



# Aberlour – Lifeworks Service

## A Qualitative Evaluation

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## Acknowledgements

We would like to thank the young people and other participants that took time to share their views with us. We appreciate their generosity and openness, without which, research would be highly difficult and seriously limited.

The study was funded by Aberlour who we applaud for being open to independent evaluation and enthusiastic about developing better services for children and young people. The study also benefited from the wider work of CELCIS, this will ensure that relevant learning points will be shared with the wider sector including those who can influence the lives of other young people.

## **Executive summary**

Aberlour requested that CELCIS carry out an independent qualitative evaluation of the Lifeworks project. We used a mixed-method realistic evaluation approach drawing on a wide range of perspectives and information. The data were collected and analysed deductively using thematic analysis to answer four broad research questions:

### **What are the key features of the Lifeworks model?**

One of the key themes that emerged from the analysis was that at the heart of the Lifeworks model is a person-centred approach. This person-centred model comprises two components: flexibility and relationships. Relationship building is the vehicle for interventions with the young people leading to 'softer' outcomes such as self-confidence and to tangible outcomes such as engagement in education and ability to maintain a tenancy. This is a time-consuming but effective element of the service delivery model. Young people benefit from a wide range of different supports delivered directly by the Lifeworks team and wider services that they are supported to access.

### **What is the Lifeworks Experience?**

Lifeworks experiences are defined by in-depth work and interpersonal values that seem to be shared across stakeholder groups. In-depth interpersonal experiences motivate staff, other agencies, and young people to engage with the service.

### **What are the Lifeworks outcomes?**

The impact of Lifeworks includes easily identifiable hard outcomes and less tangible relational outcomes. Overall, the impact for the young people involved seems to be very positive. The service continues to develop; for example, it has recently achieved status as a formal SQA provider. There may be challenges to measure some aspects of impact, especially for less tangible outcomes such as the impact on relationships, more distal outcomes such as the impact on other services, and longer-term outcomes such as those that may develop later in adulthood. Further and ongoing impact evaluation is advisable and may be achievable in-house. If significant scale-up is planned, we recommend consideration of impact evaluation that includes quasi-experimental designs such as those that include some kind of comparison group.

### **What are the key messages learned from the Lifeworks initiative?**

Lifeworks is a relatively young service that provides valuable (and valued) provision addressing a significant gap in existing services for children and young people who have experienced home supervision. Given what we know about the size of this population and the dearth of services available to them, the Lifeworks approach and similar services would merit replication elsewhere. This group of young people are vulnerable and excluded, they have a range of different needs but can find some services difficult to access. The relational, flexible, and responsive support provided by Lifeworks is effective

for young people. However, the resulting service is complex and changing; it may be difficult to appreciate fully what Lifeworks does, contributing to challenges in creating a clear identity and visibility. We hope that this evaluation begins to address those nuances.

### *Value for money*

This qualitative evaluation did not include an evaluation of the economic impact of the service or comparative costs. However, several participants outlined their belief that the service may result in longer-term savings for the State. Therefore, we consider some economic information based on material provided by Lifeworks and the wider evidence base. Further exploration of potential costs and savings of Lifeworks is discussed and illustrated in the final chapter of this report. To summarise we feel that the costs of the service:

- seem reasonable given the context of other services,
- represent a relatively small proportion of the total public costs associated with these young people,
- allow support that addresses areas where potential future spend could often be substantial.

Therefore, we feel it is highly likely that the Lifeworks service provides very good value for spend.

## **Introduction**

### **Structure of this report**

This document follows a typical evaluation report format. We begin with a short Executive Summary aimed at busy readers and those who just want headlines. We then introduce the service and explain how the evaluation came about before moving on to a Methods section that describes the study process. Next, we present a Findings section, supported by extracts of data that illustrate the points made. Finally, in a Discussion section we summarise and reflect on key Findings, relating them to other literature. We also discuss the Lifeworks service's value for money drawing on evidence from the wider literature. This chapter closes with brief conclusions and recommendations.

### **Background and context**

Aberlour Lifeworks service, based in Fife, is a project for 14-25 year olds who have been previously, or are currently, looked after at home (on compulsory supervision). Lifeworks caters for those young people who are not entitled to the leaving care services offered by Fife Children's services young people's team.

The project was established in 2013 with five years funding from the Big Lottery. The Lifeworks team receives some support from Fife council and other Aberlour children's services staff.

The overall purpose of Lifeworks is to improve life chances for this group of young people and help them to develop skills for the future. It set out to work towards three main outcomes:

- Young people live in a home of their choice
- Young people are in education and/or employment
- Young people develop and maintain relationships to support their emotional wellbeing

The project has up to four staff, including the assistant manager who can also provide limited direct support to the young people. Adult mentor volunteers (eight) and options for peer mentoring add to the capacity of the team. There is also a volunteer Art Therapist (currently supporting around three individual young people). At present, the project has worked with more than 70 young people. Support includes:

- One-to-one support
- Group support through the Who am I? programme
- Signposting and practical support to engage with external agencies
- Art therapy
- Family mediation
- SQA awards in Peer Mentoring, Employability and Housing and Citizenship (Application Stage)

## **Purpose of this qualitative evaluation study**

Lifeworks requested that CELCIS explore options for an independent qualitative evaluation of the project drawing on a range of perspectives. The purpose of this evaluation was to explore and understand the experiences and outcomes across Lifeworks. This would provide evidence that stakeholders can factor into future deliberations about sustainability and further development or improvement. The evaluation needed to report as soon as possible to answer a number of broad research questions.

### 1) Defining the initiative

What are the key features of the Lifeworks model as experienced by a range of different stakeholders (including young people, staff members, managers, referrers, commissioners, etc.); what (structural, relational, and process) make up core components of the project; how do recent innovations including status as a formal SQA provider and introduction of the outcomes star contribute to the service?

### 2) Experiences

What motivates key stakeholders to engage with the project; how is the project experienced and understood by the key stakeholders?

### 3) Outcomes

How do stakeholders describe relevant changes (benefits, drawbacks, etc.) that they attribute to the project; how might any identified benefits and changes be attributed to the initiative; what else might have contributed to these changes; how does the qualitative evidence relate to Aberlour's analysis of the quantitative data it holds?

### 4) Key messages

What is the key learning for those involved in this project, and those who may be contemplating similar initiatives elsewhere? What wider learning contributes to evidence for relevant policy and practice for this particular group of young people?

## Potential impacts of a qualitative evaluation study

An evaluation of this sort may be beneficial in different ways. Benefits are not limited to the impact of knowledge generated in study findings; indeed, involvement in study processes may create wider benefits for those involved. The list below is a non-exhaustive list of potential benefits:

- Increased knowledge of relevant populations including normative, comparative, and expressed needs
- Increased understanding of diverse perspectives and experiences
- People feel listened to, valued and included
- Workers can critically reflect on their practice
- Opportunities for services to work effectively together and develop skills, insights, confidence, and a sense of empowerment
- Opportunities to showcase examples of good practice and share learning (nationally and wider)
- Managers and funders can make better-informed forward plans about delivery of services

## Methods and approach

### Conduct of the evaluation

The University of Strathclyde ethics board provided ethical clearance for the study. The evaluation was conducted to the highest ethical standards and fully informed and voluntary consent was sought from all participants. No explicit or implicit coercion or pressure to participate was conveyed, either by the researchers or by Lifeworks staff. Participants' privacy (within the bounds of group methods) was preserved at all times. There were no occasions that required confidentiality to be broken under circumstances of significant risk of harm. All reports and other outputs have been completely

anonymised, such that no individual is identifiable. Towards the end of the study the researchers met with Lifeworks managers to discuss and 'test out' emerging findings to check factual issues and how best to frame and share messages from the study. Learning from the evaluation will be shared widely within and beyond the sector in the hope that this will result in further benefits for other young people. In addition, we invite readers to contact the authors if they would like further information such as copies of questionnaires or interview schedules.

A mixed-method realistic evaluation approach was used drawing on a wide range of perspectives and information (Brannen, 2005; Pawson & Tilley, 1997; Sayer, 2000). The Aberlour Lifeworks team provided contact details for 56 contacts who could provide diverse insights into the programme. Data were gathered through various focus groups and surveys.

## **Focus groups**

**Young people's focus group:** Young people were invited to participate in a focus group that reviewed and further refined emerging findings from the questionnaire and other data sources and explored suggestions for the future.

**Delivery team focus groups:** Project delivery staff (excluding managers) and volunteers were included through a staged participatory process. This involved attendance at a preliminary focus group session to gather initial perspectives and work with the researchers on a reflective diary process. Staff recorded a reflective diary for one month, after which, they met with researchers again; shared their understanding of diaries and reflected on how their observations related to the research questions. These two sessions took place at a location where participants felt free to talk openly, and were held within the Fife locality. Each session lasted around 90 minutes and was audio-recorded (as agreed with participants).

**Managers' focus groups:** Aberlour staff who were involved in planning or approving the project or managing Lifeworks were invited to initial and a follow-up focus group interviews, including one group for project staff (i.e. those involved in direct delivery of the service, including volunteers). As above, these sessions were recorded and analysed. These recordings were part-transcribed or audio-coded via a thematic analysis to provide rich insights into the project, its functioning, and its impact (Braun & Clarke, 2006).

## **Online survey**

**Young people:** All young people involved with the project were invited to respond to a mobile-friendly online questionnaire about their use of the project, issues in their lives, and reflections on how Lifeworks helped them to work towards their goals / outcomes.

**Key informants:** external referrers, local authority staff and managers, landlords, college staff, or employers, family members, and practitioners were also invited to respond to an

online questionnaire to share their perspectives of the project. The questionnaire consisted of a combination of open-ended and multiple choice answers. This data was analysed via thematic analysis to identify new insights and triangulate emerging findings about the value of the project to a range of stakeholders (Braun & Clarke, 2006; Bryman, 2004).

## Quantitative information

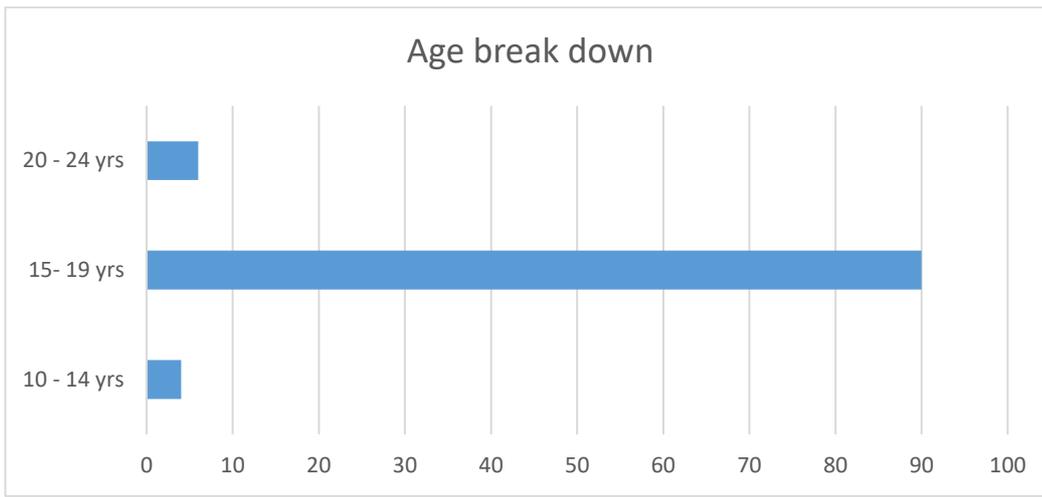
Aberlour Lifeworks managers regularly review and monitor the service and submit reports to key stakeholders including funders. This involves collecting a range of data relating to the young peoples' circumstances, backgrounds, and data relating to their involvement with the service. This information is stored variously in file notes including individual 'outcome stars' and a management information system (Clarista). Prior to the evaluation Aberlour staff performed an analysis of this quantitative material, particularly in respect of the characteristics of young people using the service and their progress towards a range of outcomes, etc. This analysis was shared with CELCIS to contextualise the evaluation and key information is incorporated into this report.

## Service scope

The Lifeworks service reported that 53 young people received support during the period 31st July 2016 to the 30<sup>th</sup> July 2017. At the time of data collection, 30 young people were receiving support; 17 were new referrals during the period, and 13 were existing cases. During the reporting period, 23 cases were closed; eight of which had been new referrals that year. Demographic data indicated that 31 young people described themselves as male and 22 young people self-reported as female. Fifty-one of the young people who accessed the service described themselves as heterosexual while, two young people self-reported as Lesbian, Gay or Bisexual during the reporting period. The majority of the referrals were within the 15 to 19 years age group (48), the diagram below illustrates further details by age groups<sup>1</sup>.

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<sup>1</sup> These figures were collected by Lifeworks as part of their annual report submitted to funders, for details see (appendix XXX).



**Figure 1: Age groups of young people involved in the service, displayed by percentage (n=53)**

## Participants in the qualitative study

### Focus groups

Across all focus groups a total of nine different participants were involved:

- At both the preliminary and follow up focus groups for managers there were two participants at each session. One of these participants was present at both sessions giving a total of three managers who participated in both sessions.
- There were three participants at the preliminary staff focus group and two participants in the follow up focus group. Two of these staff members were present at both sessions, therefore a total of three workers attended at least one of these sessions.
- The focus group for young people were attended by three participants.

### Online survey

The Lifeworks team recruited 27 participants who completed the online survey. This consisted of:

- Twelve young people who had been involved with Lifeworks,
- Four practitioners or professionals who have helped someone else to use the service,
- Eleven further respondents who described themselves as someone who had knowledge or understanding of Lifeworks.

## Qualitative findings

The evaluation sought to answer four broad research questions: how is the initiative defined – what are the key features of the Lifeworks model? What is the Lifeworks

experience? What are the service outcomes? Lastly, what are the key messages learned for the Lifeworks initiative?

Following the thematic analysis, the findings of the analysis were organised as four broad themes: the Lifeworks model, the Lifeworks experience, the Lifeworks outcomes, the Lifeworks key messages. Within each of these broad themes, a number of sub-themes have emerged. The Lifeworks model theme consists of three sub-themes: person-centred, flexibility and relationships. In-depth and interpersonal values are sub-themes within the Lifeworks experience theme. Sub-themes such as a ripple effect and wider benefits are components within the Lifeworks outcomes theme. Finally, the Lifeworks key messages theme consists of two sub-themes: identity and replication.

We discuss each of these in detail below, readers will notice a degree of over-lap between these ideas, this is unavoidable due to the interconnections between them; even so, we have tried to avoid excessive repetition and to develop new points and nuances as we proceed. We also illustrate the findings with selected anonymised quotations as these help to convey context, insights, and meanings.

## The Lifeworks model

### Person-centred

At the heart of the Lifeworks model is a person-centred approach. This appears to be of central importance and is understood and experienced by different stakeholder groups. This central element has been present since pre-conception of Lifeworks and is embedded within the wider Aberlour approach as documented in key materials:

*If we are truly person-centred, people will be more likely to choose Aberlour when given the choice or recommend us to others. People will also be more likely to engage with our services. Staff are also more likely to feel valued, experience job satisfaction and stay with Aberlour long term (Personalisation Toolkit – Aberlour).*

The Lifeworks model was designed with an understanding that young people's needs vary and that tailored input is required. The person-centred approach has meant that Lifeworks provides support across a breadth of areas in a young person's life. In the evaluation, young people reported experiencing support with a range of difficulties including: emotional wellbeing, family support and a broad range of life skills (tenancy, budgeting, health, fitness, education, and employment).

### Flexibility

We found that flexibility has evolved over time; the service has developed to respond to the individual needs of the young people as they come in. It would seem that the flexibility of Lifeworks model has been a key factor in engaging young people who others may regard as 'hard-to -each', including young people who may have perceived

previous service input to be *'strike one and you are out'* (worker, focus group). In contrast, Lifeworks is noted *'to have a very different approach to that, and it would be about the door is always open'* (Worker, focus group). This flexibility may lead to multiple discrete pieces of work as part of young people's long-term engagement with the service:

*Little interventions that are the building blocks, they need short-term stuff has to be quite short sharp stuff, a kind of zero to two days, zero to three days, zero to four days and then, ok, what if we do the full week (Worker, focus group).*

The Lifeworks ethos appears to be responsive to young people's needs and priorities at specific time points throughout their engagement with the service. This is supported by young people who have experienced the service: *'They don't push you to do things, they're just trying to be good to you'* (Young person, focus group).

Staff and managers reflected that:

*The level of support required for most young people is a lot higher than what was initially anticipated, the initial idea was focussed short pieces of work but actually the needs are more complex (Manager, focus group).*

Subsequently, the complexity of the young people referred has led Lifeworks to *'evolve and change to meet those needs and a big focus on relationship development'* (Manager, focus group). This latter element now seems to be a key part of the Lifeworks intervention model.

## **Relationships**

The data suggest that another core component that runs throughout Lifeworks model is relationship-building. Although, on one hand participants felt assessing the outcomes of a relationship was difficult, they understood that establishing secure relationships with the young people was itself an *'intervention'* that facilitates tangible outcomes in the long-term:

*So before we can tackle any of the outcomes that we set out to do, a lot of it is ... about relationship building, working with the young person just to give them some self-confidence, to be able to get themselves to a place where they can even think about outcomes (Worker, focus group).*

Developing a relationship with young people requires significant time and resource; however, it was seen as a necessary part of the service provision. The existing evidence-base has also shown that strong and consistent relationship-building is predictive of better outcomes when working with families and young people (Lerpiniere, Welch, et al., 2015; Thompson, Bender, Lantry, & Flynn, 2007). The impact of relationship building was noted to be beneficial between the staff and the young people. One Lifeworks

workers reflected: *'I think young people have got quite fond of us and they enjoy spending that bit of time'*, while another worker referred to the personal rewards of mentoring young people. One young person stated that:

*It's also brilliant just to have someone there to talk to at the end of the week because not many folk in my situation have that, they actually do something about it, they do care and they do make a huge difference to us (Young person, survey).*

We also found that the relational processes extend outwards from within Lifeworks to partner agencies. Establishing relationships across sectors such as health, education, and social work has multiple functions. Good working relationships with specific workers within agencies helps to identify young people in need of the Lifeworks service and good partnership working was identified as a key skill that helps to achieve good outcomes for young people in the service. Identifying partner agencies that can help meet a young person's specific needs allows Lifeworks to focus on their specific skill-set and connecting with other services feeds-back into the experiences of the young people. Lifeworks managers reflected that *'we've often been a mediator for other services, social work, school, and mental health. We encourage better experiences with other services as well as us'*.

At Lifeworks relationship building and relationship ending are of equal importance:

*Part of the exit, whether planned or sudden, is that we can always re-open their case at any time automatically, [they] don't necessarily need to be re-referred, even if it's just a short piece of work (Manager, focus group).*

In this way, young people may experience the service as a secure base to come back to should they experience future difficulties. Similarly, if young people do not feel ready to engage with Lifeworks, they can access the service easily at a later point.

Supportive relationships are also nurtured within the Lifeworks team, *'what we do as a service we do with each other, to help each other'* (Manager, focus group). Nurturing connections are set up both formally and informally to promote a good working environment:

*We are a small team, we share an office, we have strong working relationships with each other, know each other, lots of daily support as well as the formality of supervision (Manager, focus group).*

This approach appears to feed into the overall Lifeworks experience:

*No one is complaining about what they are doing at work and everyone is quite happy and enjoying their job and I think obviously that's what makes a really successful team (Manager, focus group).*

## The Lifeworks experience

### Interpersonal values

Lifeworks relationships are a central component of the service model but also of the overall experience. Critically, it seems that relationships result from a particular (and often explicit) set of interpersonal values, enacted via an intentional approach. Often young people's first experiences of the service reflect the interpersonal skills and values of the Lifeworks workers:

*But what I am finding very quickly is that I'm having to use the personal side a lot [...] It's like building a house, before lifting it up, it needs to be strong enough to do it and I think they pick up on what they see. That I'm not just here to tick a box with you, sign this, fill out this form, I think we are all genuinely invested in it emotionally and professionally I think it comes across we are fighting their corner (Worker focus group).*

The value placed in the interpersonal approach is further evidenced in the priority given to the 'goodness of fit' between workers and the young people:

*We try to get a good match with volunteers and young people to encourage a faster relationship, where possible personalities or different skills that staff have to link with what the young people need [we're] happy to change that as part of a review if felt that the young person would get on better with someone else (Manager, focus group).*

Staff show personal resilience and flexibility to ensure the best match is found:

*When something's not working you've got to be able to go "Ok why is that not working to change this, is it going to be better if somebody else takes over?" rather than take it personal that it's not working (Manger, focus group).*

Equally, a degree of persistence is often required to engage the young people:

*...commitment from staff, shared values, as we get kids who don't keep appointments but need staff who keep trying, as this can be disheartening...*

*[staff] need to be persistent, if [young people] keep not answering the door or missing appointments, it can be they have gone into chaos or are just not interested or ready (Managers, focus group).*

Data collected by the online survey indicated that the service is engaging with a group of isolated young people who may often lack trust, confidence, and self-esteem when engaging with services. This is likely to have an impact on the time it takes staff to build and develop relationships. Young people who have had earlier difficulties with the care they have received may often develop negative coping strategies as demonstrated by one young person who reflected *'It's much better here, they don't throw you out for drinking and smoking and that'* (Young person, focus group).

The interpersonal ethos is also part of the staff experience at Lifeworks. Workers at Lifeworks report feeling well supported by other team members. There is a sense of interpersonal cohesion that is essential to staff who carry out a complex role within the community. Good interpersonal relationships with team members appear to promote reflection and resilience in connection with the day-to-day work at Lifeworks:

*I think we use each other quite well whenever... we are community-based, we can work from home, I actually like to come to the office to touch-base and have a chat about what's been happening and who I've been working with, just having a chat and what do you think... that's really good for me (Worker, focus group).*

We noted a parallel process between workers' recognition of young people's needs and being attuned to the needs of colleagues: *'We value each other, we are flexible to suit the service and each other's lives'* (Manager, focus group). Staff also reflected *'we help each other, we recognise if someone is having a bad day'* (Manager, focus group). This strong interpersonal commitment permeates throughout Lifeworks and is experienced by external volunteers:

*As a befriender for Aberlour, I feel like I am really well supported. I am not under any pressure and I am reassured that this is entirely voluntary. There are some wonderful people that work for Aberlour with really good skills and I imagine are great at their jobs. I see this as somewhere I would want to work too (Volunteer, survey).*

The interpersonal experience facilitates the extensive range of in-depth support experienced by those who are involved with Lifeworks.

## **Depth**

The in-depth support experienced by the Lifeworks has been described in various ways. Young people described receiving help with living conditions, tenancies, employment, and education. Workers described developing independence and life skills including housing, budgeting, housing, education, employment, mental health, and wellbeing, etc.:

*To help young people move out of isolation and eventually into further education and employment. Boost confidence and self-esteem. 'Improve physical and emotional wellbeing' (Practitioner, survey).*

Over time, the service has evolved and the staff team have developed a skill-set to nurture the varied needs of the young people:

*You know, initially it was thought that this service would have the outcomes and we'd have the pieces of work and we would be able to match the young person with a volunteer and they would work on a CV, they would be great sort of skills to do, but obviously it goes much deeper than that, and there's a great deal that gets done (Manager, focus group).*

The service clearly offers a range of work and support:

*There is so many if you were to write everything down that we do or have the skills to do. It's huge between the small staff team that we have, and I'm not saying we can do everything ourselves but we know off the top of head who to phone. I just feel the range we offer is massive, SQA, there is group work, there is so much we do, and do it well but we never really shout about it (Manager, focus group).*

This is echoed by the reflections of one young service user who reflected; *'they can help you with everything that you need, it's about everything in your life'* (Young person, focus group). All groups of stakeholders understood in-depth support as an essential lifeline for isolated young people:

*As Aberlour reached out to many young people who had limited support from parents, carers or significant adults; as far as I could see this service was extremely critical for some of the young people. Many of them appeared to depend on the service to help them access housing, education etc. (Practitioner, survey).*

*... an invaluable service where there is a clearly a gap in services which lifeworks has been able to fill and support young people (Practitioner, survey).*

The breadth and depth of the work has meant that the staff's skills have developed further to be able to identify and fill support gaps. This has involved both direct provision and indirect support through other services: *'It's a one stop shop sort of, we are open to say there is maybe someone who is better but we will help to access that support'* (Manager, focus group). However, as the work and skill-set evolves and diversifies it has become a challenge to define fully the supports offered by Lifeworks:

*We have come across so many issues that these young people have, nothing is that new. There is nothing that would be referred and we would be like 'I don't know how to work with this', our skill-set is so broad between us all. And it's so important to capture that, the service can work with so much (Manager, focus group).*

This difficulty in defining the supports provided by the service is an important finding of this evaluation; however, this is often the case when developing complex interventions (Medical Research Council, 2000). These challenges can have implications for the identity, coherence, and apparent impacts of the service. The *'in-depth is so much'* and is too *'difficult to write down on a leaflet'*, hence it can be a challenge to fully represent the range of outcomes that Lifeworks achieves for young people. *'The model I was looking at is like a straight line with the outcomes, but actually it's more like a zig-zag'* (Worker, focus group).

The lack of a clear identity is apparent for young people involved with the service who, during the focus group found it difficult to reflect on Lifeworks as something separate from the other services they received (typically from Aberlour). Additionally a worker told us *'you will be working with a young person for a time and they will say "who is it you work for?"'* (Worker, focus group).

This may also lead to difficulties reporting outcomes, and potentially, meeting operationalised targets. During the early years of any service, outcomes may become more diverse than anticipated and intermediary outcomes or outputs may become evident before the expected longer-term outcomes. Rigid measurement of only the original outcomes may fail to capture the full impact of the work. Equally, the depth of the work may have implications for the numbers that the service is able to reach.

## **The Lifeworks outcomes**

Young people involved with Lifeworks recognised life skills: budgeting, tenancies, college, and employment as the formal areas addressed by Lifeworks. Participants also noted softer outcomes such as motivation and encouragement to make changes to reach harder outcomes (tenancies, etc.):

*Aberlour helped me to move and maintain my own tenancy. They have helped me through the toughest times and helped keep me on my feet. They also helped me to find employment (Young person, survey).*

*Aberlour lifeworks has done so much for me, especially my worker [...] the staff are absolutely brilliant and so, so, supportive with absolutely everything, and the team have helped me with everything from budgeting to helping me with living allowances and even got me a clothing grant just before Christmas – this was the best news I had in a very long time (Young person, survey)*

Participants suggested that establishing a secure relationship with a responsible adult, supports the young person to recognise their own goals and facilitate positive relationships with other agencies and help work towards outcomes. Thus, the relationship with the Lifeworks staff is the medium through which the service has impact on the young person's life:

*There is a need emerging for young people, not necessarily working on set outcomes but just needing that sort of relationship development and just needing confidence... so we've felt we kinda need befrienders as well as mentors, you know just specifically to be working with the young people, to be just specifically working on that (Manager, focus group).*

Lifeworks has provided young people with safety to explore long-term hopes, goals, and plans:

*I think it gives them insight to a life they can live. I don't think it opens doors for them, but I think it makes them aware of doors they didn't know existed and that were available to them. It then offers support and an outlet for them. I think it has potential to make a significant difference to the lives of people who use the service (Practitioner, survey).*

It has been shown that being 'held in mind' by another who has an understanding of a child or young person's inner emotional experience through difficult times has a direct positive impact on their mental wellbeing and fosters resilience (Bateman & Fonagy, 2010; Siegel, 2001). We found evidence of this in Lifeworks:

*It's having someone in their life - having setbacks, they are not judged - learning from adversity improves own self-esteem (Worker, focus group).*

The relationship with Lifeworks acts as a gateway to other services that can help young people access support for harder tangible outcomes, often working as a feedback loop through which outcomes can be multiplied.

There have also been additional benefits to the young people, such as promoting their own interpersonal relationships with peers:

*The groups we offer, there's been friendships that have flourished between each other, you know, they have both come to a group, we've actually got another one because of that (Manager, focus group).*

The team has learned from the positive outcomes of early innovations and continue to build on aspects of delivery they have found most successful. Lifeworks is working to expand the supports offered to continue to achieve outcomes for their client group, there is a particular emphasis on education for young people who are not able to engage with the formal school or college context:

*We want to be able to provide an environment for them when they can have one-to-one tutoring, work alongside the schools as well possibly, so you know, they are getting the opportunity to receive a qualification in an environment that is more suitable for them (Manager, focus group).*

It is plausible that such an innovation may have additional benefits to partner agencies such as schools; future evaluation could explore this further.

### **Ripple effect**

Lifeworks also seems to have a ripple effect benefitting a range of stakeholders beyond the young person. For example, participants often noted the young people's families gain from Lifeworks input:

*...her father has benefitted greatly from it because, you know, he is asking for support within areas and he has engaged really well with family mediation [...] So you know, I think the families can benefit. (Manager, focus group)*

Similarly, they noted improved relationships at home with parents and siblings. In particular, participants reported that siblings benefit from having a positive role model in their brother or sister who is working with Lifeworks:

*That's motivation for them as well, encouraging them, he's happier, he is making good choices, he is no drinking, he is no hanging about the streets with his pals, he looks better. So when they've got siblings and that, they are looking up to them, big brother, he is out doing it, so again there is that ripple effect onwards (Worker, focus group).*

Participants described how this 'ripple effect' extended to partner agencies:

*Social work again, there is a lot of work to be done with these young people... there really is, and social work cases are just through the roof now, [Lifeworks] takes up a lot of that slack (Manager, focus group).*

### **Wider benefits**

Participants were concerned about sustainability of the service; they strongly felt that Lifeworks would be cost effective in the long-term and beyond the immediate system:

*If you want to be analytical about it, these young people need help now... then it's a lifetime of benefits, homelessness, drugs, whatever and it puts more pressure on the state. If you want to go down that kind of side of it as well, they are just left, there is a lifetime possibly of these young people needing constant support from the state, and that's going to be a 10 - 20 year burden. And, working with these young people over six*

*months to a year and they go on and start having a life where there is college, but there is that side of it (Worker, focus group).*

This is an interesting comment and we briefly consider value for money later in this report; however, we would note that long-term cost savings could only be fully explored through longer-term cohort studies, ideally including comparison groups.

There was also positive impact for volunteers that also fed back into the service itself:

*But our volunteers benefit as well and we are really lucky with the volunteers that we have got. They've got a real passion for working with young people and they benefit from the training that they get from us, they benefit from giving their time, from working with young people, getting to know the community, so there is definitely a benefit to them too (Manager, focus group).*

Overall, the impact of the service on outcome seems, to be very positive. However, as previously noted there are challenges to fully capturing impact, especially for soft outcomes and those that occur at a distance.

We also invited participants to reflect on any drawbacks associated with the service, none were reported other than the need for sustainable funding.

## **The Lifeworks key messages**

### **Identity of the service**

The key messages from the evaluation is that Lifeworks is a service that has had a positive impact and needs to be sustained *'they [...] provide a valuable service to vulnerable young people – more funding to continue this valuable resource'* (Practitioner, survey). Data triangulation gives us confidence that stakeholders view the Lifeworks as a *'brilliant service – helpful, friendly, professional'* (Practitioner, survey) and a service that *'change my life over'* (Young person, survey). Lifeworks is addressing a gap serious for a group of young people who have experienced home supervision and for whom there is a dearth of support:

*It is great to see a service which works with young people who may have 'slipped though the net before'. Offering support and hope' (Practitioner, survey).*

In terms of further developments of the Lifeworks service, the consensus related to finding more funding to ensure sustainability and growth; for example, paid professionals to support mental health and possibly more integration with other agencies. Achieving this is likely to need work on the identity of the service (e.g., how it presents itself to others). This is important, as previously discussed, Lifeworks has been somewhat hidden. It is a sad irony, that this mirrors the invisibility of this vulnerable group of young people who we have previously described as Overseen but Often Overlooked (2015).

*These are definitely invisible young people who don't show up in other places (Manager, focus group).*

*I think a lot of people don't know what has happened here with young people (Manager, focus group).*

*[It's] Possible it's so embedded, it's gone under the radar (Worker, focus group)*

One way to achieve this will be to be explicit about how the service aligns with organisational policy, local responsibilities, and national strategies. Managers were aware of this and acknowledged it as an area for future cultivation:

*Aberlour has a strategy going forward and I suppose the service needs to be smart and think where it fits in alongside Aberlour's strategy and where it fits in with the Scottish Government's strategy, eventually for mental health for example, would there be routes into funding the service (Manager, focus group).*

We would note that Lifeworks appears very consistent with national policy around GIRFEC, and that the in-depth, personalised, ecological approach taken could be presented through a lens such as the 'my world' triangle.

The service has also introduced innovations such as the SQA award that tie the work into national developments. At this stage, we have not been able to assess the impact of this new element. However, we note it is also important to avoid overreaching and there is a need to maintain a balance between specialisation and generalisation:

*I'm not sure if we are trying to do too much, the SQA thing, not sure if maybe that's too much... wonder if the young people really want to learn that at this stage, I put a lot of work into it but [I'm] still unconvinced, I think everything else that we do is good, we have tweaked things to suit [the] Who Am I course? The activity groups are tweaked. SQA isn't a bad idea, but we do other things better (Worker, focus group).*

The data re-emphasises the complex nature of Lifeworks, and suggests that the model is still in development. Consequently, further or on-going evaluation (internal or external) is likely to be helpful, particularly as this relates to innovations.

## **Replication**

The evaluation suggests Lifework is a valuable service that in Fife appears to fill a gap in existing services for this vulnerable and under-served group of young people. We have previously demonstrated this is a national issue (Lerpiniere, Welch, et al., 2015; Welch, Lerpiniere, Sadler, & Young, 2015; Young, Lerpiniere, Welch, Sadler, & Fitzpatrick, 2015). This evaluation provides additional evidence to support the allocation of resource

in this area. There is learning from this evaluation that would be helpful to others trying to establish similar services. For example

*Be prepared as when we started out we had a different idea about what the service would look like, we've had to be flexible and create a model that wasn't planned' (Manager, focus group).*

However, in replicating similar services, providers will need to understand that whilst flexibility and responsiveness have been important, having a clear staff and management structure early on is also crucial:

*I guess what's important... is the key areas right at the beginning have identified staff who are clear in their role. You know, a good management structure, having that structure in place right from the beginning, erm, and just kind of follow it through... I feel like we have a good model in place. [...] I feel it's about everybody having that same vision early on, all working from the same approach, having consistency (Manager, focus group).*

A clear delivery model and an organisational strategy incorporating key values may in turn help to recruit and retain suitable staff able to work within the shared ethos. Furthermore, having a clear identity and model is crucial for partnership working, providing a clear role, clear criteria, and a clear referral route. Good partnership working has helped the Lifeworks access other supports for the young person:

*[The local] partnership meeting is helpful, I'm going along and thinking I've got someone who could benefit from that. And I think that's helping in getting us out there' (Manager, focus group).*

*Good partnership working with other services, with social work, that's become quite a good skill for us to have cos we've made a lot of links and everybody's been able to give the right support and that has taken a lot of pressure of us... (Manager, focus group).*

Partnership working itself takes time and resource, learning from Lifeworks suggests a bottom-up local approach may be fruitful:

*Initially I thought if I get in at the top then it will filter its way down, but that didn't work. And we got into team meeting with seniors that's the easiest way, but it takes longer to build relationships with individual social workers, but you rely on them to filter out between themselves (Manager, focus group 2018).*

## Discussion

This evaluation employed a mixed methods approach, gathering a broad dataset from a range of perspectives and analysing deductively across four themes: the Lifeworks model, the Lifeworks experience, the Lifeworks outcomes and the Lifeworks key messages. These four themes were analysed to answer the following research questions:

1. How is the initiative defined – what are the key features of the Lifeworks model?
2. What is the Lifeworks experience?
3. What are the service outcomes?
4. What are the key messages learned for the Lifeworks initiative?

In this section of the report, we discuss the findings of the evaluation with reference to the research questions and existing literature. We also incorporate a commentary of Lifeworks service's value for money within this final chapter of the report.

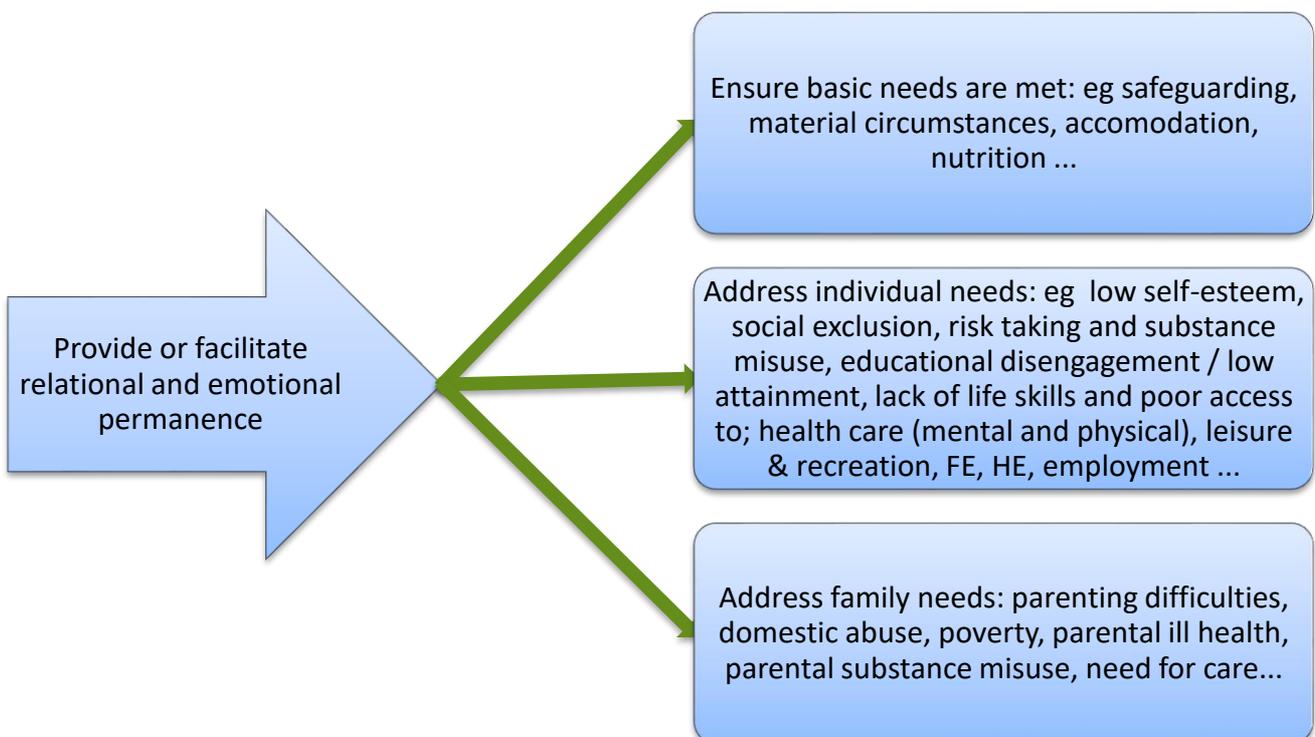
### What is the Lifeworks model?

Lifeworks delivers what could be termed a 'complex intervention'; in complex interventions it can be difficult to identify and define all of the 'active ingredients' (MRC, 2000). The complex nature of the model means that there is a degree of 'flexibility and tailoring' (Craig et al., 2008). It is likely that each young person involved with the service will receive a different package of interventions and experience. The bespoke nature of the service model means that there is not set formula. This has implications for the extent to which the Life works model could be 'manualised' in a way that would allow fidelity to be appraised. In this evaluation, it has been possible to identify a number of features such as a person-centred approach incorporating flexibility and genuine relationships that we believe are 'active ingredients' of the model. This is a 'core component' to the extent that it is recognised, understood, and experienced by a range of different stakeholder groups. A finer grained evaluation could explore how these concepts could be operationalised (made into a testable format); in other words, what would be the things we would expect to see happening in practice to confirm these components are in place.

The Lifeworks model was designed with an understanding that young people's needs vary and that tailored input is required. The person-centred approach has meant that Lifeworks provides support across a breadth of areas in each young person's life. Relationship building with young people can be challenging and takes time, but it is the essence and vehicle for interventions that lead to further outcomes including those focused on education and housing. Trusted relationships enable the worker to walk alongside the young person and facilitate them in developing relationships with partner agencies. This ensures that the young person can receive indirect interventions as well as those provided by Lifeworks themselves. In this way, the relationships that Life works

build with the young people could be considered to be 'high quality'. Such relationships often involve providing emotional support and being 'instrumental' in that they provide connections to other resources (Winter, 2015). The literature suggests that such relationships are often associated with the length of time that a young person has known their worker (Winter, 2015). Again, this is a time consuming, but it appears to be an effective element of the Lifeworks delivery model.

Existing evidence has documented that strong and consistent relationship building as predictive of better outcomes for when working with families and young people (Gadda & Fitzpatrick, 2012; Holt, Buckley, & Whelan, 2008; Lerpiniere, Welch, et al., 2015; Thompson et al., 2007; Welch et al., 2015; Young et al., 2015). The concept of 'relational permanence' has been shown to be of particular importance to young people who have been looked after on home supervision, acting as a key to access a wider range of outcomes (Lerpiniere, Welch, et al., 2015). This idea is discussed in Report 2 of Overseen but Often Overlooked (2015); Figure 2 below is shared (with permission) from that document. The Lifeworks staff team clearly recognise the importance of relationship building and we believe they have created relational permanence for young people. In turn, this has allowed other needs to be met.



**Figure 2: Meeting the needs of children and young people looked after at home (Figure 3 from: Lerpiniere, Welch, Young, Sadler, & Fitzpatrick, 2015)**

The lifeworks approach is also in line with national and international guidance that states that professionals have a responsibility to help young people exercise their right to supportive relationships (Department for Education, 2018; The Scottish Government, 2014; United Nations, 1989). The model's focus on engaging and providing care appears to mirror the national approach to child and family services -Getting It Right For Every Child (GIRFEC) (The Scottish Government, 2017). This outlines a national practice model that allows for a dynamic approach to addressing the needs of children and young people. In particular, the 'My World Triangle' may be helpful in defining or delivering the model and in future, conducting evaluations or considering of model fidelity.

The evaluation has highlighted that need for flexibility in the Lifeworks model of the service delivery due to the complex needs of the young people.

### **What is the Lifeworks experience?**

Lifeworks experiences are defined by in-depth work and interpersonal values that seem to be shared across stakeholder groups. Interpersonal aspects are prioritised and permeate throughout the service requiring a cohesive and supportive staff team that works hard to nurture relationships within the service.

Persistence in staff was emphasised as a required interpersonal value that needs to be supported by nurturing working relationships. The need for persistence is not surprising, given the young client group that Lifeworks supports. Children who have experienced early adversity may develop strategies that are initially resistant to any form of support or compassion (Lewing, Doubell, Beevers, & Acquah, 2018; Neff & McGehee, 2010; Winter, 2015). The evaluation highlighted that young people who have come into the service are often initially isolated and low in confidence. Understandably, this will have an impact on their capacity to develop trust in workers and require time and patience from staff.

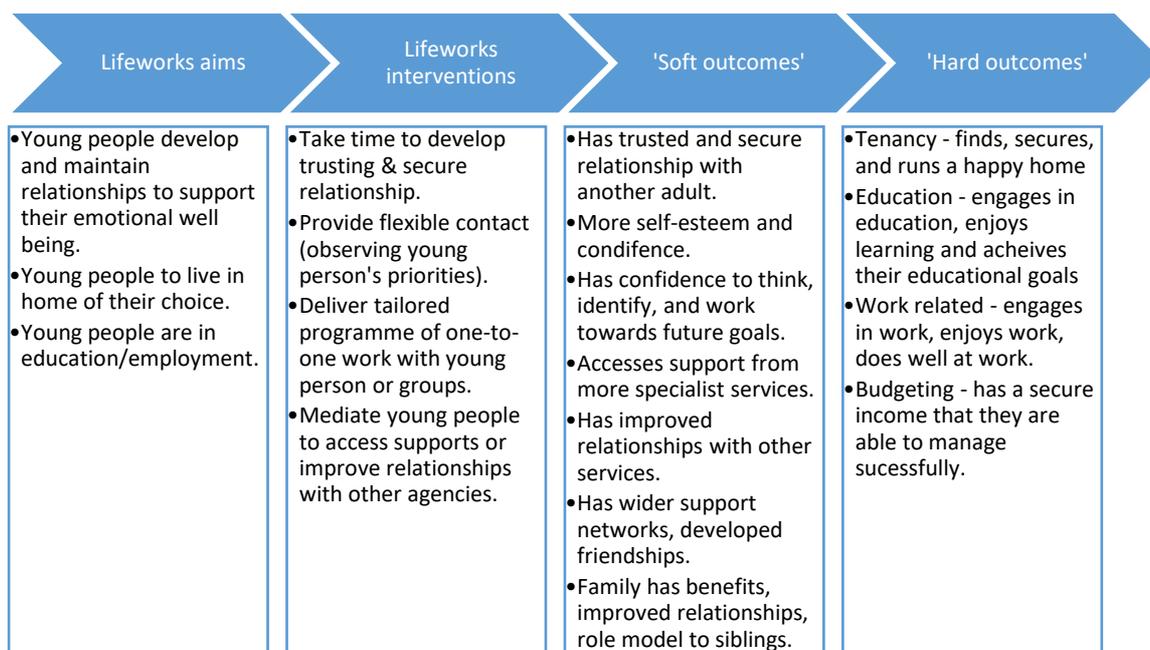
### **What are the Lifeworks outcomes?**

The Lifeworks outcomes include a combination of easily identifiable hard outcomes and less tangible relational elements. However, the personalised nature of these outcomes and the flexibility with which they are delivered, means they are not always discrete measurable and clearly defined outcomes. The lifeworks team use the 'Outcomes Star' approach to help identify personal outcomes that the young person would like to work towards, however, they noted that the young person frequently changed tack and outcomes were adjusted to suit the new goals. The measurement of personal outcomes is inherently complex, and caution is needed in aggregating outcomes or comparing the outcomes of any young person with any other (Lerpiniere, Harris, & Welch, 2015). Taking a misguided approach to the measurement of outcomes can result in misleading conclusions being made about an intervention and its impact.

Less-tangible outcomes such as relationships and the impact on other services may be best understood through qualitative, descriptive, non-numerical approaches. Furthermore 'hard' measures of outcomes, are often most useful for longer-term outcomes, such as sustained tenancies, sustained employment, or longer-term involvement with education. It is of particular note that young people themselves more readily identified harder outcomes such as tenancy and education as areas where the service had an impact on their lives, suggesting that they understood the things that Lifeworks currently helps them with, will feed through into these outcomes. Despite challenges to the measurement of impact, there is evidence that Lifeworks has a very positive effect on outcomes.

Furthermore, participants were all invited to reflect on negative outcomes, impacts, or aspects of the service there were no notable drawbacks reported other than some anxiety about sustainability and short-term funding arrangements.

Figure 3 below summarises an outline logic model, based on the evidence that we have gathered about how Lifeworks achieves outcomes for young people.



**Figure 3: An outline logic model for Lifeworks**

### What are the key messages from the initiative?

Lifeworks is a valuable service that appears to fill a gap in existing services for this vulnerable group of young people. The evaluation has indicated that there is a local population of young people currently or previously looked after at home with unmet needs; furthermore it has previously been reported that there is similar unmet need across Scotland (Lerpiniere, Welch, et al., 2015; Young et al., 2015). This evaluation therefore supports calls for more funding in this area, and a cautious rollout similar

support services. Before this service could be rolled out, we would recommend further work be done to clearly delineate the model's core components, processes, and the underpinning values and theories. In this way, the essential elements of the service can be reliably reproduced and fidelity to the model can be assessed. This report should be helpful in this regard, and its components such as the outline logic model may provide a useful starting point. However, some further work is likely to be needed to a project 'manual' or similar resource.

In terms of replicating similar services elsewhere, the evaluation has highlighted a number of key messages. Flexibility and relationships are important, but so is early clarity around staffing and management structures. Thus, a tension remains between defining a standard model and promoting fidelity, or responding to local conditions and individual needs. It may be helpful to consider existing evidence that argues in favour of an ecological approach that matches intervention to fit need and social context (Centre for Community Health and Development, 2017; Law, Plunkett, Taylor, & Gunning, 2009).

The importance of establishing links with other agencies also merits early consideration; the learning from Lifeworks is that a bottom-up approach has been most fruitful.

Challenges to this type of complex and responsive intervention can include establishing the identity and visibility of the project. This evaluation has identified that there is a need for the service to be able to describe its role and the breadth and depth of its work to reliably promote the service within the wider locality and relevant communities.

## **Value for money**

This qualitative evaluation did not include an evaluation of the economic impact of the service or comparative costs. However, several participants outlined their belief that the service may result in longer-term savings for the State. Therefore, we consider some economic information based on information provided by Lifeworks and the wider evidence base.

## **Costs of the service**

Young people using Lifeworks receive a highly personalised service such that the costs of provision will be different for each. However, it is possible to calculate average costs. The allocated budget to life works per annum is £118,000; this breaks down as £2226 per young person, per year (based on 53 young people who received support in 2016 – 2017). We would expect the service to continue to be consolidated, potentially providing marginal savings. At the same time, we might expect the usual inflationary costs. In this way, an average cost per young person might reasonably be expected continue to be around £2200 per annum.

## Costs in context

These costs are not all costs for a young person using Lifeworks, as they are often supported to engage with other services. However, as we have seen the assistance of Lifeworks appears to make this process easier for other services and may help to reduce their costs.

The costs of Lifeworks also need to be considered alongside a full package of care that may typically be required to support the young person. For example Dixon has calculated the costs of leaving care and engaging with other services (social services, youth justice, domestic accommodation) as around £21,800 per young person per year (Dixon, Wade, Byford, Weatherly, & Lee, 2006).

The PSSRU Unit costs of Health and Social Care 2017 document compiles information on the costs of providing various professionals and services; most are based on English data. The listing does not contain aftercare or similar services; however, other non-related services might be provide a useful benchmark. In Table 1, we have selected a small number of services. It is NOT our intention to suggest that these services equate to Lifeworks, merely that they share basic similarities: they are delivered off-site in the community on an ongoing (rather than one-off) basis by staff with some level of specialism.

**Table 1: Unit costs of selected services Extracted from (Curtis & Burns, 2017).**

Description	Unit costs	Reference year
Child/family support care - social work (ongoing support element)	£2,964 per annum	2012
Costs of reunification (social care support element, medium needs)	£2,588 for 9 months support	2016/2017
Child return home from care (local authority – ongoing support)	£2559 for one year	2011
Advocacy for child with additional needs	£72 per hour client related delivery. Average cost of intervention £724	2016/2017
Social worker	£59 per hour client-related work (excluding costs of qualifications)	2016/2017

Social work assistant	£31 per hour delivery time	2016/2017
Family support worker	£54 per hour of client-related work.	2016/2017

### Considering potential long-term savings

Various efforts have been made to calculate the longer-term costs of preventative costs that accumulate across a life course. For example, the wider evidence base indicates that by investing in throughcare and aftercare services for one child until the age of 21 years the State can save £32,755.37 over the next nine years to age of 30 (Hannon, Wood, & Bazalgette, 2010).

The Safer Communities Scotland Network also calculated costs that might be preventable through provision of suitable support (Safer Communities Scotland Network, 2013). Table 2 shows a selection of these.

**Table 2: Selected potential preventable costs (extracted from SCSN, 2013)**

Description	
Repeat offending with regard to drugs, or alcohol	£2072 per incident
Anti Social Behaviour Order (still used in Scotland only)	£2247 per incident
Average cost of tenancy failure	£1610 - £4210 per incident

Additionally, in 2013 Action for Children modelled the economic cost in Wales of a young person who having left care early compared to if they had remained in care beyond 18 years. In the comparison a young person who had left care early was more likely to require mental health services or welfare benefits, leading to an estimated increased costs of £131,212 from ages 16 years to 46 years (Action for Children, 2013).

## Conclusions value for money

In conclusion, whilst we are not able to provide a full economic evaluation for Lifeworks at this stage, we feel that the costs of the service:

- seem reasonable given the context of other services,
- represent a relatively small proportion of the total public costs associated with these young people,
- allow support that addresses areas where potential future spend could often be substantial.

Therefore, we feel it highly likely that the Lifeworks service provides very good value for spend.

## Strengths & limitations of this evaluation study

As a complex intervention, the Lifeworks service thus far could be classified as being at 'Phase I or Modelling' stage. This involves developing and consolidating the intervention and understanding the possible effects (MRC, 2000). The exploratory and formative methods employed in this current evaluation (using qualitative analysis) were therefore the most appropriate and robust methods of enquiry. During the evaluation period, the Lifeworks service has introduced new elements such as the Outcomes Star and the SQA training and the contribution of these new elements to the overall impact could not be assessed.

This study used a mixed methods approach which is most helpful when addressing research questions that are broad, complex and containing multiple elements (Tariq & Woodman, 2013). The approach to data analysis was a thematic analysis which is appropriate for use with both large and small sample sizes (Peters, 2010). The study may be considered to consist of a small sample sizes for both focus groups and the online survey. However, the number of participants and the structure of data collection enabled data sufficiency (Dey, 1999) and allowed for detailed description of context (Sandelowski, 1986) both priorities for qualitative research.

The quantitative data and analyses provided by Aberlour were useful in providing context, but its format did not support detailed integration with data from this study. Ideally, original quantitative data would have been collected by (or with guidance from) the evaluators. However, this may have required greater resource or earlier input, neither of which was possible.

Although a full literature review was not done, a further strength of this study the reference list, this provides further information about sources that are mentioned in the report and we would gladly facilitate access to any resource that proves difficult for readers to obtain. In particular, readers wishing to understand the evidence base around

working with this particular group of young people are signposted to the literature review conducted during the *Overseen but Often Overlooked study (Report 1)* (Welch, et al. 2015), this is freely available from the CELCIS website. Reports 2 and 3 also contain pertinent information. Relevant material on the difficulties of capturing personal outcomes is also covered in our earlier work *Measuring children and young people's outcomes in residential education* (Lerpiniere, et al. 2015). Finally, Lifeworks managers and staff will also be interested in a forthcoming literature review about relationship-based practice with looked after children and care leavers that we will soon publish.

Overall, we are content in the rigour of our analyses and confident in our findings. We base this judgement on the quantity and quality of the data collected (relative to the size of Lifeworks), the triangulation achieved, and clear signs of data saturation or sufficiency.

## Conclusions

This study aimed to undertake an evaluation of the Lifeworks service with a focus on four broad research questions. The data gathered from the evaluation have been analysed and discussed in relation to each of the research questions. Evaluation highlighted that the Lifeworks model meets a gap in existing services for a group of young people previously or currently looked after at home. This group is particularly isolated in terms of relationships, social networks, and services. They are also particularly under-served, as discussed in *Overseen but Often Overlooked*. Throughout the current report, we have described the difficult, complex, and intensive nature of work with this group. This has implications for resourcing, service delivery, and design. However, the fact that Lifeworks appears to contribute to young people's outcomes provides evidence to support services of this type. Furthermore, the achievements of Lifeworks may lead to longer-term savings for the public purse, particularly in the absence of other suitable sources of support.

For replication of similar initiatives, recommendations include having a clear management structure from the outset, that recognises the importance of shared staff values and building relationships with partner agencies. Service delivery is not a static process, particularly when services are relatively novel and highly complex such that the development and delivery of services constitute an ongoing process. Therefore, we recommend that further in-house or external evaluation should be an ongoing activity for the Lifeworks service.

## Thoughts on ongoing service evaluation

Evaluation of complex interventions requires flexibility; the incorporation of a range of measures and approaches rather than one standard primary outcome, is recommended to give a detailed understanding of the service and pick-up on unintended consequences (Craig et al., 2008). Future evaluation could be achieved in-house, for example, the Lifeworks team could begin rolling programme of focus groups. Learning from these data

could be triangulated (compared) with learning from quantitative data and qualitative data from the outcomes star and numerical information gathered for funders.

Challenges remain in capturing the breadth of work; internal audits (mapping exercises) may help to address this issue, especially for more easily operationalised activities, tasks, and outcomes. Systematically capturing less-tangible outcomes such as relationships, self-confidence, and ripple effects for the wider system has also emerged as a future priority. This could be achieved through bespoke and existing standardised instruments, for example, satisfaction-rating scales used with family or partner agencies, psychometric tools, etc. Likewise, similar tools may be used for measuring some soft outcomes such as the quality of relationships and self-esteem. However, we recognise that resources are scant and decisions about evaluation activity need to be manageable and proportionate.

If a larger roll-out of the service is planned, this may be more conducive to systematic outcomes monitoring as more is now known about which outcomes to capture, it may also provide opportunities for a comparison group. A careful decision would be required about the best approach. A literature review of the existing evidence base would be highly recommended for making informed decisions around such instruments. The use of a standard set of outcome measures and a comparison group, would potentially allow greater certainty about the level of impact achieved, but conversely it would reduce the areas across which impact can be considered.

In conclusion, this evaluation has evidenced the Lifeworks service to be a positive addition to a vulnerable population of young people for which there is a paucity of existing support. The evaluation has offered insights that corroborate and add to the existing evidence base; this has direct relevance to Lifeworks practice, and implications for policy, funding, and potential future models of service delivery.

## References

- Action for Children. (2013). *Chance to stay*. Retrieved from <https://www.actionforchildren.org.uk/media/3336/chance-to-stay.pdf>:
- Bateman, A., & Fonagy, P. (2010). Mentalization based treatment for borderline personality disorder. *World Psychiatry*, 9(1), 11-15. doi:doi:10.1002/j.2051-5545.2010.tb00255.x
- Brannen, J. (2005). *Mixed Methods Research: A discussion paper* Retrieved from <http://eprints.ncrm.ac.uk/89/1/MethodsReviewPaperNCRM-005.pdf>
- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3(2), 77-101. doi:10.1191/1478088706qp0630a
- Bryman, A. (2004). *Social Research Methods* (Second ed.). Oxford: Oxford University Press.
- Centre for Community Health and Development. (2017). Implementing Effective Interventions. Retrieved from <https://ctb.ku.edu/en/best-change-processes/implementing-effective-interventions/resources> 02/02/2018

- Craig, P., Dieppe, P., Macintyre, S., Michie, S., Nazareth, I., & Petticrew, M. (2008). Developing and evaluating complex interventions: the new Medical Research Council guidance. *British Medical Journal*, 337, a1655. doi:doi:  
<https://doi.org/10.1136/bmj.a1655>
- Curtis, L., & Burns, A. (2017). *Unit Costs of Health & Social Care 2017*. Retrieved from Kent Academic Repository <http://kar.kent.ac.uk/65559/>:
- Department for Education. (2018). *Working together to safeguard children: A guide to inter-agency working to safeguard and promote the welfare of children*. London Retrieved from [https://consult.education.gov.uk/child-protection-safeguarding-and-family-law/working-together-to-safeguard-children-revisions-t/supporting\\_documents/Working%20Togeth](https://consult.education.gov.uk/child-protection-safeguarding-and-family-law/working-together-to-safeguard-children-revisions-t/supporting_documents/Working%20Togeth).
- Dey, I. (1999). *Grounding grounded theory*. San Diego: CA: Academic Press.
- Dixon, J., Wade, J., Byford, S., Weatherly, H., & Lee, J. (2006). *Young people leaving care: A study of cost and outcomes. Report to the Department for Education & Skills*. Retrieved from
- Gadda, A., & Fitzpatrick, J. P. (2012). *Home supervision requirements: messages from research*. Glasgow: Centre for Excellence for Looked After Children in Scotland.
- Hannon, C., Wood, C., & Bazalgette, L. (2010). *In Loco Parentis*. Retrieved from London:
- Holt, S., Buckley, H., & Whelan, S. (2008). The impact of exposure to domestic violence on children and young people: A review of the literature. *Child Abuse and Neglect*, 32(8), 797-810.
- Law, J., Plunkett, C., Taylor, J., & Gunning, M. (2009). Developing policy in the provision of parenting programmes: integrating a review of reviews with the perspectives of both parents and professionals. *Child: Care, Health and Development*, 35(3), 302-312. doi:doi:10.1111/j.1365-2214.2009.00939.x
- Lerpiniere, J., Harris, R., & Welch, V. (2015). *Measuring children and young people's outcomes in residential education*. Glasgow: CELCIS.
- Lerpiniere, J., Welch, V., Young, E., Sadler, S., & Fitzpatrick, J. (2015). *Overseen but often overlooked: Children and Young People 'Looked After at Home' in Scotland: Report 2 Identifying needs and outcomes*. Glasgow: CELCIS.
- Lewing, B., Doubell, L., Beevers, T., & Acquah, D. (2018). *Building trusted relationships for vulnerable children and young people with public services*. Retrieved from London: [http://www.eif.org.uk/wp-content/uploads/2018/01/building-trusted-relationships\\_Feb2018.pdf](http://www.eif.org.uk/wp-content/uploads/2018/01/building-trusted-relationships_Feb2018.pdf)
- MRC. (2000). *A framework for development and evaluation of RCTs for complex interventions to improve health*. Retrieved from London: Medical Research Council (2000). MRC. A framework for the development and evaluation of RCTs for complex interventions to improve
- Neff, K., & McGehee, P. (2010). Self-compassion and Psychological Resilience Among Adolescents and Young Adults. *Self and Identity*, 9(3), 225-240. doi:10.1080/15298860902979307
- Overseen but Often Overlooked. (2015). *The Overseen but Often Overlooked Reports*. Retrieved from <https://www.celcis.org/knowledge-bank/search-bank/overseen-often-overlooked-children-and-young-people-looked-after-home/>
- Pawson, R., & Tilley, N. (1997). *Realistic Evaluation*. London: Sage.
- Peters, S. (2010). Qualitative Research Methods in Mental Health. *Evidence Based Mental Health*, 13(2), 35.
- Safer Communities Scotland Network. (2013). *Measuring preventative spend - a cost toolkit for community safety*. Retrieved from <http://www.safercommunitiesscotland.org/>:
- Sandelowski, M. (1986). *The problem of rigor in quality research* (Vol. 8).

- Sayer, A. (2000). *Realism and Social Science*. London: Sage.
- Siegel, D. J. (2001). Toward an interpersonal neurobiology of the developing mind: Attachment relationships, "mindsight," and neural integration. *Infant Mental Health Journal*, 22(1-2), 67-94. doi:10.1002/1097-0355(200101/04)22:1<67::AID-IMHJ3>3.0.CO;2-G
- Tariq, S., & Woodman, J. (2013). Using mixed methods in health research. *JRSM Short Reports*, 4(6), 2042533313479197. doi:10.1177/2042533313479197
- Children and Young People (Scotland) Act, The Scottish Government (2014).
- Getting It Right For Every Child (GIRFEC). Scottish Government, (2017).
- Thompson, S. J., Bender, K., Lantry, J., & Flynn, P. M. (2007). Treatment Engagement: Building Therapeutic Alliance in Home-Based Treatment with Adolescents and their Families. *Contemporary Family Therapy*, 29(1), 39-55. doi:10.1007/s10591-007-9030-6
- The United Nations convention on the rights of the child, The United Nations (1989).
- Welch, V., Lerpiniere, J., Sadler, S., & Young, E. (2015). *Overseen but often overlooked: Children and Young People 'Looked After at Home' in Scotland: Report 1 reviewing the literature*. Glasgow: CELCIS.
- Winter, K. (2015). *Supporting positive relationships for children and young people who have experience of care* Retrieved from <https://www.iriss.org.uk/sites/default/files/iriss-insight28-020315.pdf>
- Young, E., Lerpiniere, J., Welch, V., Sadler, S., & Fitzpatrick, J. (2015). *Overseen but often overlooked: Children and Young People 'Looked After at Home' in Scotland: Report 3: Exploring service provision*. Glasgow: CELCIS.

## **About CELCIS**

CELCIS, based at the University of Strathclyde in Glasgow, is committed to making positive and lasting improvements in the wellbeing of Scotland's children living in and on the edges of care. Ours is a truly collaborative agenda; we work alongside partners, professionals and systems with responsibility for nurturing our vulnerable children and families. Together we work to understand the issues, build on existing strengths, introduce best possible practice and develop solutions. What's more, to achieve effective, enduring and positive change across the board, we take an innovative, evidence-based improvement approach across complex systems.

## **For more information**

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