that they did not need this additional support to succeed.

Overall, just over a fifth of participants registered to a TEP. The most common sectors were administration / business and office work and retail and customer service. Most participants who entered a TEP had been unemployed for over two years. 58 per cent of those who completed a TEP entered employment.

Delivery staff were very positive about the availability of the TEP offer on the programme. It helped set SJP apart from other local and national employment programmes, there was consensus that this was key to outcomes being achieved. One of the main reasons for this was that this was felt to change employer attitudes about hiring staff with disabilities or health conditions, and 'remove suspicion.' It provided an incentive for employers to engage with the programme and reduced the risk of making the transition to work for participants.

'It's just about getting employers on board really with it all and making them realise that it's giving somebody an opportunity. It's also giving them the opportunity to see somebody's skills without, you know, having to pay out themselves.' (Solent Jobs Adviser, Southampton)

A Business Engagement Manager was employed to work with employers and source jobs and placements. They used the experiences of the TEP to give potential employers real life examples to help them explain how the programme worked and the benefits of involvement.

⁴ Currently £8.21 for individuals over 25, £7.70 for those aged 21-24 and £6.15 for those between 18-20

'It gave me a tool to which I could use to 'sell' to the employer, especially if the employer was uncertain in the beginning.' (Business Engagement Manager)

As explained further in the outcomes chapter, **participants identified the TEP as key to changes in their views about work and increased confidence and motivation.** They explained that this had made the idea of employment less daunting because they realised that they could work and that it was possible to have positive experiences of the workplace.

The TEP also enabled participants to make the transition back to employment in a supportive environment. This was because advisers would negotiate terms and conditions, complete a risk assessment and sometimes attend interviews. They would also receive in-work support in the form of reviews and telephone catch ups to talk about their experiences and discuss issues. Thereafter participants felt that the TEP made them more employable as they had gained recent work experience.

'The TEP scheme that they've got is excellent. That's a really great idea because even if you aren't taken on by the employer you've then got that experience...one of the girls here, she ended up going to work in an estate agent and even if you don't get offered that position you've then got that beginner experience so you can approach somebody else and say, "I've done three months there..."' (Female, 51, wave two)

Staff believed that framing the TEP as a means to open employment rather than the final goal, helped to increase the likelihood of the TEP progressing into an employment opportunity. This was because it meant that participants were encouraged to continue job searching and record their development during their TEP. Advisers encouraged participants to keep their CV up to date and hoped that such actions would reduce the likelihood of unemployment when the TEP finished.

Findings about the TEP on SJP are consistent with wider evidence on these types of interventions which have proved effective from those who are further away from the labour market.

Employer engagement

SJP aimed to give local businesses access to a pipeline of talent, whom they might have not previously considered. It hoped to support local employers to address recruitment needs and to ultimately change attitudes about employing staff with disabilities and/or health conditions.

At the beginning of the programme there was concern that it would be the 'same old employers' who engaged with SJP and offered participants opportunities. Programme staff found it **easier to identify opportunities in certain sectors** such as Hospitality and Warehouse and Logistics, but more difficult to identify good quality admin roles, which were in demand. There was some feedback that employers had vacancies in highly skilled roles, which were not suitable for SJP participants.

SMEs were found to be easier to target because they often wanted to support local programmes and recruit from their local community. Involvement in the programme helped businesses to create a positive image, amongst staff and customers.

The delivery of employer engagement differed to what was initially envisaged. Rather than generic employer engagement, activity was **more driven by individual preferences**. The Business Engagement Manager would identify relevant businesses/ roles and try to broker opportunities based on participants circumstances and job interests.

Employers were identified in a range of ways. This included pooling contacts from other local programmes and employer engagement staff, asking participants for employers' details if they had identified potential opportunities and proactively searching for suitable local businesses and roles. Attendance at networking events, business forums and job fairs also helped to raise the profile of SJP amongst local businesses.

In total, 793 employers were contacted about SJP. As outlined in the interim report, staff and participants agreed that **strong links with local employers was one of the most important elements of the programme**. The employer links resulted in work experience or volunteering opportunities, TEPs and job opportunities, which helped to move participants closer to, or into, employment.

There were also examples of employers offering multiple opportunities to programme participants following a good experience, and of success stories being used to engage an organisation's additional business locations in the Solent area or their supply-chain.

An issue raised by employers who gave feedback related to the **suitability and attitude of participants** that were put forward for vacancies. This was because the suggested candidates were sometimes found to be uninterested and/ or

unable to cope with the demands of the role once they started. They therefore felt more should have been done to job match.

Factors which were identified as key to the success of employer engagement included:

- Having **dedicated business engagement staff** to identify opportunities. Where there were gaps in this support it increased the onus to advisers to engage employers, which they sometimes struggled with. This also took them away from supporting their caseload.
- **Becoming familiar with the local labour market**, for example by engaging with each council's economic development teams to become aware of local context, maintaining relationships with other local employment advisers and Jobcentre Plus staff and attending local business networking events.
- **Building trust and relationships with employers**, which was facilitated by regular and simple communication, following up on conversations with action and being realistic about what they could deliver.
- Getting **buy-in from HR staff**, because once this happened other teams and staff were 'on-board'. However, sometimes this was timely because when visiting organisations staff rarely encounter business managers and those who would make the final decision on whether to engage.
- Using employers who had engaged with the programme to discuss their experiences with other employers, as this '**business to business language**' helped to influence engagement.
- **Using case studies and 'good news stories'** to promote the programme.
- **Inviting employers to deliver employability sessions and recruit in provider's offices.**
- **Face to face, personalised engagement**, because advisers found it easier to explain the programme in person, when they had additional resources with them.

2. Who participated in Solent Jobs Programme?

Overall, findings in this chapter demonstrate that:

- People in a range of different benefit groups were eligible for support, alongside lone parents. The main eligibility criteria were that participants had to have a health condition and history of worklessness.
- The large majority of referrals (94 per cent) were from Jobcentre Plus. Referrals increased as the programme gained momentum and referral staff became more familiar with the programme. Activities that were felt to increase referrals included Solent Jobs staff being based in Jobcentre Plus, gaining senior-staff buy-in and regular communication.
- Lessons can also be learnt about engaging ESA claimants. Successful methods included introducing mandatory interviews for this group, limiting referrals to ESA claimants only and involving health partners and Work Programme providers.
- The proportion of participants in different benefit groups changed slightly during the delivery period. It is likely that the main reason for this was the introduction of Universal Credit, which replaced several legacy benefits.
- Participants experienced a range of barriers to employment, which often interacted with one another. This included a lack of qualifications, multiple health conditions and living in a workless household.

This chapter describes who was eligible for support, how participants were engaged in Solent Jobs Programme (SJP), the characteristics of participants and the barriers they faced, drawing on a range of management information and qualitative data.

Eligibility

Individuals who were eligible for SJP were either:

- Work Programme completers with a health marker/recognised health condition, and who left the programme without finding work.
- ESA work related activity group (WRAG) customers, with a history of worklessness (maximum of 13 weeks in work within the last 2 years).

- ESA support group customers who wish to return to work.
- Lone Parents with a health condition (maximum of 13 weeks in total in work out of the last 2 years).
- Jobseekers Allowance (JSA) claimants with a health condition (maximum of 13 weeks in total in work out of the last 2 years).
- Universal Credit (UC) claimants with a health condition (maximum of 13 weeks in total in work out of the last 2 years).

Changing the eligibility criteria to include UC claimants with a health conditions proved timely because programme leads had to establish who would be eligible in this new cohort, before getting DWP approval.

Engagement and referrals

Participation in the programme was voluntary to enable engagement and to focus resources on individuals who did want to enter long-term employment. However, in the first year of delivery, ESA claimants had mandatory interviews, to try and increase their engagement with the programme. This was initiated by a senior manager at Department for Work and Pensions (DWP) and stopped when Universal Credit was introduced.

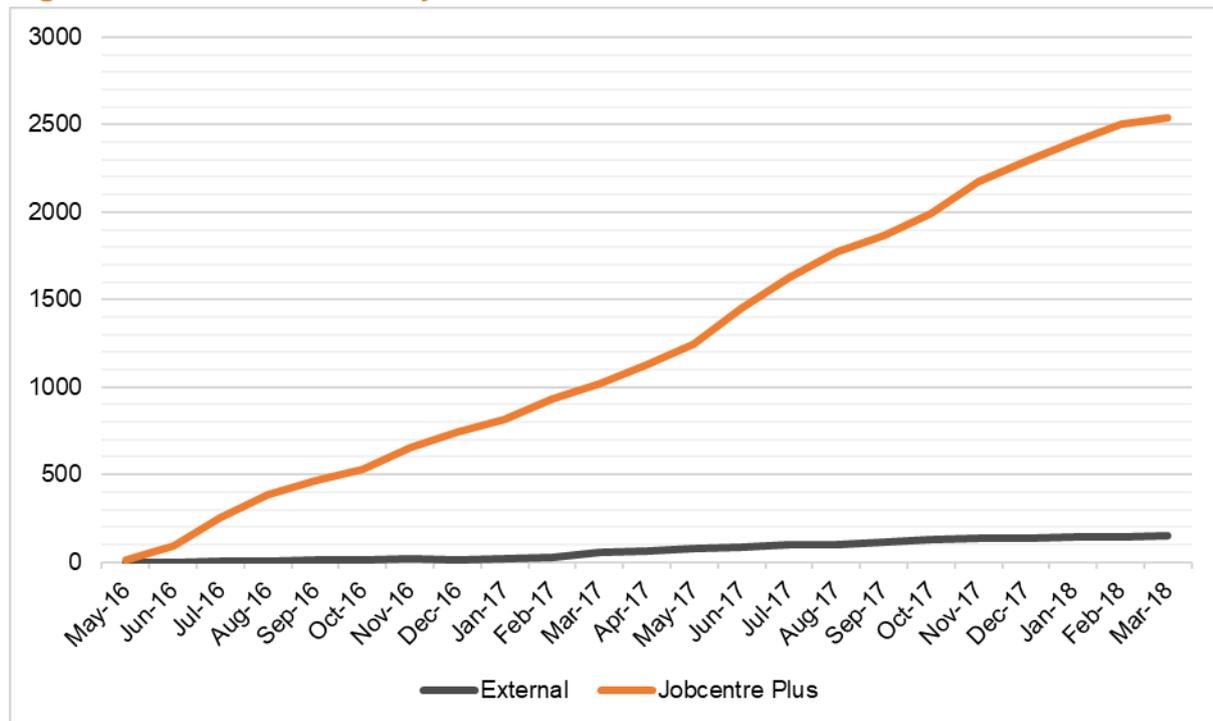
Referral procedures and protocols were established with Jobcentre Plus (JCP) offices across the Solent area because they were the main single organisation in contact with the client group. Referrals were part of the JCP Labour Market System (LMS) process. Wider agencies and Voluntary and Community Sector (VCS) organisations such as primary health teams could also refer to the programme. These referrals were then checked for eligibility by DWP.

However, throughout the delivery period, referrals from wider agencies and VCS organisations were limited. Reasons given for this, included that it took a long time to raise awareness of the programme and make such organisations aware that they could refer onto the programme; and that although it was sometimes possible to get manager's buy-in, this did not translate down to frontline staff who would be responsible for informing potential participants about the programme and making the referral.

As expected, the key referral route for the programme was via Jobcentre Plus. 94 per cent of referrals came from Jobcentre Plus. JCP referrals rose steadily since the start of the programme, with a total of 2539 unique referrals between June 2016 and December 2018. The number of unique referrals from other external

partners has remained low over this period, with a total of 151 such referrals to the programme between June 2016 and December 2018 (6 per cent).⁵ External partners included health and housing services such as Solent Mind and Portsmouth City Council Tenancy Support. Self-referrals were also included in this category. The highest number of referrals was in 2017, with 1665 (1544 from Jobcentre Plus and 121 external referrals). In 2016 there were 763 referrals and in 2018, there were 262 referrals.

Figure 3.1: Referral route by month of referral



The referral process was felt to have worked well but it was time-consuming. This was because of the time required to explain the programme, complete the necessary paperwork and register the referral on the Labour Market System.

Staff and stakeholders agreed that it was challenging to get referrals at the beginning of the programme. Reasons for this included that it was difficult to directly market the programme to claimants, which meant that there was a reliance on JCP staff to make referrals.

⁵ There were 2713 referrals in total, however there were 23 with no referral date. Only the referrals with recorded dates have been included in the analysis.

'Some [work coaches] bought into the programme straight away and others never made a referral' (Jobcentre Plus staff member)

It was felt that, like most programmes, it took time for SJP to build momentum locally and for work coaches to fully understand the programme and its benefits.

Several activities were identified as having helped to increase referrals. This included SJP staff having a presence in JCP offices and speaking to claimants about the programme at allocated timeslots. This was believed to work well because claimants could be booked in to find out more about the programme 'there and then'. Having one point of contact at a JCP office was also believed to work better than shared responsibility. However, JCP staff turnover sometimes meant that the individual who was driving referrals left their role.

Additional good practice included getting buy-in from senior staff who could cascade information down to work coaches and encourage referrals and having regular communication with JCP staff about delivery and claimants progress on the programme. For example, receiving monthly newsletters with good news stories was felt to be 'inspiring'.

However, JCP staff commented that they often found out about claimant's progress through speaking to them directly, rather than through the SJP providers. They felt that having more contact with providers could have helped to 'sell' the programme to work coaches.

Lastly, an issue with the referral process was DWP data sharing restrictions. This meant that sharing information on engagement and referrals created resource pressures for JCP staff as this was time intensive. Moreover, the introduction of UC was felt to have a negative impact on referrals. This was because it became a central focus for staff, which meant it took resource and attention away from SJP as UC 'took up their time.'

Engaging ESA WRAG claimants

At the beginning of delivery, over 90 per cent of referrals were JSA claimants, undermining the intention to support and learn what works for ESA claimants: a factor on which programme success depended. Reasons identified for this included that work coaches have better relationships with JSA claimants, as they see them more regularly compared to ESA claimants who they only see twice a year; and that appointments of 30 minutes were too short to fully explain the

programme and obtain the necessary information about the individual. Such issues were also felt to lead to inappropriate referrals.

'Unfortunately, the Jobcentre do have a very limited amount of time when they see their clients so, for them to refer to us, although they are referring, they're not always necessarily right for the programme.' (Solent Jobs adviser, Portsmouth)

As well as the strategies outlined above, efforts were made to actively involve health partners, link up with Work Programme providers to identify ESA claimants before they left the programme and contact housing associations and other service providers to try and identify eligible participants. Staff felt that it would have been beneficial if the programme was able to engage more Work Programme leavers – as SJP was viewed as a natural progression from this, but the programme struggled to get referrals from providers.

To increase the number of participants on ESA, limitations were placed on referrals, to ESA claimants only for six months. The mandatory interviews for ESA claimants were also felt to result in a better balance on the programme but did conflict with the intention for a voluntary model.

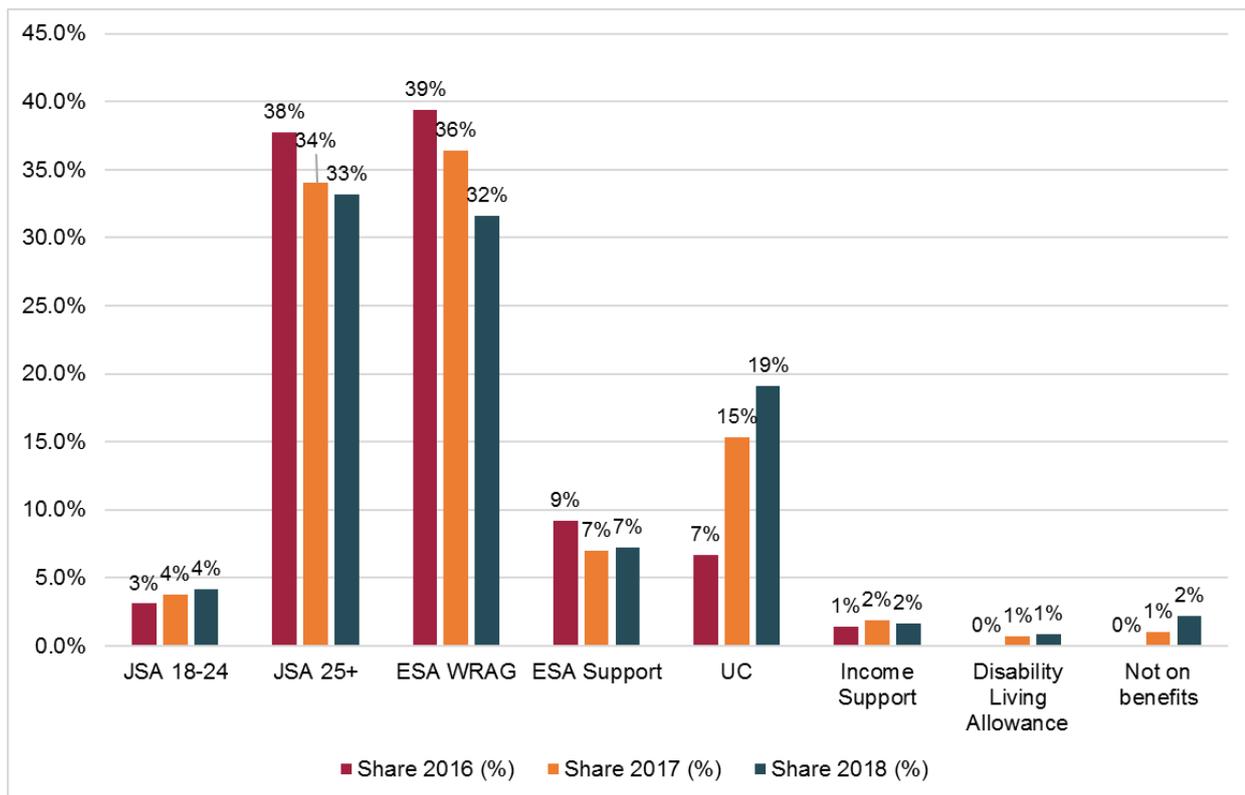
Additional guidance was also created for work coaches, supplemented by talks from programme leads. However, such efforts were hampered by ongoing communication issues between JCP managers and work coaches. There was also uncertainty about work coaches' confidence and ability to engage ESA claimants.

The proportion of participants in different benefit groups shifted over time. A key reason for this is likely to be the introduction of UC. UC was phased in to replace several legacy benefits, including income related JSA and ESA and Income Support during the delivery period.

- In 2016, nearly half of participants were claiming ESA (48 per cent), 41 per cent of participants were claiming JSA and 7 per cent of participants were claiming UC. 1 per cent of participants were claiming Income Support and the benefit status of 2.5 per cent of participants was unknown.
- In 2017, the most common benefit claimed amongst participants was ESA (43.4 per cent) and 37.8 per cent of participants were in receipt of JSA. The proportion of people claiming UC, more than doubled to 15 per cent of participants. 2 per cent of participants were claiming Income Support and 1 per cent of participants were claiming Disability Living Allowance (DLA). A further 1 per cent of participants were not claiming benefits.

- In 2018, again the largest proportion of participants were receiving ESA (38.5 per cent), closely followed by JSA (37.4 per cent). 19 per cent of participants were claiming UC. Just over 2 per cent of participants had no benefit status registered. Just under 2 percent of participants were claiming Income Support and less than 1 per cent of participants were registered as receiving DLA.

Figure 3.2: Comparison of the breakdown of benefit status of participants between 2016-2018



Participant characteristics

Management Information (MI) on 1153 participants on SJP was provided. This data was collected between June 2016 and December 2018. We have used this information to look at the characteristics of programme participants. Further tables and charts demonstrating the findings can be found in Annex A.

Participants experienced a range of barriers to employment, which often interacted with one another. For example, nearly half of participants reported multiple health

conditions, just over 20 per cent of participants had no formal qualifications and more than three quarters were living in a workless household.

Gender and Age

In the period between June 2016 and December 2018, the majority of programme participants were men (61.8 per cent), whilst 38.2 per cent of participants were women.

Nearly two-thirds of participants were aged 18-49, with over one-third of participants aged 50+. One respondent, who had entered work, thought that their age combined with their health conditions would be a significant barrier to them finding work.

'At the time I was thinking because I have an illness it's going to be so much harder – and age goes against you, I know it's not supposed to but I think it does – and I did think that it would be so much harder to get back into work given these stumbling blocks, health and age.' (Female, 51, wave three)

Another respondent felt that their age could benefit their chances of employment because they thought that some employers might value older people's experiences.

Ethnicity

Most participants were White British (94 per cent). This is not surprising, considering the largest population group in each of the programme areas considered themselves to be White British in the 2011 Census. 2 per cent were Mixed Ethnicity, 1 per cent were Asian and 0.8 per cent were Black. 2 per cent identified as Other. Information for two participants was not available, whilst two participants chose to withhold their ethnicity.

Highest level of qualification

The most common level of qualification for participants was level one or below (41 per cent of participants). Around one-fifth of participants had no formal qualifications (22 per cent) and 41 per cent had qualifications below level 2. This is a significant factor affecting participants' job search. Just under one quarter of participants had qualifications up to Level 2, whilst 8 per cent had qualifications up to Level 3. Not surprisingly, SJP participants were much less qualified than the general working age population of the Solent LEP area. For example, only five percent of the local working age population had no formal qualifications against 21

per cent of participants and 35 percent of the local population held qualifications at Level 4 and above against just five percent of participants⁶.

Table 3.1: Highest level of qualification of participants

Highest level of qualification	Participants (numbers)	Share %
No formal qualifications	238	20.6%
NVQ Level 1 / GCSEs D – G and below	477	41.4%
NVQ Level 2 / GCSEs A* - C	285	24.7%
NVQ Level 3 / 2 or more A levels	91	7.9%
QCF Level 4 / HNC and above	62	5.4%
Grand Total	1153	-

Lone-Parent Status

6.76 per cent of participants were a lone parent. For such individuals and parents more generally, considerations such as childcare or being close to their children’s nursery or school was a factor influencing their job search. Some participants also desired work on certain days and/or at certain times to fit around their childcare responsibilities, which also limited opportunities.

Household working status

Almost four fifths of participants were living in a workless household (80 per cent). This is significantly higher than the national average (14 per cent).⁷ Research shows that workless families face potential barriers to work such as poor physical

⁶ Figures for the general working age population in the Solent LEP area are an average of 2017 and 2018 and are taken from the Annual Population Survey.

⁷ Office for National Statistics (August 2019), *Working and workless households in the UK: April to June 2018*

and mental health and low qualifications⁸; and that children in workless households had poorer educational attainment.⁹

Table 3.2: Household working status of participants

Household working status	Participants (numbers)	Share %
No members of household in employment	919	79.7%
At least one member of household in employment	234	20.3%
Grand Total	1153	-

Ex-Offender Status

8.8 per cent of participants were registered as an ex-offender.

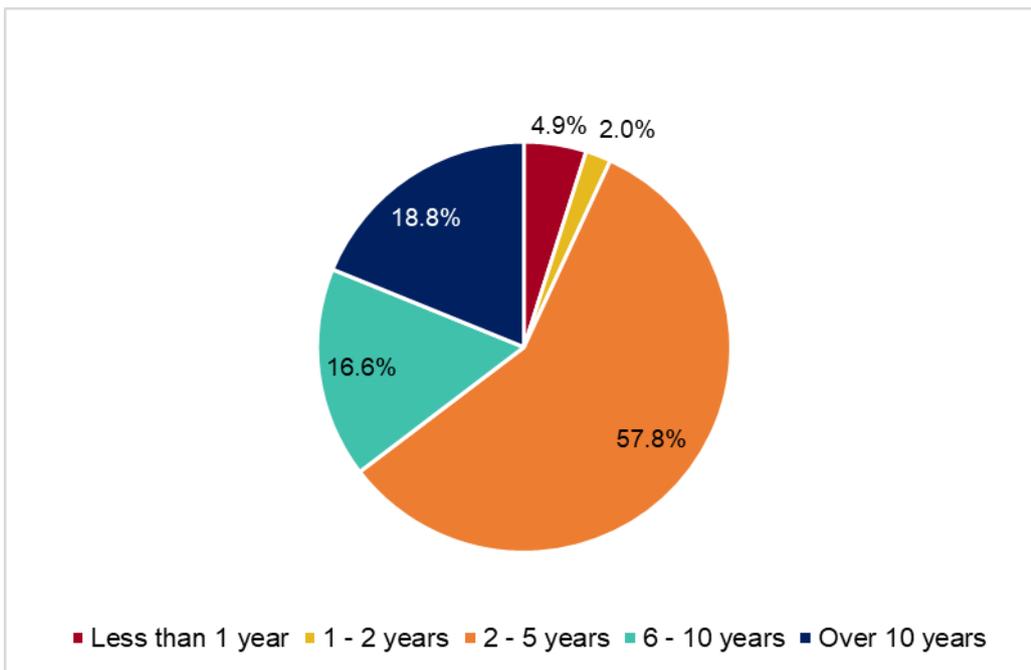
Length of unemployment

More than half of participants had been unemployed for between two and five years. 19 per cent had been unemployed for more than ten years and 17 per cent had been unemployed for between six and ten years. This demonstrates how far away most participants were from the labour market.

⁸ Department for Work and Pensions (April 2017), *Improving Lives: Helping Workless Families Analysis and Research Pack*

⁹ Schoon et al. (2012), *Intergenerational transmission of worklessness: Evidence from the Millennium Cohort Study and the Longitudinal Study of Young People in England: Research Report*, Department for Education.

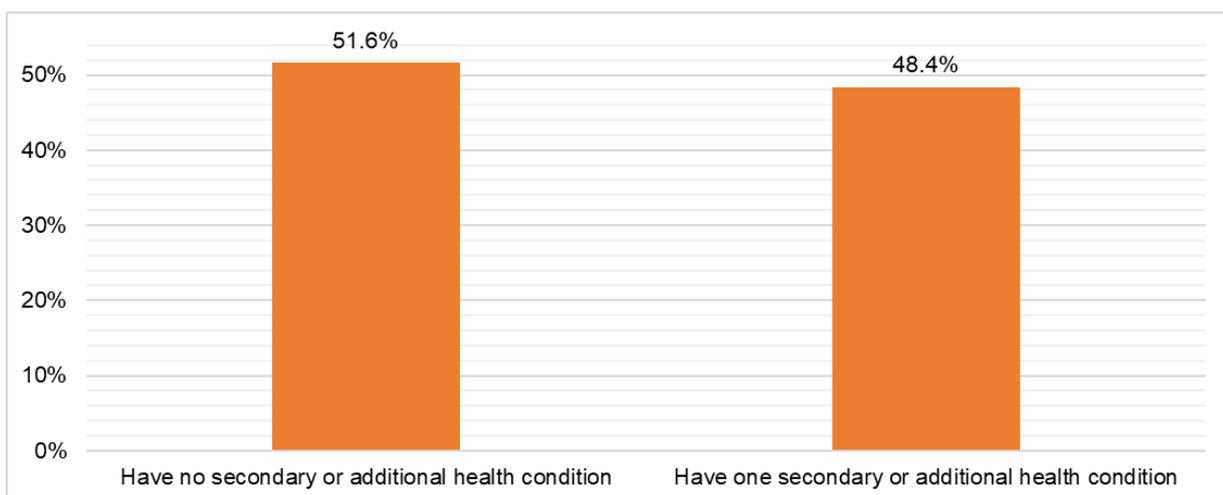
Figure 3.3: Breakdown of participants length of unemployment



Health Conditions

We have information on the health conditions of all 1153 participants. All participants had a health condition and 48 per cent had a secondary or additional health condition. This indicates the high levels of need of participants and the level of support required to support them into work.

Figure 3.4: Percentage of participants with and without an additional health condition



Individuals with multiple conditions were able to register two health conditions and defined these as either their 'primary health condition' or 'secondary health condition', with primary conditions the most pressing health issue.

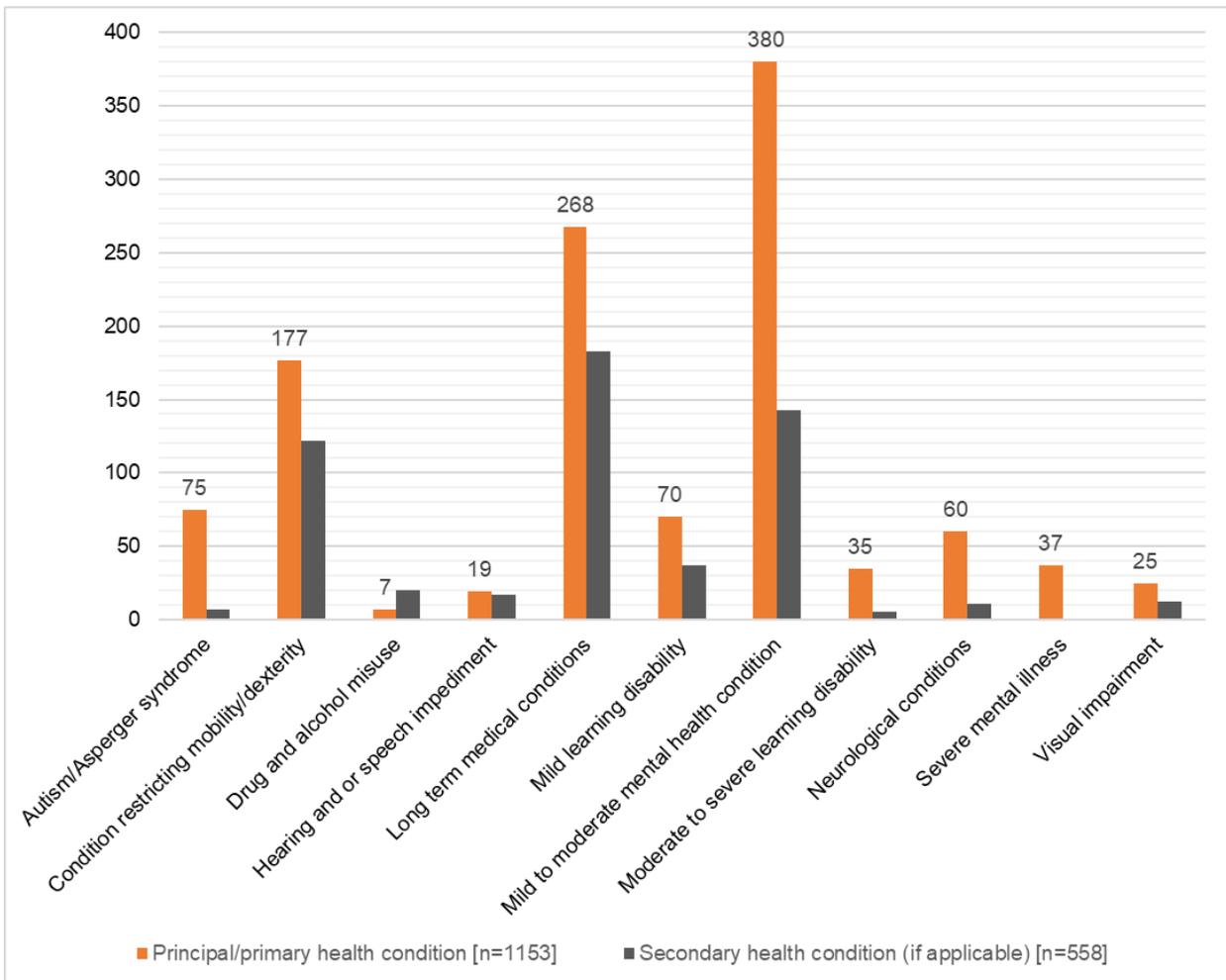
Figure 3.5 displays the incidence of health conditions for all participants. This distinguishes between participants' principal or primary health condition, and secondary health conditions, depending on whether they have multiple health conditions.¹⁰

Mild to moderate mental health conditions and long-term health conditions (which cover a myriad of different health conditions)¹¹ were the most common principal/primary health conditions and secondary health conditions amongst programme participants. In addition, conditions restricting mobility and dexterity were also common amongst participants.

¹⁰ Please see the Figure A.10 in Appendix A for the breakdown of the co-morbidity of health conditions.

¹¹ Long term health conditions include: Low level blood count, cerebral palsy, chromosomal defect, narcolepsy, breathing problems, prostate cancer, diabetes, deep vein thrombosis, kidney stones, muscular dystrophy, Crohn's disease, stroke, double hernia, dilated cardio-myopathy, cluster headaches, insomnia, COPD and Alzheimer's.

Figure 3.5: Incidence of primary and secondary health conditions of participants



Disabilities and health conditions were seen by many participants as their main barrier to employment. This was particularly true for those whose health had worsened over the course of the programme. For some, this was because this made interviews and/or job tasks difficult. For others, this was because they did not think employers wanted to hire people with disabilities and health conditions.

'I walked into a shop they were looking for [new staff], they took one look at me and they said no because I was crippled...So you just get to the stage where it's, like, should I apply for it because nobody wants to know... to really get to know me because of all the ailments that I have.' (Female, 56, wave 3)

3. Programme delivery

The main findings in this chapter are:

- 42.5 per cent of those referred registered with the programme across the three providers. Wheatsheaf Trust supported the most participants as they covered the largest geographical footprint.
- Engagement was enabled by positive relationships with the referral organisation, familial support and being aware of the unique elements of the programme. Potential participants also liked the voluntary nature of the programme. The most common suggestion to increase engagement was to advertise the programme more widely, using a range of methods.
- Factors which helped to sustain engagement included participants having a good initial impression of their adviser, informal, person-centred discussion, participants being clear on how the programme could help them and staff setting goals which were realistic and thus achievable.
- Between June 2016 and December 2018, 11,221 monthly reviews were recorded, and 1162 incidences of in-work support were recorded. 10,307 phone calls with participants were recorded between January 2017 and December 2018.
- Employment support (such as improving participants CVs, attendance at Job Clubs and completing mock interviews) was the most common type of support recorded, making up 71% of support sessions provided. This was followed by health and wellbeing support (17% of support sessions provided). Participants appreciated the range of internal and external support available. Participants spoke highly of the programme when they had received sequential support that addressed pressing needs first, and when they had established a good relationship with their adviser.
- Participants were less positive about their experiences of the support when they encountered issues once they entered the workplace; when they had specific employment aspirations and their adviser struggled to source relevant opportunities; when they felt that the support was not sufficiently tailored, and; when the support ended, and they were unclear of reasons for this or the next steps.

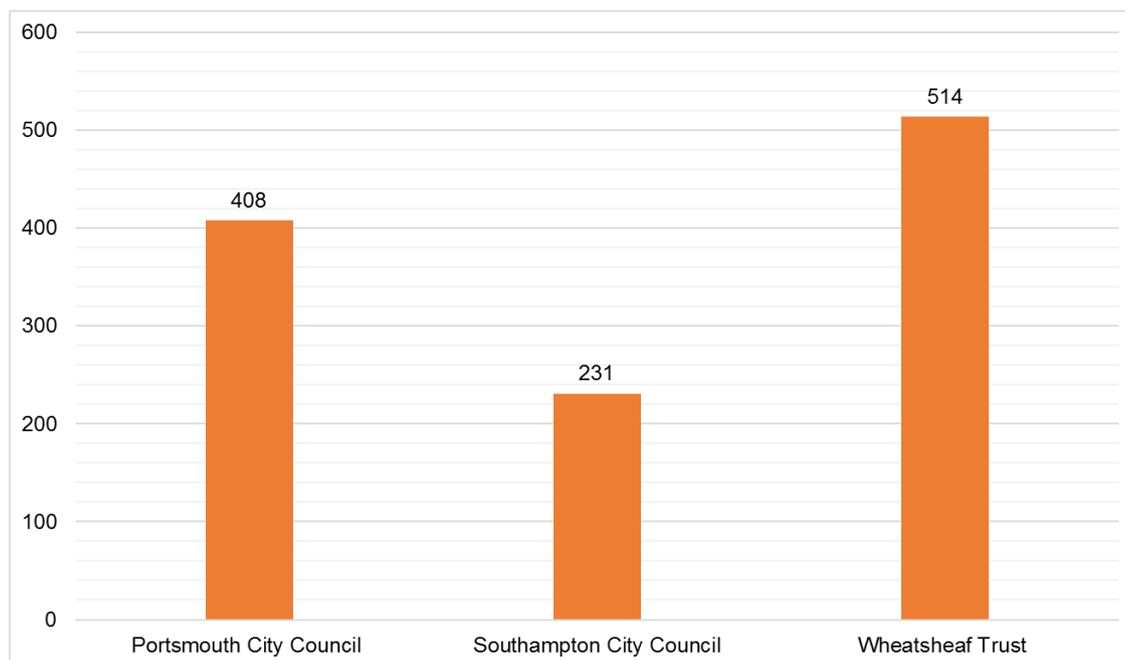
This chapter discusses the support delivered to participants through the Solent Jobs Programme (SJP), drawing on staff and participant experiences and views

over several waves of research conducted between December 2016 and February 2019. It includes analysis of management information; and covers how participants' support needs were assessed, the delivery of employability and wellbeing support, job matching and in-work support in turn.

Programme registrations

The total number of participants registering with the programme between June 2016 and December 2018 was 1153, 42.5 per cent of those referred to the programme.

Figure 4.1: Number of participants registered by provider



There was a mixed model of delivery. The local authorities delivered some of the programme in the cities (Southampton, Portsmouth and Havant). Wheatsheaf Trust were commissioned to deliver support in the Gosport and Solent area outside of the urban centres, in the Isle of Wight and in Southampton, Totton and Waterside.

Of the 1153 participants to join the programme, 408 (35 per cent) registered with Portsmouth City Council, 231 (20 per cent) registered with Southampton City Council and 514 (45 per cent) registered with the Wheatsheaf Trust. As Wheatsheaf Trust covered a larger geographical footprint is not surprising that they supported the highest proportion of participants.

Entering the programme

Views and experiences of the referral process

Participants had differing views and experiences of the referral process. This was often shaped by the quality and amount of prior information given by the referrer, the extent to which they trusted the referral organisation, previous experiences of employment programmes and their motivation to work.

For example, although some participants trusted their JCP work coach and the referral, others expressed concerns that the support would replicate a JCP appointment. Some questioned whether there would be negative implications if they refused to take part or had signed up to appease their work coaches. A few were convinced it was mandatory, despite being told otherwise. The language used in JCP letters appears to have influenced this view.

'She said it was voluntary, but everybody knows it's not... it's mandatory, you've got to go and do it...the way it comes across is like it's not voluntary...' (Male, 42, wave one)

Enabling factors, which were identified as encouraging participants to engage included:

- **Positive relationships with the referral organisation and/ support by their families:** *'The person at Mind, she encouraged me that I would be able to do it...I live with my parents, so they were quite keen for me to do it as well.'* (Male, 36, wave one)
- **Additional information on the unique elements of SJP being provided,** such as the TEP element and the employer engagement offer and the focus on people with disabilities and health conditions: *'Because they said it was specifically tailored for long term health, it was more, "Yeah, I'll give a go, see how it is"'* (Male, 26, wave one)
- **The voluntary nature of the programme and non-pressurised approach to support.**
- **Positive testimonials** from friends of family who had accessed the programme.
- Having had **prior positive experiences with the delivery organisation.**

In contrast, when the programme was introduced as a standard employment programme with elements such as help with CV, job search and interview preparation it had little distinction from other provision, which reduced participants'

motivation to be involved. Furthermore, where people attended a group information session that was poorly attended, this made them apprehensive about engaging. Programme staff also commented that group engagement sessions were not always the most appropriate for ESA WRAG claimants because this led to anxiety and there were sometimes issues with accessibility at JCP.

The most common suggestion to increase engagement made by participants was to advertise the programme more widely. It was interesting to note that suggestions made included activities undertaken during SJP, which were felt to have little impact on engagement. For example, participants suggested putting adverts in local papers and posters/ flyers being available in libraries to reach people who did not have access to the internet. Greater advertising on social media and government websites was also recommended, and programme ambassadors who could talk to potential participants about their experiences was suggested by one respondent.

Initial appointments

Participants' initial appointments took place in variety of locations, including JCP, in the provider's offices or in public places such as a library. This worked well because participants had different preferences about the location of support. As we have found throughout the evaluation of SJP and other similar programmes, having appointments in an accessible and familiar location appeared to be the most important consideration. Having a private place to discuss personal issues was also desired. Where appointments were far away from participant's homes this caused difficulties, especially when they were uncomfortable using public transport.

The initial appointment covered several topics including participants' employment history, current circumstances, barriers to employment and their interests and future aspirations. Participants were glad that the appointment was not too long because it was not overwhelming and because this did not have a negative impact on their health.

One provider reduced the initial appointment length by focusing more on the assessment and action plan in a subsequent appointment, outside of JCP. It was felt that it was more suitable to complete the assessment in an external environment and once individuals had met the adviser, as they were more open.

Some participants worried about the idea of returning to work or accessing employment support. Therefore, it helped when advisers emphasised that the

programme was voluntary and aimed to support people overcome a range of issues. Other factors that helped to sustain engagement included:

- having a good initial impression of their adviser (for example finding them friendly);
- discussion being centred around the participant as this meant that they felt understood;
- appointments being quite informal;
- being clear on the next steps, and;
- managing expectations through taking a realistic approach when setting goals.

[My adviser] was much more, she's realistic about the chequered work history, mental health problems, the long period out as a carer. She was realistic about it.'
(Male, 56, wave two)

Some participants we spoke to explained that they felt particularly positive after the initial appointment as they believed that the programme could support them make progress towards employment.

'The fact I got a good vibe off the adviser, that helps because I've done this type of thing before and actually it didn't really go anywhere... I'm with a group that will actually be able to help me out and get me in a better situation than I am now.'
(Male, 23, wave one)

'I was very impressed and very optimistic and quite excited for possibilities for the future so, yes, it was a very positive experience.' (Female, 51, wave two)

During the first wave of the research some participants reported negative experiences of their initial appointment. Reasons for this included that they were unclear what participation in the TEP involved and/ or the structure of the support, that the adviser was disorganised and that they were not able to discuss what they wanted from the programme. Such factors made them apprehensive about engaging. However, such issues were not raised in subsequent waves of research, suggesting improvements in initial appointments as advisers became familiar with the programme.

Action plans

An action plan was a key part of participants starting the programme. Not all participants recalled completing an action plan. Some spoke about setting short-

term goals or agreeing steps to take in between appointments: but did not identify this as a formal action planning process.

Participants were positive about the action planning process when they believed that the activities were realistic, and the goals were achievable. This was because participants felt understood and that progress was possible. For example, some participants' action plans included tasks such as going for a walk or driving to a local supermarket to get them out of the house.

'[My adviser] said she doesn't want me to run before I can walk... I don't feel I'm being rushed into something.' (Female, 62, wave one)

Clear communication with participants was felt to underpin successful action planning. This meant that advisers could get to know participants, build trust and agree suitable steps for them to take which met their needs.

'If they feel that you're there for them, it does really, really help and they feel that you listen to them ...It's a big thing for them, the fact that you are there to push the boundaries to help them overcome those barriers. Communication is the key and being strong enough to be able to push someone's barriers.' (SJP adviser, Portsmouth)

It was also important that the steps on the action plan addressed barriers sequentially, prioritising pressing concerns. This helped participants to understand the different steps they had to take to become work ready. For example, some participants focussed on improving their health or wellbeing by attending courses prior to thinking about employability support. As a result, most participants felt that their action plan had moved at a good pace for them.

'They're pushing me forward, getting things sorted, so we know that in a few months, then, potentially, I could have some work, part time work or whatever.' (Female, 36, wave one)

When participants were unclear on their next steps on the programme, either in terms of progressing into employment or progressing through their action plan, this resulted in negative experiences because they were unsure how the Solent Jobs would be able to support them to move closer to work. In addition, a few participants felt that their action plan was unresponsive to their needs and changing circumstances because the support offered was generic. This feedback was more common in the first wave of the research, suggesting improvements to delivery as advisers became more experienced.

Advisers had mixed views on the extent to which conducting regular action plan reviews was beneficial. One adviser, whose caseload included many people who had been unemployed for more than ten years, explained that monthly action plan reviews were not always appropriate. This was because if participants had not met the targets set, they left feeling quite disheartened and disappointed; emphasising the importance of setting realistic goals.

'The confidence level isn't there... Then when you're sitting down and doing that review and we're just like oh that's ongoing, and that's ongoing, they're feeling like they're not maybe hitting what [they were expecting]' (SJP adviser, Southampton)

However, other staff commented that regular reviews were helpful to monitor progress and adjust the actions and targets according to individual circumstances, which often changed. It was interesting to note that such staff had a more mixed caseload.

'Review [the actions] all the time, you know, so that as people develop and change and may not want to be doing the same sort of job because they've got... you know, they've had more time to think about it, be prepared to listen and flex and change as much as you need to really.' (SJP adviser, Portsmouth)

Ongoing support

The number of contact and support sessions conducted with participants was recorded over the course of the programme.

Contact

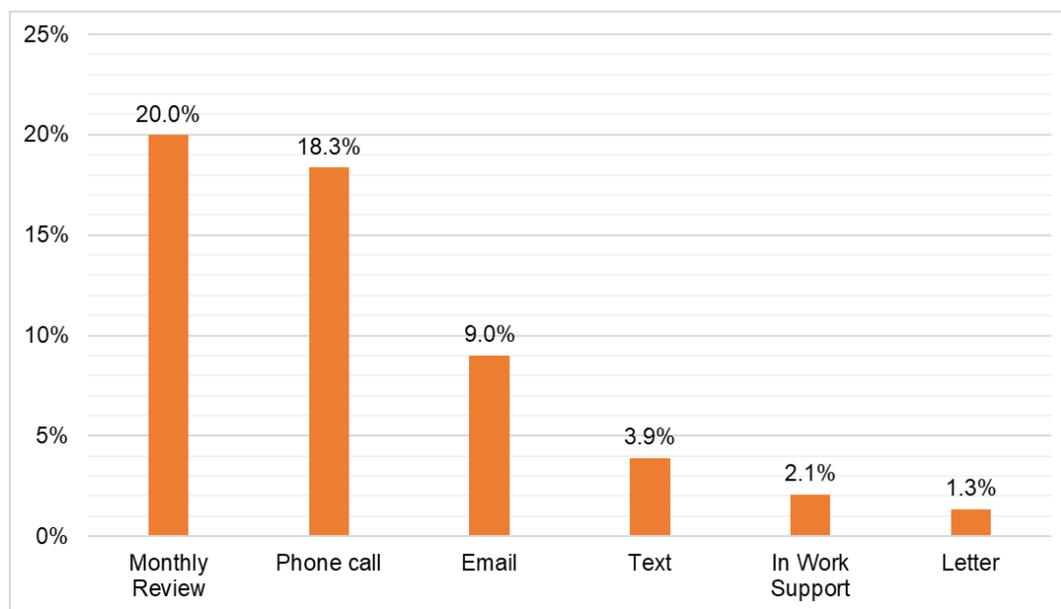
There was a range of contact methods with programme participants, which was either mandated or based on adviser and participant discretion. This was recorded between June 2016 and December 2018. Figure 4.2 below shows that:

- Monthly reviews which involved face to face meetings between participants and their adviser constituted the most common form of direct contact, with 11,221 client contacts recorded.
- Complete phone calls with clients were only recorded between January 2017 and December 2018¹², yet made up the second most common form of direct contact, with 10,307 phone calls recorded.
- 1162 incidences of in-work support were recorded.

¹² Prior to January 2017, we are unable to ascertain whether a phone call was completed or was unanswered, and hence are unable to include this in our analysis.

Further to direct contact, 5062 emails, 2180 texts and 747 letters were also recorded. However, we are unable to ascertain the nature and purpose of such contact because this was not recorded. A total 4094 missed face-to-face appointments and 3240 incidences of leaving a phone message were recorded between June 2016 and December 2018.

Figure 4.2: Breakdown of direct contact with participants between June 2017 and December 2018



The most common contact type participants received at least once was a face to face one to one session, as 1148 participants were recorded as receiving this. This was followed by a phone call, with 1086 participants getting a phone call at least once and a review which 1086 participants received at least once.

Some participants interviewed explained that over the course of the programme phone calls or emails became the main method of communication with their adviser.

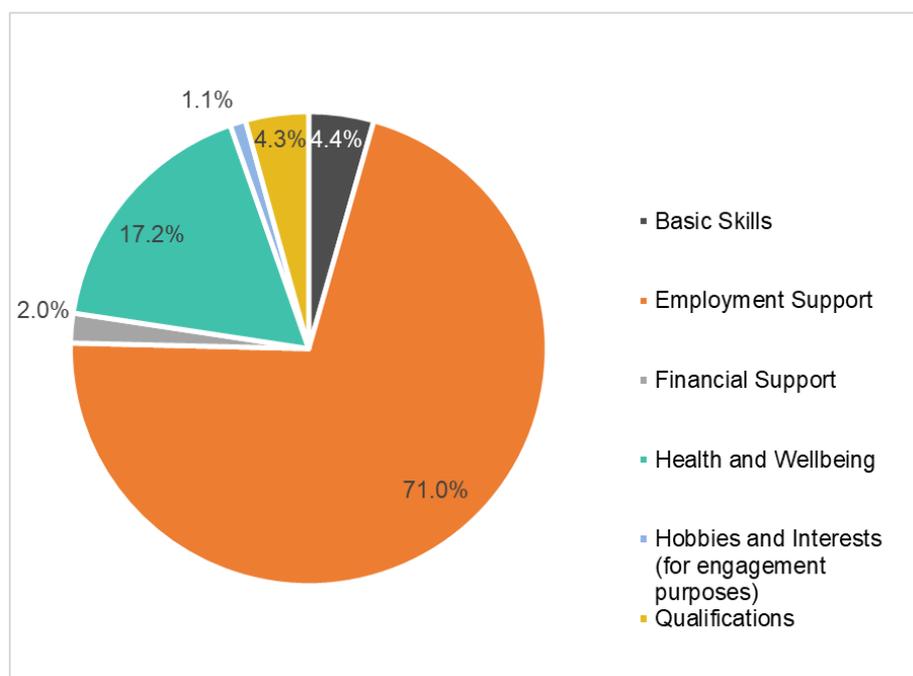
Support sessions

The number of support sessions provided to participants was recorded between June 2016 and December 2018. In total 4001 individual sessions were delivered, across 38 different types of support. To make our analysis tractable these have been amalgamated into one of six key areas; employment support, basic skills,

qualifications, health and wellbeing, financial support and hobbies & interests¹³ as shown in Figure 4.3.

- The most common type of support sessions delivered were employment support, with 2865 individual sessions recorded.
- 696 individual sessions of health and wellbeing support were recorded;
- 178 individual sessions of basic skills support were recorded;
- 173 sessions covered qualifications development;
- 82 individual sessions of financial support were provided, and;
- 43 individual hobbies and interest sessions were recorded. Hobby and interest sessions were delivered as a method to encourage participants' engagement and sustainment with the programme.

Figure 4.3: Breakdown of registered support sessions provided to participants between June 2016 and December 2018



¹³ Please see Appendix 7.2 for the breakdown of support activities by support area.

Views and experiences of SJP activities

A range of one-to-one and groups support options were available to participants. Participants were grateful for the choice available, as this meant the support could be personalised based on their interests and circumstances. Views and experiences of the support are discussed in more detail below.

Employability support

Most participants reported receiving support to move them closer to the labour market and develop their employability skills. For example, several participants recalled their adviser helping them to update and improve their CV. One respondent explained that their adviser helped them to make their CV shorter and more organised.

Furthermore, some participants believed that having support from their adviser to identify relevant opportunities would increase their chances of finding employment.

'They will step in as well and ask around for me, it is not just me trying to do it myself and getting no joy, if I've got a bit of support, I've got more chance of getting a job.' (Female, 49, wave two)

Many attended Job Clubs. Some liked meeting and receiving support from other participants and they found being surrounded by peers who were looking for employment motivating. Others found them unhelpful because *'it was just looking for jobs on computers.'*

Being supported to prepare for interviews was another common element of the support. This was delivered by advisers and during mock interview sessions delivered by employers or external providers. Getting feedback from training organisations and employers was felt to increase participants confidence in their ability and make them feel like they were making good progress.

'Something which works tends to build that... you know, intrinsic motivation, doesn't it, to think this is stepping in the right direction...sometimes just getting feedback from when you take people to the employers or [when] external people come in' (SJP adviser, Portsmouth)

A barrier to searching and applying for jobs identified for some respondents was the lack of computers at the provider offices. Such individuals did not have access to a computer and the internet at home and so relied on this. A few participants also expressed confusion when they received conflicting advice about their CV and job applications on the different programmes and/or courses that they had

been on, both as part of Solent Jobs and in the past (such as the Work Programme). Some participants who were not supported to improve their interview skills explained that they would have liked this.

Wider support

As a result of referrals to local training provision, several participants gained skills and qualifications. This included areas such as food safety training, first aid, education training, social care and computer programming. A benefit of this identified by research respondents is that this gave them things to put on their CV. Furthermore, the group nature of the training and the opportunity to meet other local people in similar situations was well received by many participants.

'It kind of brings you out of yourself...you're getting to meet different people who are in the same situation as you so we kind of support each other really.' (Female, 51, wave two)

For some, taking part in volunteering or work experience also played an important role in developing their skills and giving them confidence of their ability in the workplace. Others spoke about involvement in the programme helping to give them direction and raising their awareness of available and suitable jobs.

Some participants also received financial support, which was felt to be important. This included receiving a grant to get new clothes for work, travel costs being reimbursed and having access to groceries at no cost.

Identifying employment opportunities

Some participants had a clear idea of what types of jobs that they wanted whilst others received support to identify jobs to apply for, based on their previous experience and transferable skills. In both instances, participants were supported to identify relevant opportunities by their adviser and employer engagement staff. This included making them aware of where vacancies were advertised and how to apply, but also proactively approaching suitable employers in the local area. Where this proactive approach was taken, participants appreciated the level of support they received.

'Because rather than just making us look for jobs she asked us what our ideal job would be and then she approached the companies for us.' (Female, 32, wave three)

Job-matching was felt to be important because as well as increasing the likelihood of sustainment, finding a role that was relevant to someone's skills and interests

was felt to increase their confidence and wellbeing. There were some good examples of participants being placed with disability friendly employers or advisers visiting employer's office to ensure that it was accessible.

'When I went into the place they already had an understanding of how to accommodate because they were already familiar with visual impairment, so it made it slightly easier to feel welcome within the company.' (Male, 25, wave three)

However, some participants with physical impairments reported accessibility issues with the roles that had been identified. Consequently, they recommended having a staff member on the programme with specialist knowledge of disability who would have identified such barriers and been more able to overcome them.

'Solent Jobs Programme need...a dedicated disability person working for them. Because I suspect there are jobs out there for people [who are disabled], but a person that's not disabled can't see that.' (Female, 62, wave three)

Programme staff explained that job-carving¹⁴ was possible when a relationship had been developed with both the participant and employer. As this meant that they understood the individual and business needs. However, we did not come across any examples of this in our research.

Some participants expressed frustration that their adviser was not able to source relevant opportunities for them. This appeared more common when participants had more specific aspirations. For example, one respondent had a master's degree and did not believe that their adviser had found a role that took advantage of their qualifications. Another participant wanted to complete an apprenticeship and believed that their adviser could have done more to identify relevant opportunities and put them in touch with training providers. Lastly, one individual wanted to start their own business and did not feel that their adviser had taken this seriously and supported them with this.

In-work support

Once participants had been offered employment, they were often supported to make the transition to work and sustain the opportunity.

Support to make the financial transition and change benefits or come off benefits was identified by programme staff as key as it meant that participants had less to

¹⁴ This involves analysing the tasks required for a certain role and considering what could be amended or given to someone with disabilities or health conditions

worry about when moving into work and could subsequently focus on the job in hand. Participants reported completing a better-off calculation with their adviser, being supported to complete forms about their changing status and receiving financial support in the interim period before their wages were paid.

Advisers also kept in touch with employers once a participant entered a TEP to see if there was any additional support required and get some feedback on their experience.

'We phone them on sort of like four to five weeks, get some feedback on the individual, to do in work reviews...is there anything that they require for the client to... like targets for them whilst they're working for them or just to see if there's any support needs that the employer wants.' (SJP adviser, Southampton)

Not all participants reported receiving in-work support. Some had encountered difficulties in the workplace and would have liked to get advice about this. Others felt able to cope without this. Preferences about in-work support appeared to depend on how accommodating the employer was, how suitable the role was and the participants confidence level.

'There was three months of being in a job that was really stressful, so obviously I needed the support, but it wasn't there...' (Female, 32, wave two)

Exiting the programme

An additional issue raised by some participants in the most recent wave of research was confusion about why the support ended and a lack of follow up to confirm next steps. Where this had happened this often led to negative overall views of the programme. For example, one person disengaged from their work placement after finding it unsuitable and expected a follow-up phone call from their adviser, but never heard from them again. Another explained that they disengaged after not hearing from their adviser, and they were unsure about why their support had ended.

'I've never had any written confirmation, I've never had an email, I've never had a phone call, anything telling me what's going on, anything really.' (Female, 51, wave three)

Views of staff

Participants often spoke positively about their SJP adviser. Reasons for positive views of programme staff included that they were found to be approachable and supportive, easy to contact if the participant had a query or concern and

understanding of their circumstances and aspirations. Good quality advisers were also felt to deliver tailored, rather than generic support.

'My adviser is a lovely person. She's helpful. She's supportive. She kept to her word when you see the doctor, you see somebody, getting antidepressants that help you and in return it's like you get me on courses, so she's done that.' (Male, 28, wave two)

'I think she's really lively and outgoing and she makes us feel like she's the same as us, because she has off days and troubles, as well, and we feel we can talk to her about that and she's really approachable.' (Female, 32, wave one)

However, an issue that came up more in the final wave of research was staff turnover and participants explaining that their adviser had changed, sometimes three or four times. Most people we spoke to did experience a change in adviser. This was not always perceived negatively; especially when participants felt that they had a better relationship with a new adviser or the adviser that they had later in the programme supported them to achieve an outcome. Where participants did have a consistent adviser, they highlighted it as something that they liked about the support.

'I prefer having just one person... you know, you've explained your circumstances and they know you... you get to kind of know each other, don't you, and explaining over and over the same thing to different people that are trying to do the same thing is kind of tiring.' (Female, 20, wave three)

4. Outcomes

Overall the data shows that:

- Intermediate outcomes reported by participants included increased confidence and motivation, recognition of their transferable skills, gaining new skills, improving their health and wellbeing and feeling more ready to enter employment.
- Just over ten per cent of participants registered to take part in a work taster. Of these participants, 10 per cent left because they found employment and 78.5 per cent completed the work taster.
- Just over a fifth of participants registered to take part in a TEP, 38.6 per cent of whom left after finding work and 43 per cent of whom completed the placement.
- 28 per cent of participants moved into open employment and at least 17.5 per cent of participants sustained their role for at least 26 weeks. This job entry rate is higher than other comparable programmes. The average time taken to move into employment was five months.
- Interestingly, those with a severe mental illness had the highest employment rate compared to other conditions, and there was little difference between the proportion of employment outcomes of those over 50 and those under 50: demonstrating that the programme was able to overcome barriers to employment.
- Barriers that prevented outcomes included changes to advisers and the frequency of contact, participants health, employer practices, transport issues and the length of the programme. Universal Credit was also felt to have impacted delivery.

This chapter outlines the employment experience and outcomes achieved by Solent Jobs Programme (SJP) throughout the delivery period. It builds on the programme's Management Information (MI) between June 2016 and December 2018 and feedback from programme staff and participants.

In this chapter we look firstly at intermediate or soft outcomes, and then focus on work tasters, temporary subsidised jobs accessed via the TEP and open employment. We consider how these outcomes have changed over time, and how they vary across the different delivery areas and for different groups of participants. Again, further tables and charts demonstrating the findings can be found in Annex A.

Intermediate outcomes

Many respondents spoke of their **increased confidence** as a result of being part of SJP. Reasons for this included having access to courses to help with factors such as motivation and anxiety and having opportunities to increasingly interact with new people (including their adviser and peers on different courses).

'When I first started there, I had no confidence, so I wouldn't sit in a room with other people and then it ended up where I was coming in talking to the new people.' (Female, 39, wave three)

Others attributed their increased confidence and **motivation** to their advisers passionate and encouraging nature and/ or because of their completion of the TEP. For example, one participant explained that they now had the confidence to enter employment as they had a positive experience during the TEP which made them less apprehensive about what to expect.

'Because it gave me the confidence to be able to go back and do work again. You know, obviously the same as anybody when they start a new job, they're very apprehensive...I was petrified because I didn't know what to expect. I hadn't worked on a shop floor for years. But the people there, they're lovely, they actually make me welcome and it was lovely...' (Female, 61, wave 3)

The TEP, which gave participants work experience and access to in-work training opportunities, also helped participants to **recognise their transferable skills and qualities, gain new skills and believe that they could cope and be successful in employment**. For example, participants explained that they learnt that they could work well in a team. An important step for several participants was a realisation that they were employable and could add value to a workplace, despite their disability or health condition.

'It gave me back that confidence that I am employable even with a health condition. So, it's helped me in that respect, but I think when you realise that you

are the same person with the same skills and the same personality and the same things to offer, all that you have is a slight disability...' (Female, 52, wave 3)

Linked to this, many participants spoke about their **improved attitudes towards work** and/ or an **increased readiness to enter work**. **Gaining new employability skills** was felt to be an important factor in this. For example, participants discussed learning more about how to apply for jobs, improving their CV and developing their interview skills. This was a result of either one to one support from their adviser and/or involvement in a job club, which sometimes also included peer support. Participants also liked that they were able to meet other people in similar situations to them, which put them at ease.

Others spoke of their **improved organisation, interpersonal skills and job-specific skills**. Aside from the TEP, additional reasons for this included being referred to courses, taking part in volunteering and advice and guidance from their adviser.

Some participants also reported **improvements in their health and wellbeing**. This included reduced anxiety and improved mental health more generally as well as improvements in health conditions and physical health. For example, one participant had lost around eight stone over the past two years to help combat their health conditions. Learning more about their condition and how to manage it as well as dieting played an important role in this.

Furthermore, interim analysis¹⁵ of Warwick Edinburgh Mental Wellbeing Scale (WEMWBS) data, which aimed to measure the effect that the SJP had on participants' mental wellbeing showed positive impacts, especially amongst those who found work.¹⁶ For example, the average initial score was 23.3 out of a possible 35, which rose to 25.8 amongst those who left the programme, and 26.8 amongst those who left and found paid employment.

When considering the WEMWBS scores by individual questions, the greatest increase was in participants' feeling relaxed and optimistic about the future.

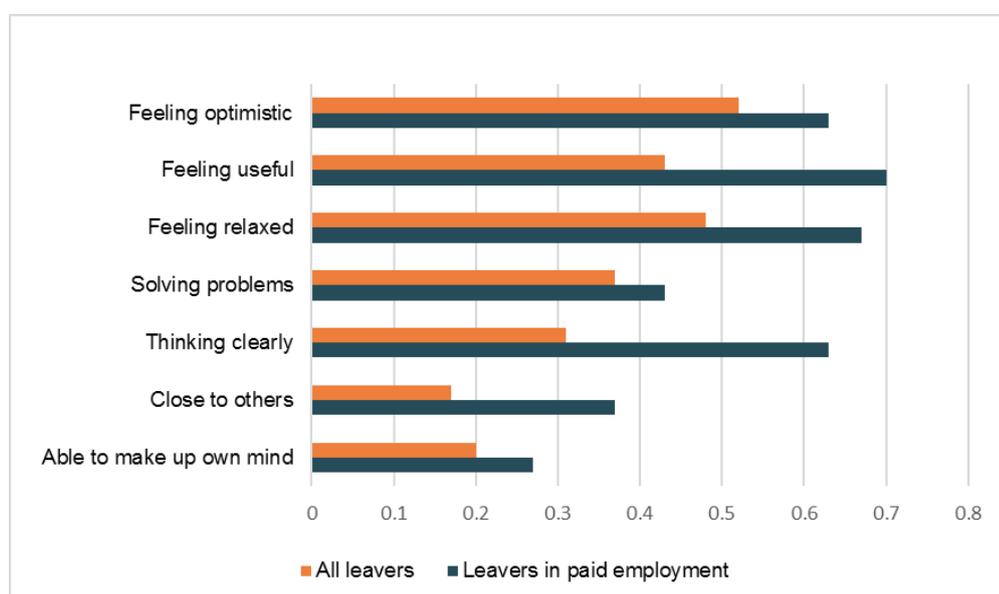
¹⁵ Analysis referenced was conducted in November 2017, more recent analysis is currently unavailable

¹⁶ The Warwick-Edinburgh Mental Well-being scale was developed to enable the monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing. For Solent Jobs a shortened version of the WEMWBS was used, which includes seven statements about feelings and thoughts, with five response categories. More information can be found here: <https://warwick.ac.uk/fac/med/research/platform/wemwbs/>

However, for those who entered paid employment, there was also a considerable increase in feeling useful and thinking clearly.

Amongst individuals that left the programme, those with autism or a mental health condition had the most improvement when comparing initial and end scores, which may relate to the higher job entry rates of these cohorts (explained in more detail below). Furthermore, the improvement was most marked amongst those with low educational attainment (less than 5 GCSE passes) or those with very high educational attainment (higher education certificate or above). This suggests that these groups benefited most emotionally, even though those with below entry level qualifications were the least likely to find paid work.

Figure 5.1: Comparison of the change in WEMWBS scores for those who left the programme with those who left and found work (November 2017)



Getting out of the house more and being **less socially isolated** were also referenced by some participants. Being part of the programme helped with this because it gave participants something to focus on, people to talk to and a reason to go out into the community. Participants often referenced the benefits of having someone that was checking in to see how they were, who could help them with issues that they were facing.

[SJP] helped me to come out of my shell...I was in a shell for over ten years, I was in the shell and no-one could get in... I can phone [my adviser] up any time

and she phones me back and I can ask her anything, if I'm not sure about anything, she will work for me to help me.' (Female, 56, wave 3)

Job outcomes

SJP participants were able to complete work taster sessions and the TEP. Work tasters were a short-term trial within the workplace (lasting up to two weeks). The intention was to enable participants to gain experience and develop skills, and to test the suitability of the role, considering whether it could be pursued on a longer-term basis. A temporary job on the TEP was a step-up from a work taster, as it was a longer-term placement within the workplace (for up to six months). It therefore provided participants with a greater opportunity to develop skills and experience and assess whether the organisation and role were suitable. Finally, the long-term goal of the programme was to support individuals into sustained open employment.

Work Taster

Overall, 10 per cent of participants (121) registered to take part in a work taster. Of these participants, 12 people or 10 per cent left their work taster early after finding employment, and 95 or 78.5 per cent completed their work taster. 10 participants left their work taster early after finding it unsuitable and one participant failed to attend.¹⁷

We also explored the progression experiences of those individuals who completed a work taster. This showed that:

- Of the 95 participants who completed a Work Taster, 48 per cent (46 participants) moved into employment, 34 of whom sustained their role for at least 26 weeks.
- Of the 12 that did not complete their Work Taster because they found work, 59 per cent (7 participants) were recorded as moving into employment, five of whom sustained their role for at least 26 weeks.
- Of the 10 that found the work taster unsuitable, 20 per cent, (two participants) moved into work, both of who sustained the role.

¹⁷ Of the 95 participants to complete a work taster, three had already completed a previous work taster, meaning they had each completed two separate work tasters. Only the most recent work tasters have been included in the analysis.

- The one participant who failed to attend their work taster had no recorded job outcome.

Temporary subsidised work in the Transitional Employment Programme (TEP)

In total, just over a fifth of programme participants experienced a TEP placement (243). Of those who had registered to start at TEP, 94 participants left early because they found work, representing 39 per cent, whilst 104 or 43 per cent had completed their placement by December 2018. A further 33 had left early due to it being unsuitable, and 12 participants failed to attend their TEP placement.¹⁸

The most common type of work undertaken was administration / business and office work, which accounted for 28 per cent of TEPs to be completed. This was followed by retail and customer service (22 per cent) and hospitality and catering (10 per cent).

Analysis of progression pathways following participating in a TEP showed that:

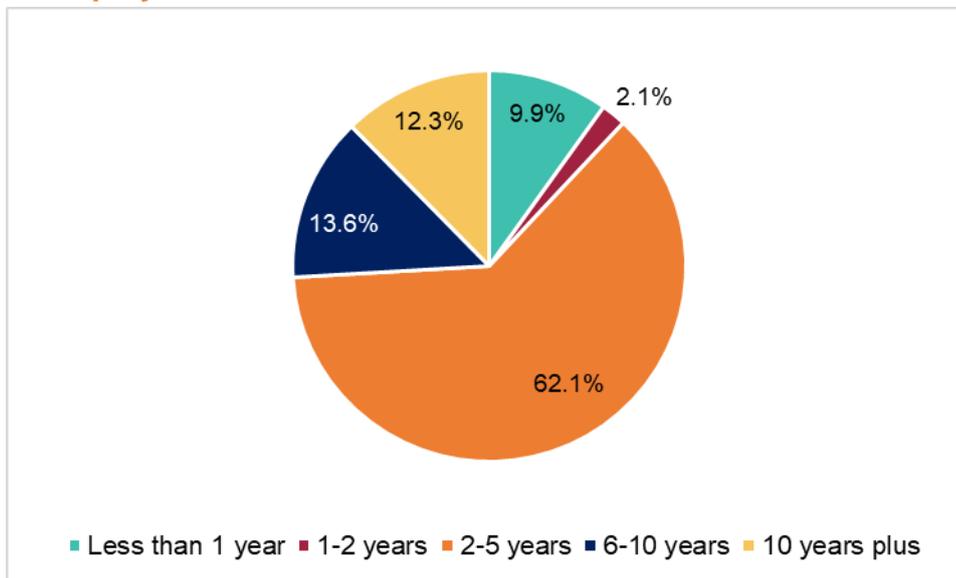
- Of the 104 participants who completed a TEP, 58 per cent (39 participants) moved into employment, at least 21 of whom sustained their role for at least 26 weeks.
- Of the 94 participants who did not complete a TEP because they found work, 93 of them (or 99 per cent) were recorded as moving into employment, at least 41 of whom sustained their role for at least 26 weeks.
- Of the 33 participants who did not complete a TEP because it was unsuitable, 21 per cent (7 participants) moved into employment, 3 of whom sustained the role.
- Of the 12 participants who did not complete a TEP because they failed to attend, only one person moved into employment, which they did not sustain.

The TEP was targeted at those individuals who were considered further away from the labour market. Individuals considered capable of finding work in six months or less were not eligible. Figure 5.2 shows the proportion of participants who entered

¹⁸ Of the 104 participants to complete a TEP placement, one had previously participated in a TEP placement but had left early due to it being unsuitable. Of the 94 participants who left their TEP placement because they found work, one had completed a TEP placement previously. Only the most recent TEP placements have been included in the analysis.

a TEP by the length of time they were unemployed. More than half of participants who entered a TEP had been unemployed for between 2-5 years, and 12 per cent had been unemployed for more than ten years. However, 10 per cent had been unemployed for less than a year.

Figure 5.2 Number of participants who entered a TEP by length of time unemployed



Open employment

Overall, 28 per cent of participants (318) had moved into open employment since the start of the programme,¹⁹ and 17.5 per cent of participants sustained their role for at least 26 weeks. This represented just under two thirds (64 per cent) of those that entered employment. However, programme leads felt that the number that moved into sustained work was most likely higher, because it was not possible to continue monitoring outcomes after December 2018.

This job entry rate is higher than the Work Programme and two other comparable programmes which targeted people with disabilities and health conditions. L&W analysis of Work Programme performance conducted in 2017, found that 15 per cent of ESA new claimants (who are expected to be fit for work in less than a year)

¹⁹ Of the 318 participants to move into employment, 33 participants had held multiple jobs (up to four) over the course of the programme, including changing job to a new role or holding multiple jobs at one time. Only the most recent roles have been included in the sector analysis.

got a job outcome²⁰ within two years, and that 12 per cent of ESA new claimants who are expected to be fit for work in 12-18 months got a sustained job outcome.

The Working Well pilot in Greater Manchester achieved an employment rate of 4.7 per cent in the first 17 months of the programme²¹, and between October 2015 and April 2018, Working Capital in Central London had an employment rate of 11 per cent.²² However, it should be noted that Working Capital and Working Well had a mandatory first appointment throughout the delivery period (and Working Well could also mandate elements of the support if this was deemed necessary). Hence it is likely that SJP participants were on average more motivated to enter work than participants on the other two programmes. Labour market conditions in the Solent LEP area were also more buoyant than those in Greater Manchester and London²³, and more favourable local labour market conditions increase the likelihood of Solent Jobs participants entering work.

The most common type of work undertaken by SJP participants was retail and customer service work, which accounted for 17 per cent of types of work undertaken. This was followed by childcare/healthcare and hospitality and catering (both 12 per cent).

Finding work had additional positive impacts on participants. For example, entering employment improved participants confidence and increased their satisfaction and wellbeing.

'I think I achieved the chance to get myself back to work. I never expected it was going to happen, but it did. It got my confidence up, it's made me feel happier. I'm happier than I've ever been.' (Female, 56, wave two)

²⁰ Considered as three months in employment.

²¹ <https://www.gov.uk/government/publications/greater-manchester-working-well-early-impact-assessment>

²² <http://centrallondonforward.gov.uk/programmes/working-capital/>

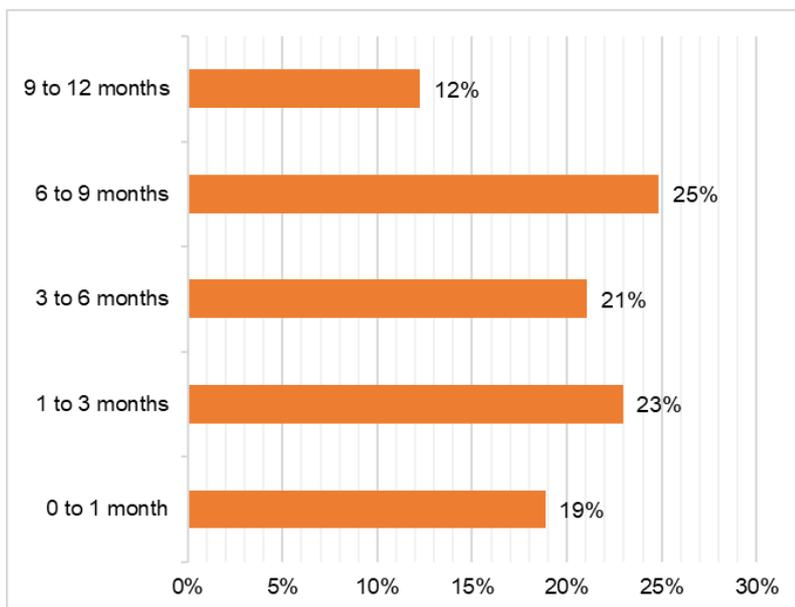
²³ In the first 18 months of Solent Jobs, June 2016 to December 2017, the employment rate in the Solent LEP area averaged 76.6%. In comparison it averaged 72.6% in London and 69.5% in Greater Manchester for the comparable initial 18-month delivery period (October 2014 to February 2016 for Working Capital and March 2014 to September 2015 for Working Well).

Length of time to move into employment

Figure 5.3 shows the length of time taken by participants to move into employment.²⁴

Just over two-fifths of participants (42 per cent) moved into employment within three months of joining the programme. Just over a fifth (21 per cent) secured employment having spent between three to six months on the programme. A quarter of participants (25 per cent) moved into employment after spending between six and nine months engaged on the programme and 12 per cent took between nine and twelve months. The average time taken to move into employment was 5 months.

Figure 5.3 Length of time individuals took to move into employment in months



²⁴ As noted, of the 318 participants to move into employment, 33 participants had held multiple jobs (up to four) over the course of the programme, including changing job to a new role or holding multiple jobs at one time. Only the date of first roles secured have been included in the analysis of time taken to achieve an employment outcome.

Comparing outcomes across different groups

Figure 5.4 shows the employment rates²⁵ of participants according to their primary health condition. The overall employment rate on the programme was 28 per cent. Interestingly, participants with severe mental illness had the highest employment rate at 38 per cent, closely followed by participants with a visual impairment (36 per cent). 32 per cent of participants with Autism/Asperger syndrome moved into employment. This demonstrates that the programme was able to support those with a range of health needs into work and that severity of their primary health condition did not prevent the achievement of employment outcomes.

Figure 5.4 Employment outcomes by primary health condition

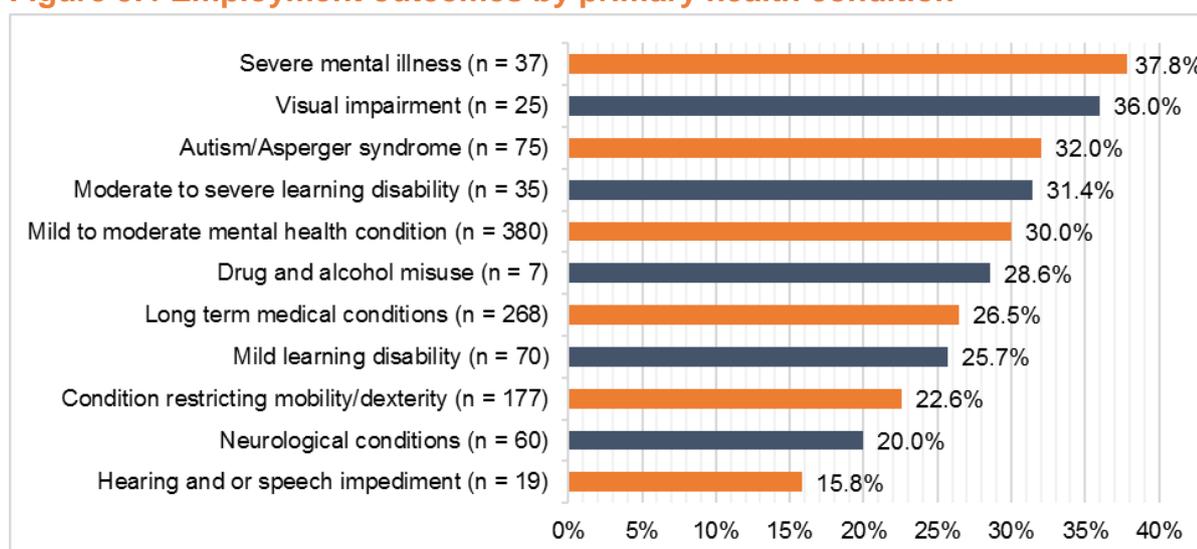


Figure 5.5 shows the employment rates of participants according to their length of time unemployed when they joined the programme. Participants who were unemployed for between two and five years had the highest job entry rate, of 63 per cent (201 participants). Interestingly, individuals who had been unemployed for less than a year had a lower job entry rate (9.4 per cent or 30 individuals) than individuals who had been unemployed for more than ten years (13 per cent of 41 individuals).

²⁵ Employment rate includes all participants who moved into employment, not those who sustained employment

Figure 5.5 Employment outcomes by length of prior unemployment

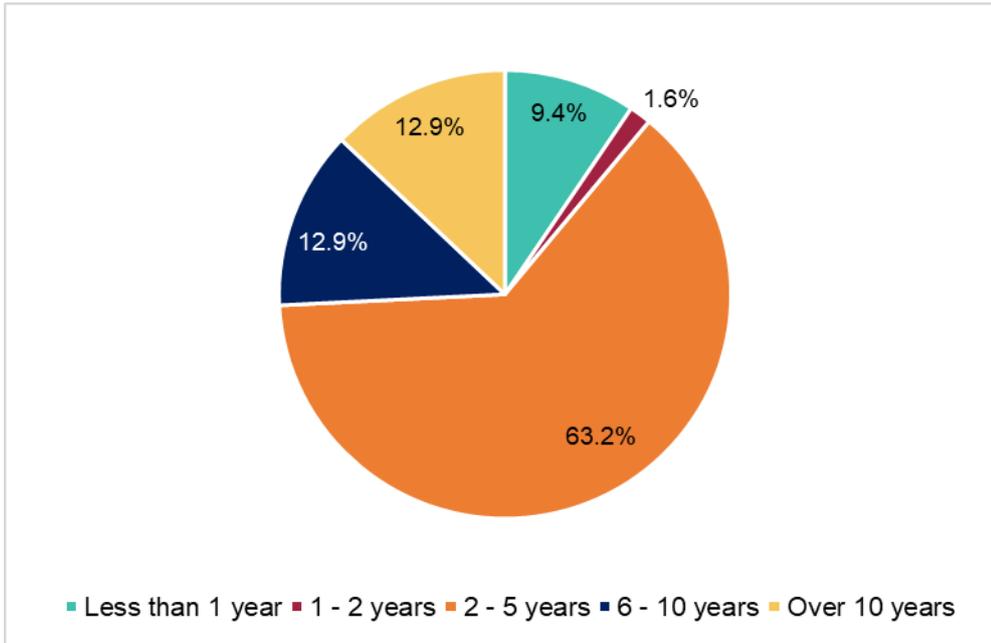


Figure 5.6 shows the employment rate of participants according to their age. It is interesting to note that the employment rate of over 50s was only around 2 percentage points lower than those under 50.

Figure 5.6 Employment outcomes by age

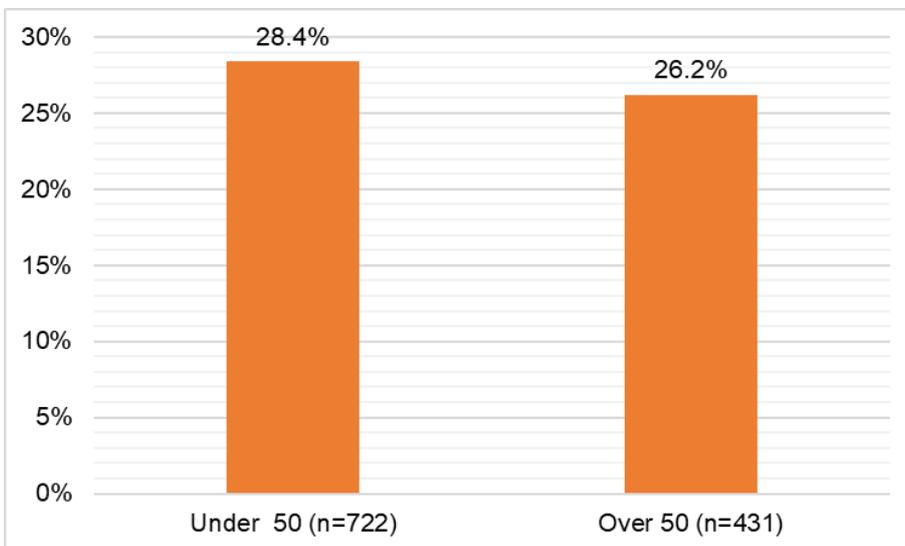
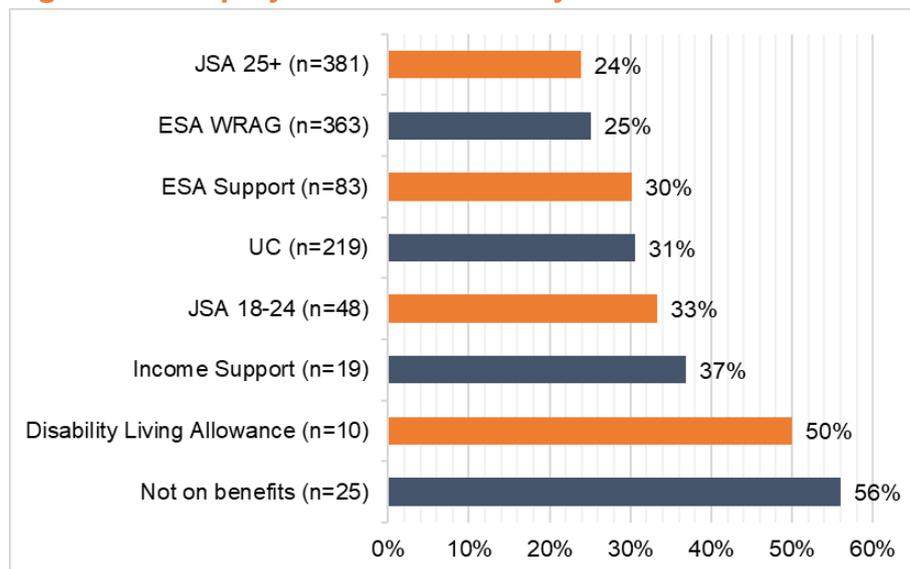


Figure 5.7 shows the employment rate of participants by their benefit status. Participants who were not on benefits had the highest employment rate, with 56 per cent moving into a job. Half of participants on Disability Living Allowance

secured an employment outcome, with 37 per cent of those on Income Support achieving a job outcome. However, it should be noted that there were small numbers of people in both of these groups.

Figure 5.7 Employment outcomes by benefit status



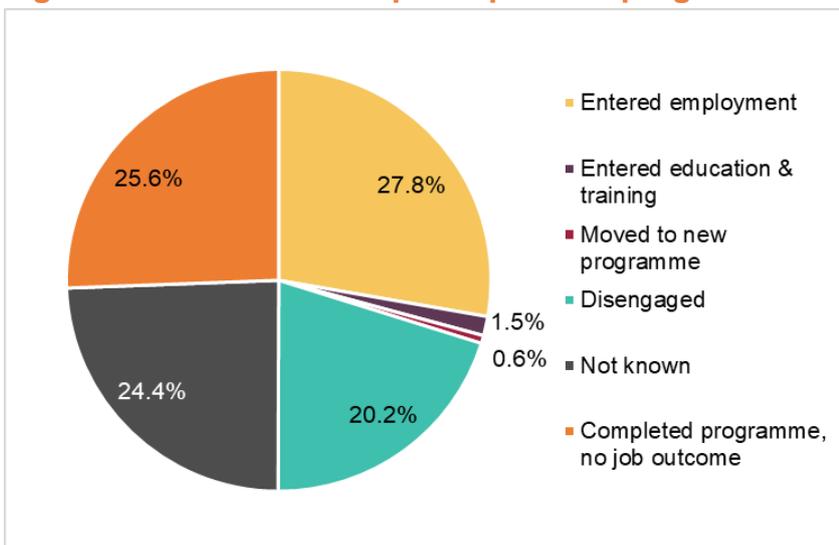
Additional analysis of employment outcomes across different characteristics showed that:

- 44 per cent of participants with qualifications at Level 4 and above found work, compared to 32 per cent of participants with Level 3 qualifications, 33 per cent with Level 2 qualifications, 23 per cent with qualifications below Level 2 and 24 per cent with no qualifications.
- Out of the 101 participants who had ex-offender status, 35 moved into work, giving them a job outcome rate of 35 per cent. 17 of those who moved into work sustained their job for 26 weeks.
- Out of the 78 participants with lone parent status, 17 moved into work, giving them a job outcome rate of 22 per cent. 11 of those who moved into work sustained their job for 26 weeks.
- Of the 318 participants that moved into work, 211 were male and 107 were female, giving them a job outcome rate of 30 per cent and 24 per cent respectively.

- Of the 318 participants who moved into work, 295 were White British and 22 identified themselves in 'other' ethnic groups, giving them a job outcome rate of 28 per cent and 29 per cent respectively.

The final status of participants was recorded. Overall, over a quarter (28 per cent) entered employment. Of these 68 per cent entered sustained employment. Another quarter (26 per cent) completed the programme without a job outcome, although 35 of them (12 per cent) completed a Work Taster and 60 (20 per cent) completed a TEP. Most of the remaining participants' status is not known (24 per cent) and disengaged (20 per cent). 1.5 per cent entered education, training or a voluntary position, and 0.6 per cent moved to a new programme.

Figure 5.8 Final status of participants at programme exit



Barriers preventing outcomes

Adviser contact and staff changes

An issue raised with the support, which came up more than in previous waves of research was difficulties in contacting their adviser or the perception that their adviser was too busy to help them. This often happened when a participant's adviser had changed. These participants expressed frustration that their new adviser was less responsive and supportive. For one person, this had increased their stress.

'Really, like, sort of, knocking your head against a brick wall trying to get hold of the person that you're supposed to be able to speak to, ask advice, and they're supposed to be looking out for possible vacancies for you....I thought, "This is

absolutely hopeless, I'm wasting my time. I might as well just go out there and apply for jobs myself... (Female, 51, wave three)

Others spoke about momentum being lost when they changed adviser or after they had completed a course – because the steps taken were not followed up and built upon.

'I went on a couple of courses at least and I found that I could come out of there thinking, yes, I could do something... but then because it wasn't continued, the motivation and whatever, I just sort of lost it again...It's like almost being palmed off, [the provider] don't want you for the next eight weeks, go on this course sort of thing...it's bringing the problem to somebody else.' (Female, 63, wave three)

Participant's health

As discussed in Chapter 3, some participants' health had worsened since being part of the programme and a few people interviewed disengaged for this reason. Some respondents explained that because of their deteriorating health, they were having to spend a lot of time addressing this, rather than focusing on moving closer and/or into work.

'I haven't been able to [look for work] because of the injury. You know, I've had to focus on trying to get better.' (Male, 62, wave three)

Throughout the research some participants discussed difficulties with accessing suitable health support. The two main reasons for this were long-waiting lists which led to delays in receiving treatment, and not being aware of where to access appropriate support; which was something those individuals desired more help with.

Employer's ability to hire participants

A few participants explained that it was clear that their TEP employer was not going to be able to employ them once the placement finished. A lack of finances to do so was usually the reason given for this. The Business Engagement Manager explained that they had learnt that engaging with sole traders was maybe not the most suitable option because opportunities were unlikely to be sustainable.

Transport issues

Some of the areas covered by the SJP were rural, with infrequent and costly public transport. This limited the pool of job opportunities for some participants. Transport costs were covered during participation on SJP and for the first month someone was in work, but not after this. Some participants believed that not being able to

drive was a barrier to employment, and one participant expressed disappointment that the programme could not support them to finance driving lessons.

Some participants also expressed reluctance to travel to different areas for work. They wanted to find a job close to home, which again limited the number of opportunities that they could apply for.

Length of the programme

Length of programme was cited as a barrier to achieving outcomes by both programme advisers and participants. According to advisers, some participants with more complex needs required the full 12 months of the programme to get to the stage of being work ready. One adviser expressed frustration at having to close the contract of those participants who clearly would have benefited from longer-term support.

'I think also maybe a little bit longer than a year because you're just getting to a point with some people...their time on the programme has come to an end but they're just at the point of where they're ready and, you know, the opportunities are coming in and I just feel so frustrated because I've got to shut them.' (SJP adviser, Southampton)

Participants noted that having to leave the programme after they had just begun to gain momentum and make progress would have a detrimental impact on their motivation to engage in similar programmes in the future.

'I'm not too happy about [changing support providers] because I mean, you know...it's taken us this long to get started and get really into things and I don't know, like, if I can be bothered to start all over again.' (Female, 20, wave three)

Contextual factors influencing delivery and outcomes

Universal Credit (UC) has been live in Southampton since March 2015, and in full service since February 2017. This was a significant change to the benefit system that was not anticipated when the programme was designed. The main consequence of this, identified by programme staff and stakeholders, was that it had made claimants more risk averse. The wait of at least five weeks until the first payment, combined with the negative media coverage, made some people cautious about joining the programme or entering work. This was because if their benefits changed as a result of finding work or thereafter leaving employment, they would have been moved onto Universal Credit, which they were worried about.

However, one participant said that they were motivated to join the programme because they wanted to move off UC.

The introduction of UC was also felt to have had a negative impact on JCP referrals (as explained in further detail in Chapter 3). However, it was felt to be working well once participants had entered employment because people were able to remain on UC and it gave them additional flexibility when working part-time.

Employer practices were found to be barrier to some organisations signing up to the programme. For example, local staff at a large national food business were interested in supporting the programme, but staff in the Head Office did not support the initiative and were reluctant to get involved. Other businesses felt that their existing HR processes prevented them from hiring participants as they had fixed methods of recruitment. In addition, advisers explained that they tended to avoid care work because the recruitment process was found to be laborious and frustrating.

The Work and Health Programme was not perceived to have had a noticeable impact on referrals because it was only running for last three months of the SJP referral period. However, JCP staff did acknowledge that this became a priority once it was live. JCP staff also commented that work coaches were now more familiar with the programme target group because of their involvement in SJP and this had changed perceptions of this cohort. An issue raised was that there were some double referrals, where people were referred to both programmes.

5. Solent Jobs Programme's impact and cost-effectiveness

- Our preferred approach to conducting the impact assessment would have been to use DWP administrative data for both the Solent Jobs Programme (SJP) participants and the counterfactual groups against which they are compared. Unfortunately, we not able to gain access to this data. Therefore, we matched the programme Management Information (MI) against data from the Labour Force Survey. Matching was undertaken on the basis of nine variables. (Gender, ethnicity, age group, primary and secondary health conditions, number of dependent children aged 16 and under, prior education level, housing tenure and length of time out of work).
- In addition to matching, we used multivariate regression analysis to double check that the estimated treatment effect (impact of participation in SJP) was not being biased by the influence of other factors. **The different models estimated all indicated that SJP has a positive and statistically significant impact on job entry within 12 months for its participants.** The findings suggest a treatment effect of between 7.0 and 8.7 percentage points on the job entry rate.
- The Cost Benefit analysis used Learning and Work's approach, which is consistent with official UK government guidance. To conduct this, we considered intervention costs such as referral costs, programme delivery costs, administration costs and costs falling on employers or participants. When identifying programme benefits, we considered the economic benefits in terms of additional economic output of people being in employment who otherwise would not have been; non-employment benefits resulting from participants being in work (for example health improvements or reductions in criminal activity), and; redistribution benefits as SJP participants can be assumed to be generally living in low income households.
- **The results of the CBA show that for every £1 of costs, the programme provides an estimated £1.76 of benefits.** When sensitivity analyses were undertaken all the results for the benefit to cost ratios stayed above one and therefore, in all scenarios the benefits of the programme exceed its costs.

The focus of this section is firstly on the impact of SJP on participants' subsequent employment outcomes. This estimated impact is an additional or net impact taking

account of what it is estimated would have happened otherwise in the absence of SJP. We then move on to assessing the costs and benefits of SJP to society as a whole, that is the total social and economic costs and benefits of the intervention. These are sometimes known as public value costs and benefits.

Impact assessment

Our preferred approach to the impact assessment would have been to use linked administrative datasets for both SJP participants (the treatment group) and a matched comparison group (the counterfactual).

The use of administrative data is unfortunately not possible. Access to DWP administrative data has become increasingly difficult to obtain in the last couple of years, and we have not been able to persuade DWP to provide such access in this case. This is mainly down to a lack of internal DWP analyst resources which has meant that DWP prioritise requests for data access very rigorously against their internal criteria. We have also been unsuccessful in obtaining access to DWP data for the assessment of other devolved local programmes in England, and this appears to be a common experience amongst other research organisations.

Hence the approach that we have used is to match of the programme MI against data from the Labour Force Survey (LFS). The longitudinal LFS shows individuals' labour market states at quarterly intervals and runs for five quarters. This enables us to look at outcomes up to 12 months after participants started on the programme.

Data set construction

In order to facilitate the matching of the programme MI to the LFS the categorisations used in the MI needed to be aligned with that in the LFS. In some cases, this also required us to derive new LFS based variables from existing LFS variables. We initially used data from 18 longitudinal quarterly LFS datasets²⁶ to provide a pool of potential comparators for the SJP participants. The purpose of the matching stage is then to pick those potential comparators who mostly closely resemble (match) the programme participants.

²⁶ The 18 datasets used were for the periods July to September 2015 to July to September 2016 through to July to September 2017 to July to September 2018 plus April to June 2012 to April to June 2013 through to April to June 2014 to April to June 2015. The reason for the gap between these two sets of datasets was that the LFS datasets for the intervening period did not contain all the health information required for matching to the programme participants.

Matching

We had information on a range of the participants' characteristics and were able to use ten of these to match on with the LFS data:

- Gender
- Ethnicity
- Age Group
- Primary Health Condition
- Secondary Health Condition
- Number of dependent children aged 16 or under
- Education level at start of programme]
- Housing Tenure
- Length of time out of work

We first tried to match using a Coarsened Exact matching approach. This matching approach has in recent years been seen as a preferred approach to matching in the research community. Formal statistical comparisons have indicated that it achieves a closer match between the treated group (programme participants) and the matched comparison group it derives. However, this potentially comes at the cost of matching only a subset of the treated group and only having a small number of matched comparators. This proved to be the case for SJP as unfortunately, this approach was only able to match around 7 per cent of the participants with a comparator from the LFS. Broadly, the reason for this was that while SJP participants are a very particular subsection of the general population, the LFS is a general survey of the population and will thus include few individuals who are very similar to SJP participants.

Instead we used Nearest Neighbour matching. This approach matches an individual participant with the individual or weighted average of individuals who is most like them (their nearest neighbour) from the comparison group. The potential problem with this matching approach is that the nearest neighbour may still be rather dissimilar to the programme participant. Hence, we constrained this approach by setting different limits on the extent to which the matched comparators could differ from SJP participants. The fundamental trade off here is that the tighter the constraint on the degree of difference we allow between participants and the matched comparators the lower the number of participants we can match to an LFS based comparator.

Table 6.1 below summarises the different constraints imposed on this degree of difference and the implications this has for the number of participants we can match and the degree of difference that remains between those participants we have matched.

Table 6.1: Differing constraints on the Nearest Neighbour Matching Process

Degree of Constraint	Number of Participants Matched	Summary measure of distance reduction compared to unmatched data
None	1,153	35%
2 standard deviations	759	58%
1 standard deviation	593	79%
0.5 standard deviation	521	90%
0.25 standard deviation	490	96%

Regression analysis

Once we had the treated and matched comparison groups, we combined them into one dataset with an identifier indicating whether individuals are in the treatment (SJP participant) or comparison group. We then estimated a multivariate regression as follows:

$$\ln \left(\frac{p}{1-p} \right) = \beta_0 + \beta_1 T + \sum \beta_i X_i, \text{ for } i = 2, \dots, n$$

Where p = the probability of entering work within 12 months, T = treatment variable (1 for participants and 0 for comparison group) and X_i are a set of other potential explanatory variables which are the ten variables noted above that we used for matching. The coefficient β_1 then represents the treatment effect of participating in SJP.

Often for matching based studies of the sort we have undertaken, the multivariate modelling stage is dispensed with and researchers just look at the difference in outcome being considered between the treated and comparison groups. The multivariate approach which includes the matching variables as potential

explanatory variables influencing the outcome variable being modelled is a superior approach. This is because it provides a further check that the estimated treatment effects are not being biased by the influence of these other factors. Notably, in our study of Working Well in Greater Manchester²⁷ we found that some of these matching variables were statistically significant even though our matching stage had passed all the standard balance tests between the treated and comparison groups. Hence, if we had not adopted this multi-variate approach the estimated treatment effect of Working Well would potentially have been biased, and the same could apply to SJP, if we had not adopted this multivariate approach. Table 6.2 summarises the results of our regression analysis using the five different matched comparison groups we constructed using the different constraints on the degree of difference between SJP participants and the matched comparison group. This table focuses on the treatment effect of the SJP. The full regression results are shown in Annex B.

Table 6.2: Regression results for the treatment effect or impact of Solent Jobs, 12 months job entry

Matching constraint	Treatment effect coefficient	Treatment effect in percentage point terms	Implied deadweight
None	0.432**	7.2% points	71%
2 standard deviations	0.332*	5.6% points	77%
1 standard deviation	0.424**	7.0% points	72%
0.5 standard deviation	0.479**	7.8% points	68%
0.25 standard deviation	0.541**	8.7% points	65%

Note: * ** indicates that the coefficient is statistically significant at the 5% level, ** indicates that the coefficient is statistically significant at the 1% level.

²⁷ Melville et al (2018)

The different models estimated all indicate that SJP has a positive and statistically significant impact on job entry within 12 months for its participants. The treatment effects are the difference in the log of the odds ratio for 12-month job entry between participants and the respective matched comparison group. These different treatment effects can be translated into percentage points terms of between 5.6 percentage points and 8.7 percentage points. Another way of thinking about this is what this implies for Deadweight (the estimated extent to which participants would have moved into work anyway if they had not participated in SJP). This ranges from 65 per cent to 77 per cent.

Our judgement is that only the three matching approaches which had imposed a constraint or statistical caliper of at least one standard deviation on the overall measure of distance (or degree of dissimilarity) between participants and their potential matched comparison had reduced the degree of difference between the participants and the matched comparison sufficiently for us to be confident as to the regression results shown in Table 6.2. Hence, we posit that the treatment effect lies between 7.0 percentage points and 8.7 percentage points (or implied deadweight between 65 per cent and 72 per cent) and for the Cost Benefit Analysis we use the middle estimate of 7.8 percentage points or 68 per cent deadweight.

Cost Benefit Analysis

Learning and Work's approach to cost benefit analyses of labour market programmes is based on, and consistent with, the Treasury Green Book, the DWP Social Cost Benefit Analysis Framework, and other official guidance from government departments.

Costs

An intervention is likely to have a range of costs:

- Referral Costs
- Programme delivery costs
- Administration costs
- Costs falling on employers or participants

Referral Costs

There will be some costs of referring an individual to the programme, for example, the cost of the staff time involved in explaining the intervention to the potential participant. The vast majority of referrals to the programme came from either

Jobcentre Plus (JCP), the local authorities engaged in the programme, or the outside provider, Wheatsheaf Trust (96 per cent). With regard to referrals from JCP, local authority staff were based at JCP offices three days a week to deal with referrals and the costs of these staff is included in the row for Front Line Staff Delivery in Table 6.3 below. This item also accounts for local authority referral costs, whilst the amounts paid to Wheatsheaf Trust will include payment for referrals. Hence, the costs of 96 per cent of referrals to the programme will be included in these two cost lines. The costs of the remaining 4 per cent of referrals, which include self-referrals, will not be included in these costs, but these costs are likely to be minimal in total and so their exclusion will not materially bias the cost benefit analysis.

Programme Delivery Costs

Programme delivery was undertaken internally by Portsmouth and Southampton councils and externally by Wheatsheaf. In Table 6.3 below, these costs are included in the two rows: “Front Line Staff Delivery” and “Wheatsheaf Trust”.

Administration and Other Costs

Table 6.3 below includes a row for management and central administration costs. Also included as separate lines, are the costs of the programme evaluation and a small amount of miscellaneous costs.

Transfer Payments and Resource Costs

The SJP budget funded participants’ wages while they are employed under the Transitional Employment Programme (TEP). One key issue for cost benefit analysis is the need to distinguish between transfer payments and resource costs. Transfer payments are payments of money for which no good, or service is received in exchange, and so consumes no resources that might be used for other purposes (opportunity cost). Examples include social welfare payments such as, social security, old age or disability pensions, student grants, or unemployment benefits. Similarly, these wage payments are a subsidy to business and are also transfer payments, as the organisations concerned are not required to supply goods or services to the SJP in exchange for these payments. Hence the costs of these wage subsidies (Participants’ Payroll Costs) is not included in the line for total resource costs in Table 6.3 below.

Table 6.3: Solent Jobs Programme costs, 2015/16 prices

Financial Year	2015/16	2016/17	2017/18	2018/19
Evaluation Costs	£0	£12,896	£12,554	£12,023
Front Line Staff Delivery	£0	£181,222	£246,035	£220,428
Management & Central Admin	£30,184	£236,233	£146,612	£105,797
Miscellaneous	£0	£3,428	£1,606	£475
Participants Payroll Costs	£0	£94,361	£296,555	£171,147
Participants Support Costs	£0	£11,017	£11,041	£5,466
Support and Contracted Services	£0	£10,462	£48,092	£15,521
Wheatsheaf Trust	£0	£85,706	£218,316	£78,178
Grand Total	£30,184	£635,325	£980,810	£609,036
Total Resource Costs	£30,184	£540,965	£684,254	£437,889

Source: Southampton City Council, L&W calculations²⁸

The costs above do not include any estimates of the non-wage costs falling on employers offering work tasters or work placements under the transitional employment programme (TEP). However, these employers are likely to benefit from the efforts of those undertaking work tasters and work placements too and we would expect these to be at least equal to the costs otherwise they would not be willing to participate in these parts of the programme. Hence, these effects should offset each other once costs and benefits are combined.

²⁸ Note: Data in current prices was adjusted to 2015/16 constant prices using the GDP deflator to allow for inflation.

Benefits

The benefits of labour market interventions such as SJP potentially take two forms: the economic benefits of people being in employment who otherwise would not, and the non-employment benefits that flow from these people being in work. These non-employment benefits include, for example, health improvements, or reductions in criminal activity.

Employment Benefits

As discussed, our impact assessments have suggested that the net impact of SJP on job entry within 12 months lies between 7.0 percentage points and 8.7 percentage points. For this Cost Benefit Analysis, we use the middle estimate of 7.8 percentage points or 68 per cent deadweight.

From this we need to calculate the employment benefits in terms of additional economic output. The first step is to calculate the impact of SJP on the wage bill (the net employment impact times wages of those entering work). As data is not available on the wage levels at which SJP participants enter work, an assumption as to entry level wages must be made.

Evidence suggests that entry level hourly wages are around the 20th percentile of the wage distribution²⁹. This is also broadly consistent with the findings of Adams et al (2012)³⁰, which DWP tend to use for their cost benefit analyses. For ESA claimants entering work this report found mean annual salaries of £16,800 for full-time workers and £6,900 for part-time workers in 2011. On a weekly basis, these figures translate to £323.08 for full-time workers and £132.69 for part-time workers.

Data from the Annual Survey of Hours and Earnings (ASHE) indicates that in 2011 the 20th percentile of gross weekly earnings for full-time workers was £328.90, which is very close to the figures derived from Adams et al (2012). For part-time workers, the equivalent figure was £80.50 which is much lower than the results suggested by Adams et al (2012). However, for part-time workers this comparison is complicated by differing patterns of hours worked between leavers from ESA

²⁹ See Gregg, P. Knight, G. and Wadsworth, J. (1999), 'The cost of job loss', in Gregg P. and Wadsworth J. (ed) (1999), 'The State of Working Britain', and Faggio G. Gregg P. and Wadsworth J. (2011) 'Job tenure and job turnover' in Gregg, P and Wadsworth, J (ed) (2011) 'The Labour Market in Winter: The State of Working Britain',

³⁰ Adams, L. Oldfield, K. Riley, C. and Skone-James, A (2012), *Destinations of Jobseeker's Allowance, Income Support and Employment and Support Allowance Leavers 2011*, DWP Research Report No. 791.

taking up part-time work and the hours of part-time workers more generally. Adams et al (2012) report that just 24 per cent of ESA leavers entering part-time work were working for 16 hours or less compared to 40 per cent of all part-time workers based on ASHE data. Hence, the figures for weekly earnings for part-time workers overall from ASHE will be lower relative to those reported by Adams et al (2012), and do not contradict the assumption that people typically enter work at around the 20th percentile. However, it also points to the need to make some assumptions regarding weekly hours of work for those entering employment.

Here we use data for hourly earnings and weekly hours of work taken from the ASHE for part-time and full-time workers. These pertain to the Solent LEP area. These are adjusted to the three categories for hours of work of those entering work from the Solent Jobs: part-time workers working less than 16 hours a week, those working 16-25 hours a week and those working 25 hours or more a week. Combining these figures for hourly pay and weekly hours of work provides the figures for weekly pay received by individuals, depending on the employment type they undertake. These are shown in Table 6.4

Table 6.4: Estimated weekly pay for SJP participants entering work

	Part-time	16-25 Hours	25+ Hours
2016/17	£67.16	£152.75	£331.05
2017/18	£76.80	£162.24	£346.07
2018/19	£79.30	£162.37	£352.30

The SJP MI provides information on when participants entered work and the type of work they moved into in terms of weekly hours. These are shown in Table 6.5

Table 6.5: Jobs entered by SJP participants

	Part-time	16-25 Hours	25+ Hours	All Jobs
2016/17	2	11	13	26
2017/18	16	67	74	157
2018/19	16	62	57	135

If we combine these weekly pay and job entry data, then this provides an estimate of weekly wage bill in each financial year. To calculate the overall wage bill requires an assumption as to how long SJP entrants work after they enter work. For those that sustain work they will have been in work for 26 weeks. This is an uncompleted job spell.

On average we would expect to observe someone half way through their completed job spell. Therefore, for those with job sustainment we assume that their job lasts 52 weeks. Those who have not yet achieved a job sustainment will have been in work for some time up to 26 weeks, so on average we assume this to be 13 weeks. Again, this is an uncompleted job spell, so we assume that their completed jobs spell will on average be 26 weeks. According to the programme MI, 59 per cent of people entering work achieve a job sustainment. With these assumptions this gives us an average job length for SJP of 41.4 weeks. This is quite a conservative assumption as while recent research on this topic is lacking, research from the late 1990s suggests that on average a new job lasts around 15 months on average³¹. The estimates of the total wage bill using this 41.4-week assumption for the duration of a new job are shown in Table 6.6. These are also adjusted to allow for the fact that our impact assessment suggests that 68 per cent of the jobs from SJP are deadweight, so only 32 per cent of these represent a net additional impact from the programme.

We then need to move from this estimate of the net impact on the wage bill to an estimate of economic output. Our approach is to add on the cost to employers of employer national insurance contributions (NICs) and employer pension contributions. This then gives us an estimate of the total cost to employers of employing the SJP participants. Then, given that the output generated by these workers must be at least equal to the costs of employing them, this gives an estimate of the additional economic output these workers generate. This figure is adjusted for inflation using the GDP deflator to give us an estimate of real GDP.

³¹ Gregg and Wadsworth (1999), "Job Tenure 1975-98", in Gregg and Wadsworth (ed), "The State of Working Britain", and Booth, Francesconi and Garcia-Serrano (1997), "Job Tenure: Does History Matter?", CEPR Discussion Paper 1531.

Table 6.6: Impact on the Wage Bill and Real GDP of SJP

	Wage Bill (current prices)	Real GDP (constant prices)
2016/17	£80,998	£85,530
2017/18	£499,207	£517,330
2018/19	£415,914	£427,224

Non-Employment Benefits

The non-employment impacts of labour market interventions, for example wellbeing impacts, are potentially important. Guidance on valuing wellbeing effects was included in the Treasury Green Book in 2011 (pages 57 and 58). Their valuation is challenging but, as the Green Book argues, is essential to a full assessment of the benefits of social and employment interventions. In addition, the New Economy Manchester Model which forms part of the supplementary tools and guidance underneath the Green Book, provides various metrics for quantifying a range of non-employment benefits.

Examples of non-employment benefits can include health improvement, and reductions in crime, which reduce costs of providing public services such as to the NHS and the Police. We have used this model to estimate the non-employment benefits from SJP. These are summarised in Table 6.7. The model already applies a discounting factor to these non-employment benefits so a single net present value (NPV) figure is shown for each category of benefits. The discount rate used here is 3.5 per cent per year as per Treasury Green Book guidance.

Health Improvements

All participants have health condition(s) in order to be eligible for the programme. The estimated number of participants with mental health problems is based on programme MI figures. The economic value is based on the reduced health cost of interventions such as prescribed drugs, inpatient care, GP costs, other NHS services, supported accommodation and social services costs and avoided lost earnings for those with no improvement in mental health. For mental health, these economic benefit figures are based on a Kings Fund report from 2008³² which

³² Paying the Price - The cost of mental health care in England to 2026, Kings Fund, 2008.

uses 2007 figures and these values updated to the period covered by SJP using the GDP deflator. For more general health improvements these are based on unpublished DWP modelling and similarly updated.

Reduced Crime

The estimated number of participants who are at risk of committing crimes is based on number of those with a previous history of offending. The economic value of reduced crime is based on research from the Home Office³³. These benefits cover reduced public service costs, reduced insurance costs, lower loss of property costs, and the physical and emotional impact on the victims of crime. Again, these values are updated using the GDP deflator.

Reduced substance dependency

The estimated number of participants likely to suffer from drug or alcohol dependencies was based on the programme MI. The monetised benefits are based on the Drug Treatment Outcomes Research study (DTORS): Cost-effectiveness analysis³⁴ and estimating the crime reduction benefits of drug treatment and recovery³⁵. Alcohol treatment savings are based on the Nice Clinical Guidance 115³⁶, Liverpool Public Health Observatory: Prevention Programmes Cost-Effectiveness Review: Alcohol³⁷, and The Drug Treatment Outcomes Research Study (DTORS): Cost-effectiveness analysis³⁸.

Reduced Hospital Admissions

We have included savings arising from the reduction in the number of participants who, based on the programme MI, are expected to regularly attend hospitals and the subsequent savings for a reduction in this.

³³ The economic and social costs of crime against individuals and households 2003/04, Home Office Online Report 30/05 and Revisions made to the multipliers and unit costs of crime used in the Integrated Offender Management Value for Money Toolkit, Home Office, 2011.

³⁴ The Drug Treatment Outcomes Research study (DTORS): Cost-effectiveness analysis, Research Report 25, Home Office, 2009.

³⁵ Estimating the crime reduction benefits of drug treatment and recovery, National Treatment Agency for Substance Misuse, 2012.

³⁶ Alcohol-use disorders: alcohol dependence – Costing report, National Institute for Health and Clinical Excellence, 2011.

³⁷ Prevention Programmes Cost-Effectiveness Review: Alcohol, Liverpool Public Health Observatory, 2009.

³⁸ The Drug Treatment Outcomes Research study (DTORS): Cost-effectiveness analysis, Research Report 25, Home Office, 2009.

Table 6.7: Non-employment benefits from Solent Jobs, Net present value

Benefit Type	Net present value
Improved health outcomes	£704,831
Mental Health Improvement	£322,300
Reduced Crime	£36,2010
Reduced substance dependency	£2,319
Reduced Hospital Admissions	£74,225
Total	£1,139,885

Redistribution

SJP will also involve some redistribution benefits as those whose move into work as a result of the programme (the net employment impact) are likely to be in low income households relative to taxpayers overall who ultimately pay the costs of the programme. The value that individuals place on each additional pound they receive or lose is higher for people with low incomes relative to people with higher incomes. It is possible to account for this phenomenon in a CBA using welfare weights, in which the monetary outcomes that accrue to lower income groups are weighted higher than those that accrue to higher income groups. The DWP social costs benefit analysis framework guidance suggests weighting the income gains accruing to former recipients of out of work benefits who move into work by 1.5 to estimate these redistribution benefits. We use the weekly earnings estimates shown in Table 6.4 and compare these against out of work benefit incomes to estimate the income gains from moving into work. It should be stressed that in the absence of using a complicated tax-benefit model and detailed information on the household circumstances of programme participants, these calculations only provide an approximation of these income gains and the consequent redistribution impact. One reason for this is that these estimated income gains have to be adjusted for the impact of income tax and employee National Insurance contributions. The results of our calculations of these estimated weekly income gains are shown in Table 6.8.

Table 6.8: Estimated Weekly Income Gains from Moving Into Work

Benefit Type	Part-time	16-25 hours	25+ hours
JSA 25+	£3.92	£80.49	£208.76
JSA 18-24	£4.55	£94.32	£212.71
UC	£52.26	£80.59	£208.70
ESA WRAG	£70.44	£54.05	£201.21
ESA Support	£70.44	£45.41	£198.74
Income Support	£3.92	£80.49	£208.76
Disability Living Allowance	£70.44	£147.01	£227.77
Not on benefits	£70.44	£147.01	£227.77

We can then calculate the aggregate redistribution benefits by taking account of the estimated length of a job (41.4 weeks as discussed above), deadweight (68 per cent) and redistributive weight of 1.5. These are shown in Table 6.9. After summing up and discounting the net present value (NPV) of these benefits are £791,967.

Table 6.9: Aggregate Redistribution Benefits from SJP

Benefit Type	Part-time	16-25 hours	25+ hours
JSA 25+	£546	£68,778	£170,088
JSA 18-24	£181	£14,995	£25,362
UC	£10,385	£33,631	£149,300
ESA WRAG	£8,399	£50,486	£151,939
ESA Support	£5,599	£8,121	£47,392
Income Support	£0	£9,597	£4,148

Benefit Type	Part-time	16-25 hours	25+ hours
Disability Living Allowance	£2,800	£5,843	£4,526
Not on benefits	£4,200	£11,686	£31,683

In work costs

When an individual enters work there are additional unavoidable costs they must incur. These costs include travel to and from work, and possible childcare costs for parents. These costs should be thus be taken into account. We do so using the approach suggested by the DWP Social Cost Benefit Analysis Framework.

Following the DWP approach suggests a figure for average annual childcare costs of £783. The DWP's guidance is silent on how such costs vary with the number of dependent children. We assume this figure where an individual has one or two dependent children and double it where an individual has three or more children. Such costs only pertain where an individual is in work, so we adjust these annual costs down to allow for our assumption that the job entered lasts 41.4 weeks. We also allow for deadweight (68 per cent). This approach suggests a figure for total child care costs for the net number of parents entering work of £11,770.

Following the DWP approach suggests a figure for average annual travel to work costs of £502. Again, such costs only pertain where an individual is in work so we adjust these annual costs down to allow for our assumption that the job entered lasts 41.4 weeks. We again also allow for deadweight (68 per cent). This approach suggests a figure for total travel costs for the net number of participants who entered work of £40,631.

Overall Results

The final stage of our CBA is to discount all the costs and the employment and redistribution benefits to a single NPV figure as already done for the non-employment benefits and to calculate the overall NPV and Benefit to Cost Ratio (BCR) for SJP. Again, for discounting a 3.5 per cent per year discount rate is used. These calculations are shown in Table 6.10.

Table 6.10: Overall Cost Benefit Results

	NPV
Employment Benefits (1)	£950,903
Non-Employment Benefits (2)	£1,139,885
Redistribution (3)	£791,967
Total Benefits (4) (= (1) + (2) + (3))	£2,882,754
Programme Resource Costs (5)	£1,586,565
In Work Costs (6)	£50,629
Overall NPV (= (3)- (4))	£1,245,560
Benefit to Cost Ratio (BCR) (= (3) / (4))	1.76

Table 6.10 shows that the total socio-economic benefits of SJP exceed its costs. The overall NPV for Solent Jobs is around £1.25m and the Benefit to Cost ratio (BCR) is 1.76 i.e. for every £1 of costs, the programme provides an estimated £1.76 of benefits.

Sensitivity Analysis

Table 6.10 shows the central results for our costs benefit analysis, but here we undertake some sensitivity analyses around this central estimate. As noted in Table 6.2, for the three models where matching had reduced the distance between the programme participants and the matched comparison group sufficiently for us to be confident about the regression results from these models, the implied level of deadweight varied between 65 per cent and 72 per cent. Hence our first two sensitivities use these values for deadweight in place of our central assumption of 68 per cent. The lower deadweight assumption increases the BCR to 1.87 and the higher deadweight assumption reduces it to 1.67.

Substitution effects refer to where participants have obtained employment at the expense of competing jobseekers. Where competing jobseekers would otherwise have filled the vacancies involved, then the output (economic benefits) associated with those vacancies would have been produced in the absence of the

programme. Substitution effects can be estimated based on existing evidence. There is a large degree of uncertainty regarding the size of the substitution effect and very little evidence exists for the UK. Estimates of the impact are sensitive to a number of assumptions and therefore, in line with DWP guidance, substitution effects are only included in sensitivity analyses and not the central estimate of any costs benefit analysis. The DWP recommend that for a supply side programme, such as SJP, that a 20 per cent assumption be used to allow for substitution. When we use this assumption, it reduces the BCR for Solent Jobs to 1.61.

The DWP social cost benefit analysis framework argues that a sensitivity analysis should be undertaken to allow for what it calls the Social Cost of Exchequer Finance (SOCEF) which is more usually referred to by economists as the deadweight cost of taxation. This deadweight cost reflects the fact that the funds required to support public interventions have to be raised by taxation. Taxation imposes distortions or economic costs, for example, income taxes will reduce the return to individuals of working and so leads to a reduction in labour supply and consequently economic output. These deadweight costs are normally measured as a percentage of the revenue that has to be raised to meet the costs of an intervention. The DWP social cost benefit analysis framework recommends using a figure of 20 per cent. This figure should be applied to the net fiscal costs of a programme. We have estimated these costs by taking the total cost of the programme and subtracting from it an estimate of the fiscal flowbacks that the programme is estimated to produce in terms of reduced social security payments and increased direct and indirect tax revenues. Allowing for SOCEF / deadweight costs of taxation reduces the BCR for SJP to 1.48.

Substitution and SOCEF are distinct concepts. Hence, we also estimate the results of our CBA with both these impacts. This reduces the BCR for SJP to 1.35. Finally, we undertake a stress test of the CBA by assuming both substitution and SOCEF effects and higher deadweight of 72 percent. This produces an estimated BCR of 1.28. It is notable that for all our sensitivity analyses the BCR for SJP stays above one and the NPV remains positive. Thus, in all cases the benefits of the programme exceed its costs.

Table 6.11: Sensitivity Analysis

Scenario	NPV	BCR
Central	£1.25m	1.76

Scenario	NPV	BCR
Lower Deadweight (65%)	£1.38m	1.87
Higher Deadweight (72%)	£1.09m	1.67
Substitution	£1.00m	1.61
SOCEF	£0.93m	1.48
Substitution and SOCEF	£0.68m	1.35
Stress Test	£0.56m	1.28

6. Conclusions

This report has presented the findings from the mixed method evaluation of the Solent Jobs Programme (SJP). SJP was funded by Southampton and Portsmouth City Deal and the European Social Fund to test new approaches to supporting long term unemployed people with disabilities or health conditions into work, and therefore inform the development of future employment programmes. To achieve this aim, the programme intended to integrate health and employment support and assist local businesses to recruit from an untapped labour pool.

Our evaluation found that SJP had a positive impact and proved to be value for money, it has also provided key learning for policy makers at local and national level.

Programme performance

In total, 1153 individuals attached to the programme. Participants often had complex barriers to employment. For example, 19 per cent had been unemployed for ten years or more, just under 80 per cent lived in a workless household and just under half of participants (48 per cent) reported multiple health conditions.

Twenty-eight per cent of participants entered open employment and at least 17.5 per cent of participants sustained employment for 26 weeks or more. This job entry rate is high compared to the ESA claimants' performance on the Work Programme and similar programmes such as Working Capital and the Working Well pilot. The average time it took participants to find employment was five months.

Factors resulting in employment outcomes

Work experience or participation in the Transitional Employment Programme (TEP) proved significant in employment outcomes being achieved. 49 per cent of those who completed a work taster entered employment and 58 per cent of those who completed a TEP entered employment.

The TEP was a unique element of SJP. It provided participants with subsidised paid work on a temporary contract. There was consensus amongst staff, stakeholders and participants that the TEP played an important role in setting the programme apart from wider provision and creating outcomes. For example, it gave participants the opportunity to gain recent experience in the workplace and have confidence in their skills and ability. It also proved important in changing employer attitudes about hiring people with disabilities and health conditions and thereafter creating more long-term opportunities for all.

Strong links with local employers was also considered to be key to success. Relationships were forged through becoming familiar with the local labour market and building trust with employers through acting on promises. Getting buy-in from HR staff was also felt to help open up vacancies as they were often found to be central to decisions. Promoting good news stories through newsletters to other employers was felt to work well as they could better understand how the programme worked, and the benefits of engaging. Engaging employers at a strategic level did not result in more employment opportunities being made available, direct approaches with specific candidates was more effective. Lastly, the role of the Business Engagement Manager was believed to improve employer engagement and therefore have a positive effect on outcomes.

Intermediate outcomes that appeared to lead to employment outcomes included:

- increased confidence and motivation,
- gaining employability skills, such as having an improved CV,
- becoming aware of transferable skills,
- reduced social isolation, as a result of group support and courses, and,
- health and wellbeing improvements.

Positive experiences of the support were shaped by good quality relationships between the participant and their adviser, a sense that support was sequential, addressing pressing needs first, and participants being supported to identify opportunities linked to their skills and aspirations. Setting realistic goals through an action plan which was built up over time was important and participants spoke highly of the range of internal and external support available to them. Participants desired advisers who understood the impact of disabilities and health conditions in the workplace, and who were aware of the different support options and how to address different needs.

Impact assessment and cost-benefit analyses

Using longitudinal Labour Force Survey data, we matched SJP participants with individuals with similar characteristics. This allowed us to estimate the net impact of the SJP on job entry. Data from the most similar matched comparison group suggested that SJP had an 7-8.7 per cent impact on job entry within 12 months of starting the programme. **This suggests that the SJP had a positive impact; and that joining the programme increased the likelihood of someone entering employment within 12 months.**

The cost-benefit analyses also suggest that for every £1.00 the programme cost, the programme provided an estimated £1.76 of benefits to society as a whole. Sensitivity analysis was undertaken to test this conclusion and all the results indicate that the benefits of the programme outweighed its costs.

Key challenges

Only 43 per cent of referrals led to engagement in the programme. Factors which enabled engagement included emphasis on the voluntary nature of the support, awareness that it was a programme for people with disabilities and health conditions and recognition of how it differed from other programmes. Negative experiences of previous provision and distrust of DWP sometimes led to anxiety about taking part.

Although there were many good examples of partnership working resulting in a range of external health and wellbeing support options for participants; less progress was made in establishing referral routes from external agencies, such as GPs and local VCS organisations.

Engaging ESA claimants was time consuming and resource intensive. The programme aimed to target ESA WRAG claimants, however at the start of the programme, over 90 per cent of referrals were JSA claimants. Efforts to rebalance the proportion of referrals worked well. This included SJP staff being based in JCP offices to hold information sessions and speaking to people about the programme; getting buy-in from senior JCP staff, and; limiting referrals to ESA claimants only for a certain period. JCP staff reflected that having one person responsible for the programme made referrals easier to monitor and manage.

Some participants did not feel the support had helped them to progress closer to work. Reasons for this included that they felt as if it was generic, rather than tailored to their needs; that their adviser lacked understanding of their disability or health condition; or because the complexity of their needs meant that they were not able to make significant progress in the 12 months support period.

Programme staff sometimes struggled to complete employer engagement tasks alongside providing support to their caseload. Where there were gaps in this support, this was felt to be a shortfall in delivery.

Employer practices were also identified as a barrier to outcomes being achieved because this limited available opportunities. For example, sometimes recruitment processes were inaccessible and there was reluctance to adjust this for programme participants. A lesson learnt about delivering the TEP was to target

organisations that would be more likely to offer participants opportunities when the placement finished. Where participants left without finding work, they sometimes expressed frustration in the job match being unsustainable.

Staffing changes became more apparent in the final wave of research. This led to negative experiences of the support for some participants who had to start again with a new adviser, and who sometimes faced difficulties contacting them.

Recommendations for future programmes

We have considered lessons learnt and good practice identified from SJP to develop recommendations for the delivery of future employment programmes aimed at people with disabilities and health conditions.

Engagement and referrals

- **Engaging ESA claimants in new provision through Jobcentre Plus cannot solely be done within the DWP business as usual regime.** This is because work coaches have very limited time with ESA claimants and therefore do not always have a relationship with them. Additional contact and activities will be required to explain any such initiatives and engage potential participants.
- **Programmes should be advertised widely, in a variety of locations** to raise awareness amongst potential participants. However, untargeted marketing in a range of locations on SJP proved ineffective. Therefore, **engagement methods should be carefully considered, and materials should be tailored towards different groups** to make the programme seem relevant to them.
- Furthermore, **marketing should not just be online** as not everyone has access to the internet or the digital skills to utilise it effectively. The **unique elements of the programme should be highlighted** as this will help to differentiate the programme from other provision. For example, if it has target groups, they should be made aware that it has been tailored specifically for them.
- **Jobcentre Plus work coaches need to be adequately briefed on the programme and made aware of success stories.** Guidance needs to be succinct (to increase the likelihood of it being used) and demonstrate the unique aspects of the programme so that it stands out. By sharing success

stories work coaches will be able to see how the programme can benefit participants and use these examples positively with claimants.

- As we have found on SJP, **mandatory initial interviews work well to increase engagement in a programme.** This is because it gives programme staff the opportunity to sell the programme to those who are unconvinced when they are referred. Similarly, during our evaluations of other programmes, some participants explained that a mandatory interview was useful as they would not have attended if it was voluntary, and they were glad to have found out about and be on the programme.

Delivery of support

- **There are benefits of devolved employment programmes that can tailor provision to meet the needs of the local labour market and population.** For example, SJP leads were able to introduce additional provision during the delivery period where support needs were identified.
- **Local authorities are potentially well placed to co-ordinate and directly deliver programmes due to their wide networks and local accountability.** For example, local authority teams often have strategic relationships with DWP, Jobcentre Plus, VCS organisations and wider health and family services. Local authority staff involved in overseeing or delivering employment provision could also make links with wider local authority teams where required.
- **Similarly, there are benefits of involving local delivery organisations and hiring staff with local knowledge.** Where participants were familiar with the delivery organisation and had previous positive experiences, this enabled engagement. Further, participants spoke highly of staff who were felt to understand the local labour market and therefore be able to quickly identify relevant opportunities.
- **Partnership working with local services can play an important role in ensuring that a range of support is available** to programme participants and that there is greater integration between health and employment services. Within this, **co-location is beneficial** in raising awareness of a programme and in creating referral pathways and warm handovers.
- **Use of the Transitional Employment Programme in employment programmes for people with disabilities and health conditions should be considered on future programmes.** In the case of SJP, the cost of the

TEP was outweighed by the benefits and it played an important role in generating engagement and outcomes. Future TEPs should be focused on those furthest away from the labour market, as was the case on SJP, to increase the net impact of the intervention.

- Employer engagement staff play a key role in identifying opportunities and engaging local businesses. Therefore, **there is merit in including employer engagement roles when designing staff structures** as this requires a different skill set to frontline delivery staff and enables those staff to focus on supporting their caseload.

Programme evaluation

- **Methods of collecting programme data should be considered during the design stage.** Good quality management information systems that collect data on referrals, participant characteristics, programme activities and programme outcomes enable progress to be monitored and can feed into evaluation activities. Solent Jobs collected a range of data which enabled detailed analysis to be conducted and lessons to be learnt about delivery.
- **Data sharing is a key issue, which needs to be resolved.** The use of administrative data sets is potentially a very powerful resource in allowing evaluators to adopt robust methods, and so produce highly credible results as to the net impact of programmes. Part of this is around legal issues impacting on what data central government can share. However, such barriers can be overcome. The real constraint lies in effectively resourcing the internal analytical capabilities of government departments which would allow such departments to share their data with independent external evaluators seeking to understand what works and for whom.

Annex A: Additional management information analysis

Table A.1: Gender of participants

Gender	Participants (numbers)	Share %
Men	713	61.8%
Women	440	38.2%
Grand Total	1153	-

Table A.2: Age-split of participants

Age Group	Participants (numbers)	Share %
18-49	722	62.6%
50+	431	37.4%
Grand Total	1153	-

Table A.3: Ethnicity of participants

Ethnicity	Participants (numbers)	Share %
White British	1071	93.7%
Mixed Ethnicity	19	1.9%
Asian	17	1.4%
Black	15	0.8%
Other	27	2.3%

Grand Total	1149	-
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Table A.4: Lone-parent status of participants

Lone-Parent Status	Participants (numbers)	Share %
Yes	78	6.8%
No	1075	93.2%
Grand Total	1153	-

Table A.5: Ex-offender status of participants

Ex-Offender Status	Participants (numbers)	Share %
Yes	101	8.8%
No	1052	91.2%
Grand Total	1153	-

Table A.6 Types of Work undertaken in completed work taster placements

Type of Work	Participants (numbers)	Share %
Warehouse Operatives	24	25.3%
Administration/ Business & Office Work	14	14.7%
Computers & IT	12	12.6%
Retail Sales and Customer Service	12	12.6%
Environment/animals & plants	6	6.3%
Hospitality and Catering	6	6.3%

Childcare/Healthcare	4	4.2%
Education & Training	4	4.2%
Building and Construction	3	3.2%
Manufacturing and Production	3	3.2%
Leisure/ Sport & Tourism	2	2.1%
Alternative Employment	1	1.1%
Engineering	1	1.1%
Hair and Beauty	1	1.1%
Media/ Print and Publishing	1	1.1%
Work Experience	1	1.1%
Grand Total	95	-

Table A.7: Types of Work of completed or in progress: TEP placements

Type of Work	Participants (numbers)	Share %
Administration/ Business & Office Work	29	27.9%
Retail Sales and Customer Service	23	22.1%
Hospitality and Catering	10	9.6%
Computers & IT	9	8.7%
Environment/animals & plants	8	7.7%
Warehouse Operatives	8	7.7%
Childcare/Healthcare	4	3.8%
Education & Training	3	2.9%

Leisure/ Sport & Tourism	3	2.9%
Transport and Logistics	2	1.9%
Accounts and wages clerks, book-keepers & other financial	1	1.0%
Building and Construction	1	1.0%
Manufacturing and Production	1	1.0%
Media/ Print and Publishing	1	1.0%
Performing Arts	1	1.0%
Grand Total	104	-

Table A.8: Types of Work undertaken by individuals that entered open employment

Type of Work	Participants (Numbers)	Share %
Retail Sales and Customer Service	55	17.3%
Childcare/Healthcare	39	12.3%
Hospitality and Catering	38	11.9%
Administration/ Business & Office Work	37	11.6%
Warehouse Operatives	35	11.0%
Manufacturing and Production	16	5.0%
Building and Construction	12	3.8%
Occupational hygienists and safety officers	12	3.8%
Environment/animals & plants	11	3.5%
Armed Forces & Security	8	2.5%
Transport and Logistics	8	2.5%

Computers & IT	7	2.2%
Education & Training	7	2.2%
Engineering	7	2.2%
Leisure/ Sport & Tourism	7	2.2%
Design/ Arts & Crafts	4	1.3%
Alternative Employment	3	0.9%
Hair and Beauty	2	0.6%
Self-employed	2	0.6%
Seafarers (merchant navy); barge, lighter and boat operative	2	0.6%
Social Work and Counselling Services	2	0.6%
Accounts and wages clerks, book-keepers & other financial	1	0.3%
Grand Total	318	-

Figure A.1: Breakdown of average initial WEMWBS scores, average scores amongst those who left the programme and average score amongst those who left the programme and found work

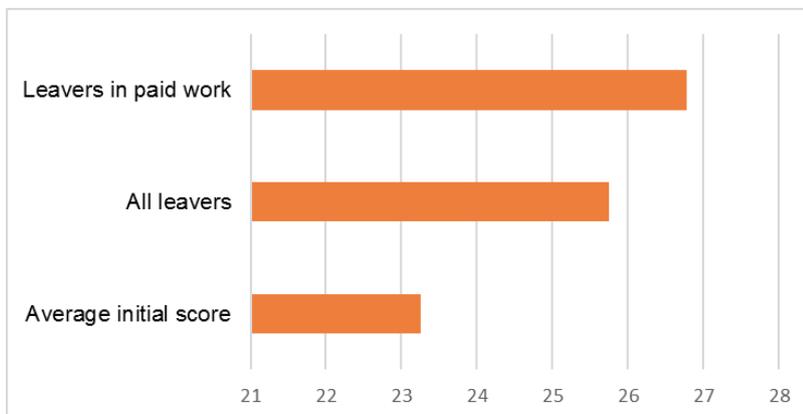


Figure A.2: The difference in self-reported social trust for all leavers upon entering and exiting the programme³⁹

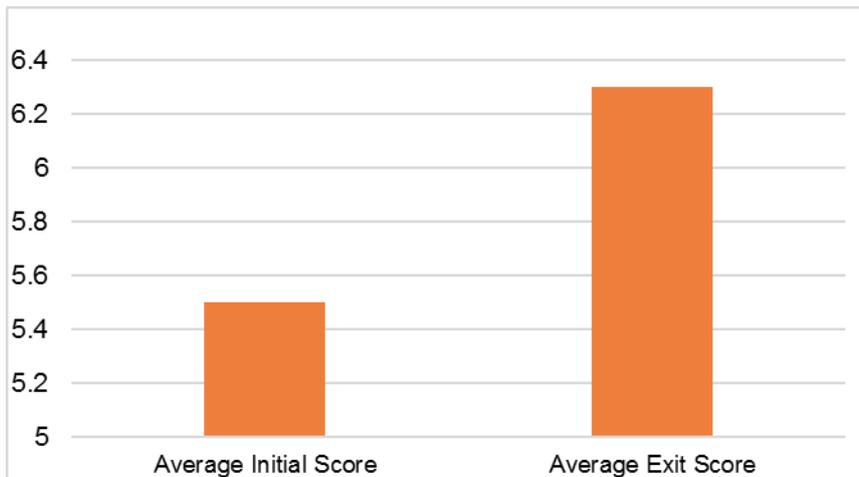
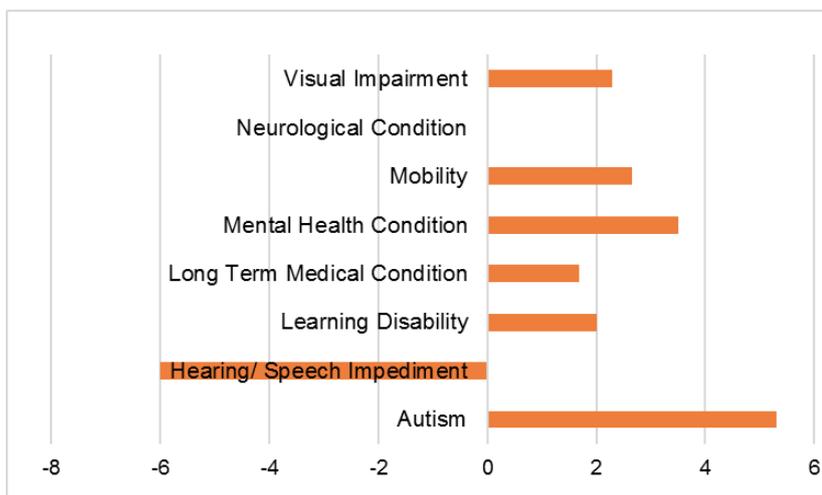


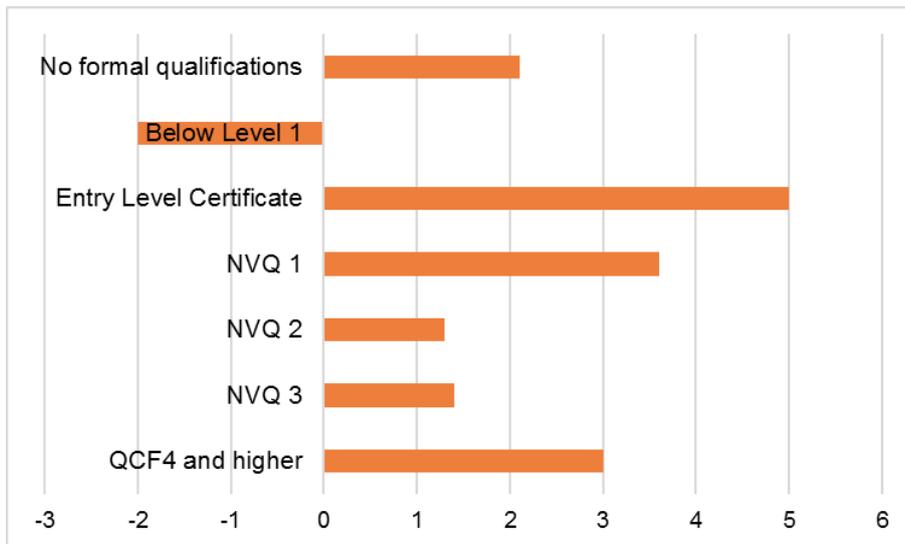
Figure A.3: Breakdown of the change in WEMWBS scores for programme leavers across health condition⁴⁰



³⁹Many participants found the question confusing to answer and opted to answer in the middle, meaning that this may not be a true reflection of change in social trust.

⁴⁰ The numbers of participants with a hearing or speech impediment and a neurological condition to have completed the exit questionnaire are not yet large enough to draw any meaningful conclusions.

Figure A.4: Breakdown of the change in WEMWBS scores for programme leavers across qualification levels⁴¹



⁴¹ The score for those with Below Level 1 qualifications appears to be significantly lower than the rest, due to the low number of participants in this category to complete exit surveys, whereas the other categories include a good number of responses to date.

Table A.9: Co-morbidity of primary and secondary health conditions

		Secondary Health Issue											
		Autism/Asperger syndrome	Condition restricting mobility/dexterity	Drug and alcohol misuse	Hearing and or speech impediment	Long term medical conditions	Mild learning disability	Mild to moderate mental health condition	Moderate to severe learning disability	Neurological conditions	Severe mental illness	Visual impairment	No Secondary Health Condition
Primary Health Issue	Autism/Asperger syndrome	0	3	0	0	7	6	18	0	1	0	3	37
	Condition restricting mobility/dexterity	0	0	1	4	76	3	27	1	2	0	3	60
	Drug and alcohol misuse	0	1		0	2	0	3	0	0	0	0	1
	Hearing and or speech impediment	0	4	1	0	2	0	1	0	0	0	0	11
	Long term medical conditions	2	51	3	3	0	6	76	2	3	1	1	120
	Mild learning disability	1	4	1	2	11	0	8	0	1	0	0	42
	Mild to moderate mental health condition	4	42	14	4	51	18		1	2	0	2	242
	Moderate to severe learning disability	0	1	0	0	9	0	3	0	1	0	0	21
	Neurological conditions	0	9	0	1	14	3	3	0	0	0	3	27
	Severe mental illness	0	3	0	2	5	0	1	1	0	0	0	25
	Visual impairment	0	4	0	1	6	1	3	0	1	0	0	9

Table A.10: Breakdown of support sessions delivered by support area

Support Area	Support Type	Number of Sessions Delivered
Basic Skills	Basic IT	32
	English	9
	Learn My Way	121
	Maths	16
Employment Support	Adult Directions	84
	CV Writing	91
	Employability	316
	Job Interview	552
	Job Search	1419
	National Careers Service	304
	Pre-Employment Training	99
Financial Support	Money Advice Session	82
Health and Wellbeing	Autism Assessment	11
	Change perspective through creativity	16
	Confidence Building	340
	Good food on a budget	2
	Health & Wellbeing Course	121
	Health Trainer	2
	Occupational Health	24
	Peer Support	27
	Relaxation and Stress Management	1
	Relaxation and Wellbeing	8
	Stress busting and creative problem solving	2
	Stress, Anxiety and Self Esteem	32
	Understanding My Needs	22
Wellbeing (IAG)	37	
Wellbeing through Learning	51	
Hobbies and Interests (for engagement purposes)	Arts and Crafts	19
	Cookery	6
	DIY	2
	Gardening	9
Qualifications	Construction	7
	CSCS	11
	Fire Safety	29
	First Aid	38
	Food Hygiene	17
	ICT	38

Annex B: Solent Jobs Regression Results

Table D.1: Model coefficients for 12 months job entry, different nearest neighbour matching constraints

Variable	No Caliper	2 SDs	1 SD	0.5 SD	0.25 SD
(Intercept)	-1.676**	-1.529*	-2.538**	-2.969**	-3.597**
Treatment	0.432**	0.332*	0.424**	0.479**	0.541**
Female	-0.259	-0.153	-0.283	-0.261	-0.303
Black	-0.582	-1.227	-1.087	-0.747	-0.229
Mixed	0.418	0.677	0.964	0.074	1.168
Other Ethnic Group	0.662	0.573	1.058	0.913	1.605
Unknown Ethnicity	-13.858	-11.032	-13.171	-12.585	-12.174
White	-0.066	0.085	0.336	0.147	0.933
Age Group 50-54	-0.287	-0.192	-0.206	-0.246	-0.197
Age Group 55-59	-0.223	-0.244	-0.482*	-0.351	-0.240
Age Group 60-64	-0.695**	-0.708**	-0.532*	-0.629*	-0.787**
Age Group 65 and over	0.087	0.210	-0.049	0.052	-15.412
Primary Health Issue Hearing and or speech impediment	-0.490	-0.591	-0.633	0.153	0.135
Primary Health Issue Learning Disability	-0.057	0.096	-0.028	0.279	0.522
Primary Health Issue Mental Illness	0.146	0.064	0.356	0.432	0.372
Primary Health Issue Neurological conditions	-0.254	-0.169	0.074	0.510	0.487
Primary Health Issue Other health conditions	-0.071	-0.067	-0.063	0.088	0.064
Primary. Health. Issue Unknown	-	-0.494	-0.105	-0.493	0.108
Primary Health Issue Visual impairment	-0.305	0.003	-0.403	-0.018	-0.045
Secondary Health Issue Hearing and or speech impediment	1.040*	1.145*	0.565	1.713*	1.273*

Variable	No Caliper	2 SDs	1 SD	0.5 SD	0.25 SD
Secondary Health Issue Learning Disability	0.382	0.344	0.797	0.801	0.217
Secondary Health Issue Mental Illness	0.720**	0.731**	0.883**	1.114**	0.855**
Secondary Health Issue Neurological conditions	0.736	0.908	0.804	1.540	0.771
Secondary Health Issue Other health conditions	0.556*	0.422	0.756*	1.095**	0.792*
Secondary Health Issue Unknown	0.996**	0.950**	1.264**	1.743**	1.459**
Secondary Health Issue Visual impairment	0.407	0.017	0.886	0.461	0.134
Number of Dependent Children	0.073	0.092	0.133	0.110	0.102
Education Level 2	0.289*	0.228	0.437*	0.093	0.255
Education Level 3	0.459*	0.490*	0.370	0.397	0.053
Education Level 4 and above	0.920**	0.687**	0.502	0.504	0.407
Education Level No qualifications	-0.169	-0.304	-0.149	-0.448	-0.376
Education Level Unknown	-	-1.118	0.777	-13.007	-13.992
Housing Tenure Housing Association	-0.236	-0.295	-0.563*	-0.365	-0.430
Housing Tenure Local Authority	-0.277	-0.327	-0.458*	-0.281	-0.273
Housing Tenure Private Rental	-0.213	-0.288	-0.373	-0.485	-0.057
Housing Tenure Unknown	-0.143	0.369	-0.134	-0.044	0.732
Out of work for 2 years plus	-0.449	-0.534	0.021	0.195	0.369
Out of work for 6 months but less than 12 months	0.785	0.649	1.210*	1.653**	1.743**
Out of work for less than 6 months	1.221**	0.555	0.733	1.279*	0.860
Length of time out of work Unknown	-	-	-13.407	-	-12.870

Note: * = coefficient statistically significant at the 5% level, ** = coefficient statistically significant at the 1% level.

Given most of the explanatory variables above are categorical variables the estimated models are relative to the base case of an individual with the following characteristics: Male, Asian Ethnicity, Age under 50, with a health condition restricting mobility or dexterity, entry level or level1 qualifications, an owner occupier, who has been out of work for 1-2 years.