

Engaging with disadvantaged communities – Identifying best practice for the East Midlands

Summary and conclusions report

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Of interest to partners, providers and employers, and all those interested in learning and skills in the East Midlands.



Engaging with disadvantaged communities - Identifying best practice for the East Midlands

*Document 1 of 2, Summary and Conclusions. By Judith Wilson and
Humph Hack for Marketry on behalf of LSC East Midlands*



LSC EAST MIDLANDS

Contents

Contents..... 5

Executive Summary 6

 Types of disadvantage – the principle of seeing different ‘communities’ 6

 Engaging disadvantaged people – The principle of ‘know and trust’ 6

 Keeping them engaged 7

 Moving people on – The principle of helping them achieve..... 7

 What not to do 8

 Summary..... 9

Conclusions and Recommendations 10

 Introduction..... 10

 Objectives..... 10

 Methodology 10

 Processes and routes12

 Critical success factors.....13

 Stages of progression..... 26

 Recommendations for transferring good practice 28

Key Success Factors Summary.....30

Executive Summary

This research gathered desk research and undertook primary research with 40 providers running schemes supporting disadvantaged young people and adults to find out “what works”. The aim was to determine the critical success factors and causes of failure in helping disadvantaged people achieve. The views expressed are the overall findings from provider’s comments and desk research. Not all providers would agree with all comments, but this research represents the distillation of the majority comments and the findings of previous research exercises. It is also important to note that not all providers need to do all the things set down here in order to have a successful scheme; in fact it would be far too idealistic to expect it; a few key elements are enough.

Types of disadvantage – the principle of seeing different ‘communities’

It is interesting to note that disadvantage can be area based, people who experience general deprivation in an area and who are trapped by poverty, or type based i.e. they have an issue or difficulty that causes them to be disadvantaged. Often these things overlap, however provision in terms of support can often be logistically focused on one or the other to very good effect, either working in or with a community. The benefit of this approach is that disadvantaged people can have a strong association with what they would

see as “people like them”; and this works well where trust is an issue or there is a need to build trust.

Disadvantaged people often have a poor level of education (the exception to this being some ethnic groups where English is the main issue), which can be a function of their disadvantage and the overall effect of this low level of education is low income and/or unemployment.

Engaging disadvantaged people – The principle of ‘know and trust’

Because of this, one of the most important underlying attributes of successful provision is the principle of ‘know and trust’. Many disadvantaged people do not know and trust school, college or even locally based institutions. However this does not rule them out in terms of provision, some of these organisations have built this trust over time. Places where people feel comfortable are very important, and where this is can vary greatly from group to group. Provision that works well is generally based in the community – either geographically or emotionally, as this encourages word of mouth and drop in. Word of mouth takes time to develop and it is clear that a good reputation and strong links to the local community are an important part of this process. Having prior users involved in both engagement and delivery activity strengthens this tremendously. This sums up another important principle which many providers describe as the:

Grassroots approach

Multi-agency approaches clearly also work well, often providing a wide range of support and providing help that is often vital for disadvantaged people and can tackle some real problems.

First impressions and engagement activities are also a successful part of the mix. Empathetic, skilled and well-trained staff play a key role in this process, as do easy and accessible first line activities, this can be something like a communal television or sport or as simple as tea, coffee, and a chat.

Keeping them engaged

Good schemes therefore keep people engaged through providing an informal, relaxed and safe environment, and the schemes themselves also need to work this way. A myriad of things can be used by agencies and are important here:

- Personal relationships are key - there is a need to build respect and trust gradually, this is very dependent on the skills of:

Staff

- Schemes work well when they provide a lot of support and understanding – in lots of different ways: both on-going and using peers.

- It is also important to help people overcome any issues and difficulties and support them through it.
- It is clear that schemes need to be tailored to the needs of the individual – flexible and responsive – initial assessment is also an important part of this be it formal or informal
- Assessments can be informal and happen over time - but are crucial in determining the kind of learning experience that is right
- Learning by stealth ‘experiential learning’ works well
- Small groups or one to one
- Above all time and patience!

Moving people on – The principle of helping them achieve

The principle of helping people achieve is very important – however it is done. Informal approaches to this are good as disadvantaged people can be easily put off by more formal methods. Helping people achieve often relies on a process however, and in the best providers this process is evident, no matter how formal it may be, and we saw examples of both very formal and very informal processes working well here. The overall parts of the process are:

1. Some kind of initial assessment – which can be very informal, but it can be very useful when it’s recorded

and discussed and agreed with the individual. This is important for understanding where the learner is at and providing the right kind of learning, but staff need to be very skilled not to deter the client.

2. Some kind of progression system is good (again this can be informal) as it provides something for people to measure their progress against and gain a sense of achievement. However it can be very minimal. We came across good examples of this in learning plans. It also does rely on careful collection of evidence of progression, again this can be very informal but someone needs to know how the client is progressing.
3. A celebration of success – There are many different approaches to this. Accreditation is one option and has an important role to play – it can be very motivating and inspiring – good providers use this wisely, but whatever approach is used it is important that the learner gets and feels a sense of achievement.

What not to do

Most of what not to do is the converse of what works well. Approaches that clearly cause problems in schemes are: trying to move people on too fast, up front chasing of qualifications, chasing targets or imposed accreditation can put people off who are a long way from that kind of achievement or don't respond well to pressure and lack the confidence in their ability to achieve.

Disadvantaged people often don't respond well to inflexible, judgemental attitudes and staff that are understanding and empathetic and clearly key to keeping people involved and engaged. They also tend not to respond well to more traditional learning approaches: what was described in this research more than once as:

No chalk and talk.

Anything that is theoretical, complicated, or just not taught well, often turns off disadvantaged people. The other way that providers become unstuck is in not recognising the extra support needed by disadvantaged people; and sometimes funders do not allow for this. This kind of support can be provided internally or through links with other organisations; but it is often varied; and we came across many different examples of the ways this support is provided. However it is also important to recognise that some courses just don't work.

For those commissioning services, there are a few things to be wary of with providers which we saw as examples of things that tended to work against achieving good end outcomes:

- Disorganised voluntary agencies – rooted in the desire to serve their client group but lacking any approaches or discipline for recognising progression
- Mainstream providers not really linked into the community

- Poacher turned gamekeeper – VCS who have lost their core ethic in the chase for funding
- Possessive organisations – unwilling to let their clients move on, or recognising that other services could help and serve them well.

Summary

There are key learning points from this research that hopefully will provide funders and commissioners with guidelines for assessing schemes and bidders.

Conclusions and Recommendations

Introduction

Developments in the education policy context (commissioning, autonomy, personalisation) alongside the developments from Leitch have made this research important for the delivery of effective programmes with disadvantaged young people and adults across the UK. This report was commissioned by an East Midlands team keen to see the lessons learnt by programmes supporting disadvantaged people across the region shared with a wider audience.

Objectives

The primary objectives of this research project were as follows:

- To identify and document recent examples of ways in which the LSC has engaged with disadvantaged communities to promote and deliver learning opportunities.
- To describe the predominant processes and routes used for these engagements (e.g. via community and voluntary sector organisations, ESF projects, partnerships, special learning programmes or initiatives).
- To identify which LSC client groups have been engaged with: e.g. offenders, learners with learning difficulties and/or disabilities (LLDD),

ethnic minorities, the mentally ill, lone parents, people on incapacity benefits.

- To report on the demographics of those engaged, including prior level of attainment and outcome.
- To describe the critical success factors and causes of failure in the examples identified, in the form of case studies.
- Understand how the third sector has contributed to this process.
- To make recommendations to the LSC as to the most effective ways of transferring the good practice that has been identified.

Methodology

The research included:

- A review of desk research to examine published information about methods of engagement with disadvantaged communities and what works. This was not designed to be wholly comprehensive, but more examining a range of programmes and research that would feed into understanding of this research.
- A review of 40 LSC programme providers and VCS organisations in the East Midlands recommended by LSC staff as exhibiting both poor and good practice. to examine the work

undertaken with disadvantaged individuals and communities and the nature of this work across the region examining methods of engagement and success factors or reasons for failure. The outcome is the grid of programmes and initiatives and the communities they engage with in Section 9.

- Analysis of ILR data to ascertain what types of disadvantage are being supported by LSC funding, the demographics of those individuals and what types of providers have supported them, including level of attainment and outcome. This analysis is contained in a separate document.
- Face to face interviews with 7 LSC local and regional managers and 3 staff from VCS Learning and Skills Consortia were undertaken to gain their views on the above and best practice.
- Examples of engagement in the form of 22 case studies have been produced from the initial 40 interviews (separate document).
- Production of a toolkit/ recommendations detailing best practice and methods of engagement that works for providers.

The focus of the schemes we examined were primarily LSC funded; and therefore there is a focus in this research on education and training; and support to achieve this aim. Our original aim was to explore schemes that were funded through NLDC, PCDL, IAG, FE, ESF and general Voluntary and Community Organisation schemes that were seen to be effective in working towards a learning aim. Providers had received funds via NLDC, PCDL and ESF although in the sample NLDC and ESF funds were the most common; with ESF funding being the greatest and this was the nature of those that were selected by staff as being both effective and working less well

Schemes were selected by LSC staff as exhibiting elements of good and poor practice. Some 85 providers were recommended as worthy of consideration by staff from the East Midland Region of the LSC and other staff from the region's Learning and Skills Consortia. 40 of these were selected to represent as wide a spread of geographical location, ethnicity, type of disadvantage, and size of organisation as possible. Since the populations of all five counties was roughly similar, it was decided to interview around 8 within each county. These 40 were interviewed face to face with interviews on average taking 90 minutes. From these 40 interviews, 22 were chosen as representatives of best

practice and specific issues which were common to many.

The range of organisations interviewed meant that there was a significant difference in the amount of funding which they had received and the proportion which came from the LSC directly or via an intermediary. A few were currently not in receipt of LSC funding although they had been in the past and/or were hoping to be in the future. The aims of most of the schemes we examined were to raise self confidence and aspirations, help clients gain personal skills and help them progress in learning and gain some kind of outcome, such as a qualification or employment. Improving clients' employability was a key underlying theme of many of the projects we examined, not surprisingly given this focus in policy from central government. However there were also programme specific aims such as empowering women, reducing re-offending, reducing drug and alcohol abuse and improving physical and mental health.

Processes and routes

There is no one type of provider that delivers well to disadvantaged people; from this research VCS and mainstream can clearly both deliver well and both deliver poorly to this group of people, although there is evidence that VCS organisations do engagement best. This report identifies a number of factors that are crucial in delivering to

disadvantaged individuals and through that process highlights the strengths and weaknesses of certain types of provider, funding streams or provision. VCS organisations have a tendency to be good at engagement, understand their client group well, be learner focused and be prepared to take the time to help learners achieve; often because they are not driven by funders who demand an outcome for a certain cost.

Mainstream providers are good at these areas too, but they need the flexibility with funding to do it and can lack the understanding of the client group unless their arrangements for those that are disadvantaged are good. On the other hand mainstream providers have the capacity to deliver large numbers, are outcome focused and when they understand and have set ups to support disadvantaged learners can be excellent at progressing them on and giving them a sense of achievement. VCS organisations that have shifted their perspective on how to achieve outcomes can do this extremely well too. The franchising model where VCS and mainstream work together can work extremely well, and partnership is a key theme throughout this research, but it is fraught with difficulty as two cultures collide: those that work well recognise the strengths of each.

The achievement of outcomes is interesting and there is no doubt that with the right approach this is more possible, these might not be outcomes that the LSC want to see, or they might

take a long time, but the best providers have this focus on moving people on and helping them achieve many small steps.

Another important point to make is about social enterprises. The providers with this status, or those wishing to pursue it, tended to have a more entrepreneurial approach to service delivery. For example BEST in Nottingham were involved in many activities to generate income which in turn would be used to enhance service delivery for the local community. Being non public sector funding dependent was key here, attracting funding from the private sector - as some providers did - ensured that links were made between employers and learners. There were some significant successes in this area whereby local people had secured employment with national employers due to the foresight and entrepreneurial approach of senior management. This model worked very well for providers who explored the opportunities for business development and also ensured that the local community benefited. However it was also clear that it was possible to become 'poacher turned gamekeeper'; the small number of bigger voluntary sector organisations who had become too professional – too focused on social enterprise had sometimes lost their initial strengths in their focus on the individual.

Critical success factors

Many issues emerged throughout the interviews which were undertaken with VCS providers in the East Midlands related to both effective delivery and impacts and outcomes for learners. There was a diversity in terms of the scale, scope and focus of provision and the learners which were provided for. However, there was a clear unevenness across some of the providers in terms of quality and outcomes and this was down to a series of factors. The main factors which were critical to either being more successful than not were:

- Being learner-centred
- Staff quality and development
- Financial skills and acquisition of funding
- Strategic relationships and social networks

All of these key themes which impacted upon the quality of provision and outcomes for learners had a major impact upon the sustainability of the hard work which was being undertaken by providers.

Those engaged: the prevailing definitions of disadvantage and disadvantaged communities – the broad definition of a “community”

In the East Midlands, as in much of the rest of the UK, disadvantage is defined

in many different ways and manifests itself in different individuals in different ways. This research needed to cover this in the widest aspect; given that it included desk research as well as an examination of LSC “customers” via the ILR. Much of the national policy work focuses around disadvantaged communities, either by the selection of people for support or through projects, funding or schemes that are focused on particular areas, wards or postcodes. These areas suffer general deprivation, and residents are often trapped there by poverty and/or paucity of alternative housing, although some BME individuals chose to live in close proximity to those of a similar background. Many of the projects we interviewed for this research were focused on particular areas, however it was also clear that despite living in a deprived area, the residents did not lack the ambition to live elsewhere or aspire to a “better school” for their children to attend.

However it is clear also from this research that “communities” do not have to be defined geographically, they can sometimes be very advantageously defined by a shared disability or disadvantage; for example autism, sexual orientation or mental health problems. Indeed some providers are focused on communities in this way, as well as geographically. For these individuals, the isolation they often feel over and above other issues they have is an added disadvantage; and there is

a “social” aspect of travelling to a central venue and the time spent with others of similar disadvantage; this is an important benefit of their involvement in certain schemes or projects. These communities often have their own set of issues that arise because of the nature of the disadvantage they face and the relevant solutions and required support can be very different from one to the other. Other specific examples of this might be ex-offenders or those with little or no English.

For many providers, and this probably arises because of the nature and focus of LSC aims and work, the main type of disadvantage faced is low, or no, education, qualifications and training. It is also clear that for a lot of the disadvantaged people that are supported there is a real issue around the impact of their health, family issues and mental health and disability; quite often interlinked. The result of any one or these or a combination of factors is usually being on a low income or being on benefits and unemployed.

Methods of engagement, getting the disadvantaged engaged – the principle of ‘know and trust’

It is clear that people get involved in support programmes in a number of ways. Reaching disadvantaged people and getting them involved is clearly not easy and for many organisations this basically comes down to hard work; and there are clear issues around apathy, a general reluctance, travel problems and disorganised lives. Clearly location is

important; making sure that whatever you offer is in the heart of the local community you serve; and this clearly encourages word of mouth and drop in. Journeys longer than a short walk from home can make projects unsuccessful. In deprived communities many people talked about social hubs being an important method of engagement; places where the target audience already feel comfortable. These might be a community centre, a social club, after-school club, or even, in one case, Job Centre Plus. This often works best when the local community chooses where that is.

KEY POINTS

The principle of 'know and trust' is important:

Encourages drop in, keeps people engaged

Staffed by 'people like them'

Who have experienced the things that they have

"A grass roots approach"

Successful schemes have empathetic, skilled and well trained staff

First step activities are crucial – this could be anything that gets someone interested, as simple as tea, coffee and a chat

Sometimes alongside good location, providers offered a non challenging

activity to get people in (such as tea, coffee or a chat) which was often a 'first step' through the door for many disadvantaged people, and it is clear that many organisations use some kind of 'hook' to get and keep people involved. This can be everything from incentives such as childcare and travel expenses, being very visible and local, using grass roots community 'helpers', or people well known in the community, offering tea, coffee, a chat or the internet; anything that gets people through the door and reassures them, and it's also clear that the personality of the first person they meet is also very important. Other providers talked about offering a course or covering an issue (e.g. drugs) that was in demand to get them hooked in (such as IT).

Feeding into this and running alongside it, many successful providers also have a reputation and strong links either with the local community (by being based in it and staffed by people from it) or good links and a reputation with the agencies that refer people to them, and partnership is clearly key here. The length of time they have been running clearly helps this process as it takes time to build relationships and trust and be recognised as doing good work, quite a few of those we spoke to clearly had waiting lists, which was a measure of their good reputation and success.

Virtually everyone we talked to believed that engagement activities were best

carried out by individuals who were based both geographically and emotionally in the community they hoped to serve. Many of the most successful projects employed prior users of the service; sometimes these were paid full-timers, sometimes part-timers earning less than the amount which would affect their benefit payments. Almost all the providers we spoke to used unpaid volunteers in some way; often well outnumbering paid employees and many of these were past users of the service. The key issue here for disadvantaged people is being encouraged to get involved and in some instances supported or trained by people they 'know and trust'; this is why some referral organisations work particularly well; because the disadvantaged person has worked with this other agency and 'knows and trusts' them. It is also the reason why some work less well; 'institutions' often being mistrusted based on past experience; and this can be seen in some of the desk research we undertook looking at evaluations of programmes to support disadvantaged people through organisations like Jobcentre Plus. Interestingly quite a few successful projects talked about the benefits of trainers or support workers who had been in a similar situation to those on the programme. There were also some interesting ideas that organisations had put together (such as referral packs) for referring organisations.

Face to face and outreach clearly also worked well. Outreach was effective particularly for the more rural providers whose main engagement method was often this. The only problem with outreach was that there was a lack of funding and staff time, both perceived and real, to engage in such activities and this was mentioned by some as a barrier, as well as issues around measuring its success.

For those whose disadvantage was largely educational and/or aspirational, the local college had no attraction. Those who had failed at school, had attended sporadically or been excluded had no desire to suffer more humiliation at the hands of a similar institution. Such places were considered to be "not for the likes of us". In families where worklessness was the norm, individuals saw no reason to put off limited short-term gratification, in favour of the long-term possibility of success. For some alcohol, drugs or a lifestyle revolving around petty crime was preferable.

Strategies for keeping disadvantaged people engaged

KEY POINTS

Personal relationships are key - there is a need to build respect and trust gradually.

Schemes need to be informal, relaxed, and safe

Schemes need to provide a lot of support and understanding – in lots of

different ways: on-going and using peers.

Overcoming and supporting people through issues and difficulties

The different learning approaches and techniques used to attract and retain learners was also a critical factor in success. Broadly speaking providers who had a more learner-centred approach were most likely to be more effective. Initially it is clear that having an informal, relaxed and safe environment is an important part of the first few visits or engagement, as is having good quality, short, enjoyable and varied courses at convenient times. However it is very clear that the degree of support and understanding offered to those disadvantaged involved in programmes is really what keeps them engaged. In this research we came across lots of different ways of providing this, either through tailored one-to-one support or learning, a student support worker, using learning champions and peer mentors, involving outside agencies, planning realistic goals with frequent reviews, building trust and a personal relationship, or just straightforwardly having a sensitive and flexible approach. Helping them see the future and possibilities of what they were doing was also felt to be important; for some this was accreditation, for others a work placement or a volunteering place, for others further

opportunities to progress and develop their skills. Taster sessions also helped reduce initial reluctance.

However, attendance and involvement can still be a problem because of some disadvantaged clients chaotic and disorganised lives; problems with family, drug/alcohol abuse, punctuality issues, mental health issues, childcare issues, general apathy, lack of concentration, pregnancy, criminal behaviour, housing problems, physical health issues or even just returning to home countries for visits. Supporting clients in overcoming some of these issues is often part of the mix; offering support such as childcare and travel expenses as well as help dealing with other problems. This underlines why staff play such an important role in engagement and why having a sensible and flexible approach and tailored one to one support is so important.

To encourage a feeling of belonging and/or ownership some successful schemes have developed an ethos which includes a group of users being able to make some decisions about the way in which the organization develops. This might be done through consultation or membership of a decision making committee and can generate involvement and commitment.

What learning approaches work: examining 'Learning by stealth' and giving people a sense of achievement

KEY POINTS

Tailored to the needs of the individual – flexible and responsive – initial assessment is important

Assessments can be informal and happen over time - but help determine the kind of learning experience that is right

Learning by stealth ‘experiential learning’

Small groups or one to one

Above all time and patience!

A sense of achievement is very important

Good progression systems work well – learning plans or evidence of progression

Accreditation can be motivating and inspiring – good providers use this carefully and wisely

Celebrate success!

Most mentioned that learning by doing, learning that was practical or involved people doing things, making things or using a real world example (e.g. bus timetables or cookery or measuring work in a garden centre) was the most successful way to teach disadvantaged learners. It was clear that a number of providers had a relaxed approach but that ones that are most successful have beneath that informal and relaxed approach a structured programme with specific achievements attached for each learner. This is clearly a very delicate and difficult balance and in its most

successful examples is driven by the learner.

For example the model which the Wolds Learning Partnership has adopted and has developed over a number of years is one which emphasizes the importance of continual improvement to benefit learners. The model assesses and monitors attitudes values and behaviours and works through all stages of the learner journey from assessment to progression and on to evaluation with the cycle of learner support complimenting the process.

The types of learning which worked were flexible and responsive learning, learning which was individually tailored to meet the specific needs of the particular learners. There were no systematic, methodological approaches to how learning was delivered; it was mainly a combination of using tried and tested approaches which have been developed in consultation with learners. By far and away the most popular learning approach that works is the interactive and participatory, experiential teaching approach. The reduction of chalk and talk and consequential increase in practical approaches were felt to be very important. Most methods were said to be learner led and dictated by their needs, as well as involving a great deal of one to one support. Many also talked about non pressurised environments and making learning fun and informal, and not scary or threatening.

Many used innovative approaches in empowering their learners and allowing them to make decisions. Initial assessment was also felt to be important to make the “learning by stealth” approach work; to understand where the learner was at, and in order to provide the right kind of learning that was right for where they were at, but also keeping in touch with this throughout the learning experience, sometimes through some kind of plan, but not always. Experienced tutors who were understanding, either by dint of being through a similar situation themselves or experienced with the type of client group, clearly also contributed to this.

However it is done, giving those involved a sense of achievement is all important, in whatever way it is done and whether this is one small step or several leaps and bounds. Accreditation has an important role to play here, and providers talked about how it could be beneficial for the most unlikely clients, and again there is a fine balance here, but finding clever ways to help people who have never achieved any qualifications actually achieve some can be the most motivating and inspiring of experiences. Good providers use this wisely. Almost all the providers we spoke to explained how they had initially been sceptical of LSC targets related to accreditation. While most regarded progression as important, they believed that the suggestion of overt learning

activities, and particularly testing, would put people off. They managed to overcome this reluctance on the part of users by offering activities chosen by users, which might initially not be capable of accreditation. The vast majority then discovered that once users were able to achieve, they were keen to do more.

Most providers view initial assessments with some scepticism, however most successful providers do this; whether it is done formally or informally over a long period of time by getting to know the individual and working with them. In assessing disadvantaged people, informal interviews carried out by understanding staff are by far the most successful approach. Crucially those who emphasized the importance of initial assessment and diagnostics showed clear evidence of being more able to retain learners. Retention however was not a major issue for most providers though there was strong feeling that specific models/approaches had more success. The best projects make the collection of evidence into a portfolio a major priority. Although the evidence was most often looked after by the staff, all of the paperwork, including interim assessments of progress, were considered to be the learner’s property.

Many providers have clearly arrived at the approaches they use through many years of experience and clearly experience working with the client group

was crucial here, as many providers had seen what they did produce positive effects with the client group they worked with, and have adapted the above approaches in many different and innovative ways, to very particular individuals needs.

Failures, what doesn't work and why – no classrooms!

KEY POINTS

NO upfront chasing of qualifications or 'imposed' accreditation or targets

NO inflexible, judgmental training or attitudes

NO classrooms, chalk and talk or theory!

Not recognizing the extra support needed

Too much haste!

We talked to providers more generally about their views on things that did not work, and many talked about courses that had just had no take up. Too much structure and formality was mentioned by a lot of providers, having a classroom type approach and being heavy handed, authoritarian or inflexible, with several people mentioning that flexibility was important. Some talked about a top down approach that was too fixed on a "recognised" end goal, and that the learning for this group needed to be more learner-driven and give people time to achieve without rushing them. It was clear that funding often compounded this by being focused on

"recognised" outcomes; and there was a need to recognise softer outcomes, and give people time to get engaged. Attendance was clearly an issue as was being judgmental or using academic, complicated or theoretical approaches. A few mentioned groups of individuals that didn't work together for one reason or another.

Everyone had tried something different to rectify problems they had experienced. Some marketed their courses better, regularly reviewed whether things were working, employed staff that were more appropriate for the client group, asked learners and listened to what they said, making sure learning was client led, made their courses simpler, separated people who were causing trouble, built relationships with the learners either through staff or mentors, and worked one-to-one.

Extra support for disadvantaged learners: to refer or not to refer?

KEY POINTS

Extra support is very important in helping disadvantaged people address difficulties and can be provided in many different ways

We saw in a number of cases a different model for IAG – on-going and incremental

Providers are clear about the amount of support needed just to keep people on

track towards a learning aim. They clearly have different ways of handling what they do when people require additional support, and there are clearly lots of issues around this. Clearly for some providers a lot of their clients have additional support needs as well as learning needs. Some providers try hard to provide this but funding is limited and the needs are great, some struggle and other have found funding from elsewhere, others refer clients and have built close links to enable this, others have managed to get additional support on site, either through another contract (such as IAG) or through managing to get an additional worker on site from another agency. Others have trained their staff in things like counselling techniques. There is clearly a resource issue here and others use mentors or volunteers from amongst their past client group to provide some of this additional support and feel they create a virtuous circle here where all those involved benefit and learn.

This on going support can be viewed in a number of different ways and different programmes or funding streams would call it different things, and it would have a slightly different orientation dependent on this. However a different model for IAG can be viewed in this research as important in securing successful outcomes. Instead of formulaic and structured approaches or one off interviews or support a more informal way of giving IAG is clearly more

appropriate for this group of individuals. IAG witnessed in this research was largely on-going and an incremental process whereby interventions would take place at critical points throughout the learner journey (more like the Connexions PA model). However, whether it is called IAG or mentoring or something else, this support was also delivered in many cases by ex-learners on programmes where they were now either employed or volunteering for.

Referral happens either because a provider feels that another agency would be better suited to give the support the individual needs or they are unable to offer it themselves for various reasons.

Achieving outcomes –staff skills and experience and time

KEY POINTS

Good staff are vital

The lack of consistent funding works against both disadvantaged people themselves and the providers that support them.

A proportion of the providers involved in this study achieved good outcomes in terms of learning either through qualifications or progression. However, for disadvantaged clients their starting points are clearly very variable and

many providers do not start with this end goal in mind, seeing it as more important to know where the client starts from and what they could achieve. Providers talked about soft outcomes and making important achievements in terms of confidence or self-esteem and personal skills improving, for those who didn't "formally" progress. Other good outcomes were felt to be in IT skills; community involvement, friendships and ultimately employment. Areas that were felt to be important were that people were motivated to make changes to their lives, moving out of a more negative lifestyle and given a feeling that they had a future, which for many of them was often not where they started.

Something which emerged from the interviews was that the quality and skills of the staff and management involved was key. The main factor in achieving good outcomes is clearly staff skills and experience. It was clear that providers felt that it was important to focus on the individual however this was done; be it one to one tuition, taking things slowly, assessments or understanding. Engendering a feeling of mutual trust and respect, being supportive, patient and understanding and having the ability to listen, learn and change accordingly were also key things that people mentioned. It is also clear that having an aim or achieving a positive outcome was also important for learners too. All of the providers to some extent had staff who had also been ex-learners at some point. Some had been volunteers and

had become directly employed by the providers. Where this was more prevalent the providers were more learner-focused and could offer a more holistic service. This was particularly the case for giving informal IAG and first step learning support mechanisms. Ex-learners were perceived as being excellent mentors and a good example of this was the learning champions in Nottingham.

Timescales were universally seen as a problem in the achievement of outcomes amongst disadvantaged people. To support an individual whose experience of education may have been completely negative, through a sequence of non-accredited learning, onto a more formal qualification and eventually to mainstream education or employment might take ten years. Most funding demanded an unrealistic pace of progression from these kinds of individuals.

For around half of the providers we examined LSC programmes clearly do not get the best outcomes for disadvantaged people; there were a variety of reasons we were given for this:

- Because there was too much emphasis on accreditation and LSC outcomes
- There was too much emphasis on Level 2 targets which were also too high

- There was no, or little funding for certain clients for obscure reasons
- Timescales were too short
- The LSC was in general felt to be too complicated to work with
- There was little recognition of the extra support that the disadvantaged need.

In this respect with some of its providers the LSC is lucky, the good providers have a level of commitment and enthusiasm amongst staff and management and they recognise what disadvantaged people need and often get this support provided either through other funding streams or in other ways. Much of the work which was undertaken was 'unseen' and therefore unfunded, particularly support and informal IAG. It was largely down to the ethos of the organisation and the dedication of the staff which ensured that learners received way and above the requirements of the contractual obligations. Clearly funding for engagement activities and preparing people for work is crucial from a provider perspective.

Provision and the structure of funding, funding regimes and the issues this raises

KEY POINTS

Combinations of mainstream providers and VCS organizations can work very well where they bring together the strengths of each and there is commitment to the partnership from both sides.

This report primarily focuses on LSC funding, although many of the voluntary sector organisations we talked to received some funding from elsewhere. It is clear that most voluntary sector organizations live from "hand to mouth" in terms of their funding and there is no doubt that this insecurity impacts on the work that they can do. Providers were mainly funded by an array of different sources ranging from grants from Charitable Trusts and foundations, public bodies, as well as the private and corporate sector. Some were engaged in income generation through other businesses activities which benefited the local communities which they serve and were social enterprises. The diversification of levels and sources of VCS income was something which indeed stood out as being a factor in achieving success in delivery, in that those providers who have been producing successful bids - both solely and in a consortia context - were the ones which appeared to be less reliant on the LSC.

Amongst VCS organisations there were some grievances about the way funding

went to FE colleges, the Local Authorities and the large national based training providers, particularly in respect to PCDL allocations where there was no requirement that learners must necessarily progress to other learning or achieve accreditation. It seems that franchising, a method of colleges subcontracting with the voluntary and community sector for delivery, was quite popular some time ago, and the “normal” retention by any college seems to be or have been around one third. We did not examine franchising in detail in this research. However providers and some LSC staff considered the retention of this level of funding excessive and to some extent it has clearly become an unpopular approach. Franchising is an interesting area for further examination however, particular what makes this relationship work well; as we came across some examples where the combination of college qualifications and systems and VCS expertise of working with particular target groups, works well. One member of the LSC staff thought it unfortunate that franchising had been “frowned upon” recently. There is some work going on in Nottingham on a scheme to re-examine franchising.

Three quarters of the providers we talked to said that their experience of working with the LSC agenda was a positive one. Most felt that this was because the funding enabled them to achieve positive outcomes with their clients. Others had experienced good support from the LSC or organisations

that the funding was routed through (local consortia) in helping them set up systems or making suggestions to help delivery. However, where this is not productive, this often arises from things that the LSC are not prepared to fund, a lack of contact and understanding of what the voluntary sector does, and their approach; or processes and procedures were onerous and over bureaucratic and this was mainly around Pre Qualification Questionnaires (PQQs) or Invitation to Tenders (ITTs) processes. It is clear that regular meetings, good relationships and good communication are vital. The mismatch between what the LSC was prepared to fund and what some organisations wished to do and what they achieved, might explain some feelings within the voluntary sector which ranged from disappointment, through frustration to real antagonism. For the majority, it was recognised that individual LSC staff with whom the sector had formed good working relationships, were keen to help more than they were able to, as the national focus of their work changed.

Many of the smaller providers had found that concentration on supporting their users, in line with their key ethos, had made them oblivious to the need for formal structures to be put in place to achieve the necessary degree of assessment, record keeping and evidence of progression required in a more formal, governmental contracting process. Several had found it desirable to employ a “business” manager. This

appointment was sometimes in a voluntary capacity. The rigour these managers brought to organizations was generally a positive influence, although there was a fine balance here between the extent to which these people changed the relaxed, informal nature of the organisation that was focused solely on benefiting their users.

It is clear that improvements in funding arrangements or looking for more reliable, better funding or just funding to do more would help the voluntary sector both be more secure and deliver; and funding good providers to do more, these organisations having money to fund things they know help or work with disadvantaged people such as assessments, CV writing, outreach or more courses. A few providers discussed with us their desire to try to keep hold of learners for longer before they went elsewhere or just carrying on the support for example once they got into work and tracking the progress of learners during their attendance and after.

Strategic relationships, partnerships and social networks

Another major factor which contributed towards the success of some of the providers was that they secured and maintained strategic relationships with an array of partners at both local and regional and in some cases national level. Partnership is clearly a fundamental part of working with

disadvantaged people, and many providers use these partnerships in a number of different ways. Whilst this project was not an examination what makes partnerships work best, it is clear that there are certain factors which both cause them to be formed and roles that they perform. There are networks that people are involved with both locally and nationally; to help with delivery, to gain funds, to share and gain knowledge and expertise and good partnerships provide vital support and often a fresh perspective, but it is clearly important not to interfere too much. Now for VCS organisations there is clearly a lot of work on the funding side and partnerships or commitments that work in order to either help find out about funding opportunities, get funding or co-ordinate and work together on bidding. Not surprisingly, which partners are involved depends on the role or support that is needed and on the focus of the programme, if a provider works with young people then organisations would be in partnership with people such as Connexions or the local authority or schools, if it was work focused then there would often be employers involved, ex-offenders then it might be the probation service. In East Midlands it is clear that there are a variety of local partnerships operating that have varying remits. There appears to be strong learning networks in a number of counties, including the learning communities network in Lincolnshire,

the Leicester Learning Partnership and the Derbyshire Learning and Development Consortia. One reason for their strength is that funding is routed through them and their arrangements tend to be more formal. In this respect, the work done by the learning consortiums or partnerships is vital. They act, not only as a conduit for funds, but also as interpreter. “LSC speak” is translated into “voluntary sector friendly speak” – and vice versa. Generally these consortia meet regularly to discuss joint bidding of projects and arrange work together. However, the re-structuring of staff at the LSC has caused some very productive working relationships to be undone. The oft-expressed opinion of the voluntary sector is that while they are in it for the long-term, the LSC was prone to short-termism. It was clear that the piecemeal nature of the funding, the competitive bidding and the insecurity of the funding also impacted on the work of these partnerships.

Stages of progression

The following maps out a series of stages or types of support and what needs to happen to get disadvantaged people to ultimately achieve. People can progress through this, get stuck at various points, or only need certain parts of the grid below, missing out whole sections or starting at any point along the spectrum:

	Engage people	Respond to, support and/or solve serious problems that undermine involvement and progression	Change people's personal outlook/attitude	Focus on learning and personal development and working towards next steps	Re-engagement: Participate in education, training and employment
Aims and Actions	<p>Complete an initial assessment</p> <p>Build up a rapport</p> <p>Generate respect for the provider, peers and authority</p> <p>Engage with the family</p>	<p>Solving housing problems/council housing issues</p> <p>Helping people through family crisis</p> <p>Serious drugs and health problems</p> <p>Solve mental health problems and phobias</p> <p>Realise that they have an addiction problem</p>	<p>Generate empowerment, self esteem and confidence</p> <p>Create a belief in a future</p> <p>Make people realise that they have choices in life they can control</p> <p>Develop positive peers, and positive relations</p> <p>Improve attendance</p> <p>Help them achieve within learning</p>	<p>Improve image and attitude</p> <p>Take small steps first</p> <p>Learning to express oneself</p> <p>Develop an action plan</p> <p>Identifying priorities</p> <p>Increased awareness of services available, links with employers, CVs, job prep, work trials.</p> <p>Setting and meeting objectives</p>	<p>Return to education or employment</p>
Activities	Engagement activities	Support from provider or specialist support from elsewhere, counselling, health support, etc.	Non accredited learning in relaxed non threatening neighbourhood venues	Accredited learning in relaxed non threatening neighbourhood venues, along with additional support to help with next steps	Accredited learning and progression to mainstream education or work

When looked at this way, it is possible to detect a progression and sequence of activity that is needed to achieve an end outcome. This follows the following pattern: engage the person, try and solve any immediate serious problem they have (e.g. homelessness), undertake a programme of personal development (through whatever means, and this could be through learning or something else), attempt to change their outlook and eventually engage them in education or employment.

This also provides a framework for what providers need to do and how they should design their delivery so they can help move people through all these things. Depending on their current situation, it may even be possible to classify people into one of these stages and map how long it takes to move from one to the next, it may also be possible to measure the movement at each stage. At the moment we have kept stages 3 and 4 separate, but it may be possible to merge these, stages can also overlap, the aims and actions can also switch between stages.

Recommendations for transferring good practice

There is very little recognition and understanding of support provided by the LSC to VCS providers, except that provided through individual staff with whom the VCS organisation has a good relationship. Some felt that the LSC offered little, or no support. Much more

could be done here to help those who are delivering to disadvantaged people deliver:

- *Engagement funding* – There are some fundamental structural problems with LSC funding and approach that restricts the delivery and support provided to disadvantaged individuals. There are clear issues with engagement funding that need to be addressed, the withdrawal of this will no doubt impact on achievements with the disadvantaged and needs to be urgently reviewed. There are also time constraints in the length of time it takes some disadvantaged people to achieve.
- *Events and training* - Clearly this document is a key part of transferring good practice, it would be useful to have a strategy for the dissemination of this research along with perhaps an event to publicise and work on using the findings. This could also be carried through to the training of staff: LSC, VCS and others.
- *Bidding processes* – there are a lot of specific findings here about what makes a successful project or helps projects work. Including the findings in bidding, in terms of what is looked for, when working with disadvantaged individuals, would

help focus these funding streams and providers on what works.

- *Review different models of delivery* - we would recommend a proper review is done of different models of delivery (consortia, franchising, etc.) to look at outcomes and how these work. There are potentially very good things to be achieved from changes in structure and this is outside the scope of this project.
- *Information* - There is a need to get information on works to frontline and all staff working with disadvantaged people. Producing a handbook for staff would be a good first initiative e.g. to be used by local voluntary and community organisations, Jobcentre Plus and with other intermediaries such as careers advisers (IAG), social services, housing, etc. This would help generate partnership opportunities, referral and understanding.
- *The development of skills and the capacity* for VCS providers to deliver learning programmes for disadvantaged groups is key to enhancing their organisational effectiveness as partners in service delivery. Assessment and structure and review tend to be automatically rejected by some VCS organisations as being 'against their ethos', which is being learner led. However, it is

clear that this works extremely well for successful VCS organisations and does not necessarily contradict the VCS philosophy, when it is implemented in informal or particular ways by VCS providers, in effect it is implemented in a 'VCS way'. The LSC could play a role in promoting informal assessment and models and tools for how this works could be shared more widely. Commissioning VCS organisations that are successful to train staff in other organisations as to their methods and how they work would be beneficial.

- *Sharing expertise* - There is some clear and very good expertise in some of the VCS providers we talked to, in areas such as interactive; participatory/ experiential approaches, initial assessment, informal methods of setting goals and monitoring progress.

Key Success Factors Summary

There are a number of key principles that make successful programmes work and deliver. Clearly there are things that work in some situations and not others and these should be treated like a menu for people to pick and choose, rather than a checklist of things that every successful project needs to have. Some of the things outlined in the table below will work will work at certain points in and individuals development and not in others. However, there are certain things that organisations because of their ethos or because of habit,

will resist and this should be challenged as ultimately it will affect the success of programmes. It is important to remember that the disadvantaged are not a homogeneous group and what will work for some will not work for others. Some will be much further down the path towards a positive outcome than others, or can move faster towards one. For some formal target setting and accreditation will work fine, for others it will be a real deterrent.

The following table maps out what tends to work well in both overcoming issues that disadvantaged people face and achieving an end outcome:

Provider	Location and environment	Overall approach	Engagement	Learning approach	Progression and outcomes	Retention, staff and support
Positives						
Idealism, commitment to target group	Community/ local venues/ activities, convenient	Grass roots initiative from the community, beneficiary led	Multi agency referrals, working in partnership, building close links	Overcoming problems before learning can happen/ overcoming/ addressing and supporting multiple issues	Underlying structured learning so that there is an aim, to give a sense of purpose. Individual curriculum plans, learning programmes, setting targets.	Relationship building, confidence, trust, respect, commitment, empathy

Business know how professional approach, high quality standards	Non threatening, an escape/ relaxing/ calming/ familiar/warm , informal, safe	Supportive/ understanding/ empathy, listening, learning	Peer groups/ ambassadors recruit others	Tailored to individuals, one to one, personal, flexible, open access, short, realistic learning	Initial assessment	Learners become teachers, peer tutors/ volunteers/ mentors/ champions. Local.
		Informal	Pro-active outreach, building community links	Community led/inspired, consulting, learner chooses/ leads, therefore diverse range and in skill gap areas	Progression monitoring, evaluation and support whether formal or informal. Evidence of progress enables progression to be appreciated. Staff focuses on moving on.	Multi agency support, links with other community resources, partnership
			Drop in/soft engagement activities – get them “through the door”	Building confidence and self esteem	Advice and guidance	On going support and lots of it – counsellors, health workers, tutors, or just someone to talk to
			Incentives – childcare, help with transport, free courses	Low ratio staff to pupils	Celebrating success – no matter how small, or non traditional	Staff qualified; skills and experience in working with the target group. staff who have experienced the issues themselves

			Tasters	Realistic small steps, giving people time	Accreditation/ assessment, formal or informal – pathways to move from non accredited to accredited, awarding people for progression	Early intervention amongst those ‘at risk’ to help deal with problems. Needs process and close working to identify this.
				Interactive; participatory/ experiential approaches. “Learning by doing”, informal, relaxed		
Avoid Negatives						
	Institutions	Not beneficiary led	General marketing activity -leaflets, internet, events, advertising, cold calling	Not chalk and talk, not classrooms, formality, authoritarian	Formal target setting and accreditation, introduced too soon.	Low levels of extra support
			Cost	Complicated, academic		Staff which don’t understand or have experience of the target group
			Lack of links, poor partnerships	Large groups		

Learning and Skills Council
East Midlands Regional Office
17a Meridian East
Meridian Business Park
Leicester, LE19 1UU

Tel: 0845 019 4170

Fax: 0116 228 1801

<http://www.lsc.gov.uk/regions/eastmidlands>

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