

Staying Close

A pilot quasi-experimental impact
evaluation using entropy balancing
Final report

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About the Centre for Homelessness Impact

The Centre for Homelessness Impact champions the creation and use of better evidence for a world without homelessness. Our mission is to improve the lives of those experiencing homelessness by ensuring that policy, practice and funding decisions are underpinned by reliable evidence.

About Verian

Verian is an independent research, evidence, evaluation and communications agency headquartered in London. They specialise in providing data and evidence, policy development and evaluation, political and opinion advisory, behavioural insights and communications, and development practice services to help clients build a fairer society.

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In Brief

This study involved conducting a pilot evaluation of the Staying Close programme. This covered three strands of work, including a pilot impact evaluation, an Implementation and Process Evaluation (IPE), and an Economic Evaluation of the programme's costs and outcomes.

Staying Close is a programme of enhanced support for young people leaving residential care and other forms of placement and transitioning to independence. It was developed by the Department for Education. It provides care leavers with bespoke packages of practical and emotional support, which is also supported by a member of staff from their former children's home or from a care professional who they already know and trust. In particular, it aims to support care leavers' mental wellbeing, their sense of agency and their feelings of social connectedness and trust in their supportive networks.

Impact evaluation

Impact could not be reliably measured due to data limitations. The quantitative impact analysis results are therefore inconclusive. In other words, we are not able to conclude if Staying Close has led to better outcomes or not, on the basis of the quantitative impact analysis. The evaluation therefore highlights findings from the process evaluation to support future scale-up of the programme, and provides recommendations for a robust impact evaluation to accompany the national rollout of Staying Close. The impact analysis focused on two primary outcomes: wellbeing (SWEMWBs) and social connectedness (ESSI). For both measures, Staying Close was associated with a worse outcome in wave 1 of data collection, with small negative to zero outcome in wave 2. The impact across secondary and ancillary outcomes was mixed. However, given limitations, these results should be understood as having no clear evidence of either a positive or negative impact, rather than as evidence of no impact.

The evaluation faced several important limitations that mean we cannot reach strong causal conclusions. The limitations include the lack of a genuine baseline, not being able to link survey and administrative data, and barriers to identifying which respondents took part in the programme. Together, this means we're not able to rule out that unobserved differences (i.e. ones not captured in our data) between local authorities (LAs) or between young people in Staying Close areas are driving the variation in outcomes that we observed, rather than being due to the programme itself. In other words, the difference in outcomes may reflect pre-existing differences, rather than the impact of Staying Close.

Another possible explanation for the lack of measurable impact could also be that the Staying Close programme may not have been “intense” enough (i.e. not delivered at sufficient volume and/or intensity) for effects to show up in the impact analysis. The value for money (VfM) analysis indicates that some areas had underspent. This underspend is likely to be due to some LAs not providing projected costs for the whole financial year, as well as wider challenges highlighted in the IPE with securing suitable accommodation for young people, as well as recruitment of staff to deliver Staying Close. In addition, our survey results suggest some increased engagement from care leavers with LAs on certain Staying Close activities, but these differences were not substantial. A key objective of this study was to assess the feasibility of a robust, QED-based impact evaluation of Staying Close. Based on our in-depth assessment (and attempts to mitigate) the various data limitations, below we have set out key recommendations for how these limitations can (and should) be overcome to inform future impact evaluation. We strongly recommend that a robust impact evaluation, designed and implemented in line with our recommendations, should be embedded into the future scale-up plans for Staying Close. With effective planning, coordination and data sharing between DfE, CHI/Foundations, local authorities and the evaluation supplier, the insights provided by this pilot evaluation indicate that a robust QED-based impact analysis of Staying Close is feasible.

Implementation and process evaluation

The IPE investigated six case study areas that had recently begun implementing Staying Close. In these areas, qualitative interviews found that the perceived impacts of the programme on care leavers were largely positive. The programme's greatest perceived outcomes were in improving young people's wellbeing and sense of social connectedness. Interviewees told us these changes were largely driven by Staying Close Personal Advisors (PAs) holding smaller caseloads (7 maximum compared to 20+ normally). Smaller caseloads help to provide a more dedicated, individualised support, significantly strengthening the connections between PAs and young people, and enhancing their overall experience. Maintaining these smaller caseloads is essential to ensure that PAs can provide highly intensive, individualised, and flexible support - qualities that truly set Staying Close apart from business-as-usual provision. Emphasising this intensiveness is important, as it underpins the programme's ability to respond closely to each young person's unique needs and circumstances.

It is important to note that qualitative findings were drawn from six case study areas that had only recently begun implementing Staying Close, allowing for exploration of early-stage challenges and initial responses. While these insights are valuable, they do not reflect the full diversity of experiences across all programme locations, particularly those with more established implementation.

Value for money

Finally, the economic analysis focused on describing the costs of delivering Staying Close. This involved the completion of forms by 23 LAs that covered a comprehensive list of programme costs. Of the 23, eight were deemed to be of good quality; that is, gaps in their figures were minimal. On average, delivery costs were reported to be 78% of DfE grant funding, although large variation was visible, with a range of between 35% and 126%. This was probably a result of when the data was collected.

Cost data from these LAs was then used to conduct a break-even economic analysis. This assesses the level of impact that would have been needed for the benefits to equal the estimated costs. This analysis shows that it is possible, under certain scenarios, that the programme generates benefits that exceed the costs. However, the break-even threshold was only found to be realistically achievable for one of the two benefits examined (social connectedness).

Important caveats apply to these value for money findings. Given the lack of definitive impact findings from the impact evaluation, it was not possible to assess the value of the programme's benefits and conduct a full social cost benefit analysis. This does not mean the programme does not have benefits - rather, it was not possible to measure and evidence their materialisation as part of this evaluation. Additionally, the break-even analysis relies on cost estimates from LA cost forms which, even when focusing on better-quality data, contain gaps and inconsistencies. Caution should therefore be applied in drawing firm conclusions from both the cost data and the break-even analysis.

Our recommendations for programme delivery include:

- **The DfE should co-create 'best practice' guides** using insights from this report which outlines key principles, effective strategies, and core components proven to support positive outcomes for LAs to use when planning and implementing the programme. Furthermore, clearer communication about how Staying Close differs from usual practice, particularly the personalised and intensive support from Personal Advisors, will help manage expectations and highlight the programme's unique offer, all while allowing room for local adaptation.
- **LAs should prioritise early planning when delivering Staying Close.** Ensuring feasibility and clarity around accommodation availability and recruitment timelines for key personnel will help streamline implementation once funding is secured.
- **LAs should increase awareness and understanding of the Staying Close programme** and model using clear guidance co-developed with DfE for programme staff, partners, providers and young people.
- **Alongside this, promote and invest in cross-LA communities of practice to encourage ongoing collaboration and shared learning.** This could be achieved through hosting regular roundtable events and/or pairing local authorities preparing to implement Staying Close with neighbouring authorities that are further along in delivery to share lessons learned and enable tailored, real-time guidance to help foster more confident and consistent delivery across regions.

Recommendations for the future evaluation of Staying Close:

Given the limitations of the impact evaluation, and with Staying Close confirmed for national rollout, we strongly recommend that the DfE commission an evaluation to understand whether Staying Close is achieving its intended impact at scale, to identify variation in outcomes across regions, and ensure that implementation remains true to the core principles of the approach. Based on our learning from delivering this pilot impact evaluation, we recommend the following approaches to strengthen the future evaluation of Staying Close and ensure it is robust and responsive to the realities of full-scale implementation.

- **Embed QED within a wider monitoring and evaluative framework:** Combine rigorous impact evaluation with systematic monitoring using clear rubrics tied to the Theory of Change. Use matched difference-in-differences analysis with linked survey and administrative data. Collect robust baseline and longitudinal data starting before young people leave care, with evaluators following up directly. Use proxy indicators (e.g., PA caseload size) to track implementation and categorise participants by intensity and duration of Staying Close support. Prioritise sites with mature, large-scale delivery to improve impact detection.
- **Employ a fully integrated mixed-methods design:** Align qualitative and quantitative methods to enrich and contextualise findings, allowing for deeper understanding of outcomes and experiences.
- **Adopt an action learning approach:** Engage local authorities and young people collaboratively throughout evaluation design and delivery. Co-develop tools, share emerging findings, and embed learning to enhance trust, data quality, and practical relevance.
- **Focus qualitative case studies strategically:** Select sites with established or innovative Staying Close delivery. Recruit young people independently (not via LAs) to reduce bias and include underrepresented groups such as unaccompanied asylum-seeking children.
- **Strengthen value for money data collection:** The DfE should set up comprehensive LA cost data collection from the outset on an ongoing basis for the duration of the programme, rather than through a retrospective survey. The cost form should be as prescriptive as possible. In addition, the dissemination of the cost data forms closer to the end of the financial year would increase the likelihood that LAs will have data on how much they actually spent. This will reduce the need for them to rely on projected costs or to only report cost data for part of the year, thus increasing accuracy and alignment with DfE cost data.
- **Plan for a realistic timeframe:** Design evaluation over several years (at least three) with interim analyses to allow robust outcome assessment and ongoing learning.

Executive Summary

Background

There are currently over 83,500 children in England in care, based on the most recent data (DfE 2024a), with many facing significant challenges when transitioning to independent living. Care leavers often experience a "cliff-edge" in support, struggling with securing accommodation, employment, and mental wellbeing (DfE, 2023b). To address these challenges, the Department for Education (DfE) developed Staying Close, a programme providing enhanced practical and emotional support for young people leaving residential care. This includes assistance with housing, life skills, and employment, with ongoing support from a trusted care professional. The programme started in 2017 and has been extended over another two phases. This evaluation was conducted in the context of ongoing Government interest in expanding the Staying Close model nationally. Staying Close will be rolled out nationally across all LAs and legislation is underway to make it a duty for LAs to consider a care leaver's welfare and provide Staying Close where needed. Given that existing evidence is largely drawn from small-scale qualitative studies, this evaluation provides a timely and more comprehensive contribution to the evidence base, helping to inform future policy and funding decisions.

A feasibility study, funded by the UK's Evaluation Accelerator Fund in 2022-23, explored how to evaluate Staying Close effectively. Conducted by Foundations, the study recommended implementing a quasi-experimental evaluation, surveying care leavers, and assessing the programme's economic benefits. The Centre for Homelessness Impact (CHI) took over the project and Verian have led the pilot impact evaluation and implementation and process evaluation (IPE). Partnering with them is Simetrica-Jacobs, who have led the economic evaluation (value for money) component. Together, the three evaluation strands aim to provide further understanding of the programme's effectiveness and test the ability to carry out a meaningful impact evaluation.

Methods

This study provides a pilot evaluation of the Staying Close programme, covering impact, implementation, and economic assessment. Findings have been triangulated across these strands to provide further understanding of the programme's effectiveness.

The pilot impact evaluation used entropy balancing, a type of quasi-experimental design that aims to adjust for any pre-intervention differences between Staying Close and comparison individuals and areas. Survey data were collected from care leavers in 39 Staying Close local authorities and 14 matched comparison areas,

alongside administrative data on education, employment, and housing. The survey and administrative data were collected concurrently in two waves. Wave 1 was conducted from April to June 2024, and wave 2 took place from October to December 2024. The implementation and process evaluation (IPE) explored delivery processes through case studies in six local authorities, including interviews with staff and young people. The economic evaluation focused on describing the costs and presenting a break-even analysis.

Findings

Pilot impact evaluation

Impact could not be reliably measured due to data limitations. The quantitative impact analysis results are therefore inconclusive. In other words, we are not able to conclude if Staying Close has led to better outcomes or not, on the basis of the quantitative impact analysis. The pilot impact evaluation did not find robust evidence suggesting that Staying Close has led to better outcomes. However, given limitations to the impact evaluation method used, discussed below, these results should be understood as having no evidence of either a positive or negative impact, rather than as evidence of no impact. The results should be interpreted with these limitations in mind.

We measured two primary outcomes: wellbeing (SWEMWBs) and social connectedness (ESSI). For both measures, Staying Close was associated with a worse outcome in wave 1 of data collection, with small negative to zero impact in wave 2. These are summarised below.

The evaluation also quantified secondary outcomes: education, employment or training (EET) status, accommodation suitability and accommodation stability (number of accommodation moves). Our findings suggest that care leavers in Staying Close areas were more likely to be in suitable accommodation compared with care leavers in comparison areas, but this finding is sensitive to the analysis choices. Similarly, Staying Close was associated with fewer accommodation moves (small positive effect) in wave 1.

The evaluation faced important limitations which could have introduced bias to the impact estimate, and should be considered when interpreting the findings. We encountered several challenges in collecting survey data from care leavers and administration data from local authorities. These challenges include gaps and variations in the quality of data provided by local authorities, potential selection bias arising from local authorities choosing whom to invite to complete the survey, the absence of a baseline, and the lack of information to determine which respondents participated in the programme and their level of engagement.

Additionally, the evaluation methodology used cannot account for unobservable covariates, meaning there may also have been unmeasured confounding factors that influence care leavers' outcomes. Together, these factors hindered our ability to draw definitive impact evaluation conclusions.

Primary outcome	Qualitative descriptor	Effect size units	Effect size	95% confidence interval	Interpretation
Mental wellbeing (SWEMWBS) Wave 1	Small negative association	SMD	-0.22	[-0.42, -0.02]	Suggests that Staying Close was associated with lower mental wellbeing; however, this may be an artefact of unmeasured confounding. The findings are compatible with a negligible to moderate negative impact.
Mental wellbeing (SWEMWBS) Wave 2	Negligible association	SMD	-0.06	[-0.20, 0.08]	Suggests that Staying Close was associated with a near-zero difference in mental wellbeing; however, the confidence interval includes up to a small negative association and negligible positive benefit. This may be an artefact of unmeasured confounding.

Primary outcome	Qualitative descriptor	Effect size units	Effect size	95% confidence interval	Interpretation
Social connectedness (ESSI) Wave 1	Small negative association	SMD	-0.22	[-0.38, -0.07]	Suggests that Staying Close was associated with lower social connectedness. This may be an artefact of unmeasured confounding. The findings are compatible with a negligible to moderate negative impact.
Social connectedness (ESSI) Wave 2	Small negative association	SMD	-0.15	[-0.34, 0.04]	Suggests that Staying Close was associated with lower social connectedness. This may be an artefact of unmeasured confounding. The result is also compatible with a moderate negative to zero effect.

SMD = Standardised mean difference. Following CHI guidance, we interpret an effect of 0.2 as the benchmark for “small”, 0.35 for “moderate” and 0.5 for “large”.

Implementation and process evaluation

In contrast to the positive IE evidence that care leavers in Staying Close areas were more likely to be in suitable accommodation than care leavers in comparison areas, our IPE interviews with delivery stakeholders found that most LAs struggled to deliver the core accommodation offer of Staying Close and place young people in suitable accommodation. This was due to several barriers, including severe delays in building projects, problems around recruiting managers and staff for trainer flats and the general shortage of housing stock. This discrepancy between the IE and IPE findings is likely due to differences in the survey and IPE sample frames. The survey captured responses from young people across all Staying Close areas and phases of implementation (1-3), whilst the IPE interviews focused exclusively on six phase 3 LAs, which had only recently begun implementing Staying Close. The sampling difference suggests that LAs involved in earlier phases of delivery had more time to address initial accommodation challenges. A key lesson for local authorities preparing to implement Staying Close will be to ensure early, detailed accommodation planning that reflects local housing constraints. This includes stock shortages, capital project timelines, and refurbishment needs, while also developing contingency arrangements, like interim agreements with local housing providers, to reduce reliance on out-of-area placements.

Furthermore, despite challenges faced in delivering the core offer, most Staying Close PAs successfully delivered wrap-around support to young people, taking a proactive role in providing wellbeing support, enhancing social connectedness, building independent living skills, and offering EET support. According to young people, the programme's greatest perceived outcomes were in improving their sense of wellbeing and social connectedness.

A trusting relationship with their Staying Close Personal Advisor is the key mechanism of change at the heart of the programme, with progress in other support areas stemming from this strong bond. The individualised nature of the support, which was designed to be flexible and responsive, is frequently highlighted as one of the programme's key strengths by programme staff and beneficiaries. In contrast to the wider national context, where Personal Advisors often manage high caseloads (20+), Staying Close prioritises building strong, personalised relationships by keeping PA caseloads smaller (6-7 maximum). This approach allows for more dedicated, individualised support, significantly strengthening the connections between PAs and young people, and enhancing their overall experience.

The findings from the impact evaluation do not align with those of the process evaluation, which draws on interviews with young people, local authorities, and delivery partners. This difference may be due to several factors, including the aforementioned IPE case study selection criteria (which focused exclusively on LAs that had only recently begun implementing Staying Close), as well as limitations in the quality and completeness of data used in the impact analysis, which restrict its ability to draw firm

conclusions about the impacts of the Staying Close programme. Another possible explanation for the contrast between quantitative and qualitative findings is that the Staying Close programme may not have been intense enough for effects to show up in the impact evaluation. Our survey results suggest some increased engagement from care leavers with LAs on certain Staying Close activities, but these differences were not substantial (as local authorities in comparison areas still provide similar activities that fall under the scope of Staying Close). As a result, findings from the IPE case studies do capture genuine stories of perceived successes, but these may not be widespread enough to produce positive average effects in the IE.

Economic evaluation

Given the lack of definitive impact findings from the impact evaluation, it is not possible to assess the value of the programme's benefits and hence conduct a full social cost benefit analysis, as would usually be the case when undertaking a value for money assessment. This does not mean that the programme does not have benefits. Rather, it was not possible to measure and evidence their materialisation as part of this evaluation. Given this constraint, a break-even analysis was used to assess what level of impact would have been needed for the benefits to outweigh the estimated costs.

Overall, data for the break-even analysis relied on the completion of cost forms by the LAs that were a part of the Staying Close, completed by 23 LAs. All except two LAs reported total delivery costs which were below the available DfE grant funding. On average, the annual Staying Close delivery costs reported by the LAs were 63% of the DfE grant funding (this increases to 78% when focusing only on the eight LA cost forms deemed of good data quality). Overall, large variation was visible in the data, with LAs reporting total delivery costs from 2% to 126% of the DfE grant funding.¹ Only eight LAs reported having spent 85% or more of the DfE grant.

With respect to the eight good-quality data forms, on average around 50% is reported to be spent on covering LA staff time in the delivery of Staying Close. On average, less than 10% is spent on accommodation costs and around 17% on additional expenditures.

Given that the cost data reported by the LAs is based on cost forms returned between November 2024 and February 2025, it is likely that it reflects both partial implementation (underspends e.g., as a result of recruitment challenges) as well as incomplete cost data (e.g., due to the need for forecasting). With respect to the underspends, at the time of reporting, a few LAs acknowledged experiencing challenges in recruiting the right staff, leaving vacancies which would have been funded by the DfE grant, and therefore not spending the allocated salary budget. Not all LAs were comfortable forecasting for the remaining period (of the eight good-quality LA cost forms, only three provide costs that were clearly labelled as being projected). Were cost data available up until the end of the financial year, the reported underspend would likely not be seen or be seen to a much lower extent.

The break-even analysis was based on the cost estimates provided by DfE and the LAs. For illustrative purposes, the break-even analysis focused on two outcomes for which there was positive evidence from the IPE – improved social connectedness and participants being more likely to have suitable accommodation. Sensitivity analysis was undertaken to explore how the break-even analysis threshold varied as the cost estimate increases, the time period varies and the impact when a combination of outcomes is achieved. Overall, the average cost per LA for implementing Staying Close was estimated to be around £356,800, including around £353,800 of costs at LA level (such as accommodation costs and services costs) and around £3,000 reflecting the apportioned DfE costs to each LA.

Overall, the break-even analysis shows it was possible, under certain scenarios, for the generated benefits from the programme to at least meet the costs. That is, the level of impact required for social connectedness outcome (17 young people) is technically feasible for the programme, albeit at the top-end, but may be unrealistic in reality. A more likely scenario is that more than one outcome will be achieved by the programme. Under this scenario there are different combinations where the programme will break even, such as if the programme were to reduce the loneliness of 14 young people and provide suitable accommodation for 22, not necessarily the same individuals. While technically feasible, such a level of impact remains high given the number of individuals in the cohort (on average each LA supports 27 young people per LA) and the relative weakness of impact findings within the wider evaluation.

When modelling the benefits as lasting over a multi-year period, the threshold number of young people required to achieve the outcome by LA is significantly more feasible. However, strong evidence of the impact being sustained over a longer period (5 or 10 years) would be needed to be confident that the benefits exceeded the costs on this basis.

Given the limitations in both cost data quality and impact evidence, caution should be applied in drawing firm conclusions from this value for money analysis.

Recommendations

Recommendations for programme delivery

- **DfE should co-create 'best practice' guides** (using insights from this report) that outlines key principles, effective strategies, and core components proven to support positive outcomes. Furthermore, clearer communication about how Staying Close differs from business as usual, particularly the personalised and intensive support from Personal Advisors, will help manage expectations and highlight the programme's unique value, all while allowing room for local adaptation. Key learnings should include:
 - **Keeping Staying Close PA caseloads at a manageable level** (no more than 6-7 young people each) to ensure that PAs can provide intensive, individualised, and flexible support- qualities that truly set Staying Close apart from business-as-usual provision.
 - **Prioritising the use of accessible, practical life skills materials** presented in manageable, easy-to-understand formats- such as bite-size guides, visual tools, or translated resources- rather than large, text-heavy folders.
 - **Tailoring support:** EET and life skills support must be tailored to individual needs and circumstances. Wherever possible, prioritise personalised delivery through Personal Advisors, who can build trusted relationships and adapt content accordingly. In contrast, avoid small group activities where language barriers or cultural differences might lead to discomfort, disengagement, or exclusion.
 - **Improving the matching process for shared accommodation** by developing a more structured and proactive approach to housing planning, by gathering and using information on young people's backgrounds, personality types, and histories to inform placement decisions. Introducing compatibility assessments or consultation sessions before placing young people in shared accommodation could further support this process.
 - **Offering incentives to encourage engagement from young people-** particularly those who may be more socially isolated- such as a free coffee or meal, or enjoyable group activities like go-karting or laser tag.
 - **Amplifying the voices of young people** by engaging with them on a regular basis (gathering their feedback on needs, challenges, and service effectiveness to continuously refine the offer) and involving them in recruitment panels, marketing materials (posters, videos), and reward their participation.

- **LAs should prioritise early planning** when a local authority embarks on delivering Staying Close. Ensuring feasibility and clarity around accommodation availability and recruitment timelines for key personnel is essential and will help streamline implementation once funding is secured.
- **LAs should increase awareness and understanding of the Staying Close programme** and model using clear guidance and resources co-developed with DfE for programme staff, partners, providers and young people. Alongside this, promote and invest in cross-LA communities of practice to encourage ongoing collaboration and shared learning. This could be achieved through hosting regular roundtable events or pairing local authorities preparing to implement Staying Close with neighbouring authorities that are further along in delivery to share lessons learned and enable tailored, real-time guidance to help foster more confident and consistent delivery across regions.

Recommendations for the future evaluation of Staying Close

With Staying Close confirmed for national rollout, continuing to evaluate the programme has become more important than ever. An impact evaluation will be essential to understanding whether Staying Close is achieving its intended impact at scale, identifying variation in outcomes across LAs, and ensuring that implementation remains true to the core principles of the approach.

Evaluation at this stage is also critical for building a strong national evidence base, supporting accountability, and informing future decisions about resource allocation, policy development, and ongoing improvements to the programme. Without it, there is a risk that valuable learning from local innovation could be lost or that challenges go unaddressed as the model is scaled.

Based on our learning from delivering this pilot impact evaluation, we recommend the following approaches to strengthen the future evaluation of Staying Close and ensure it is robust and responsive to the realities of full-scale implementation.

1. Embed a Quasi-Experimental evaluation design (QED) within a larger monitoring and evaluative framework

A rigorous impact evaluation is essential but should be situated within a wider framework that also includes systematic monitoring against clear standards and criteria. We recommend using a rubrics approach with clear, criteria-based measures tied directly to the ToC (e.g., wellbeing outcomes, accommodation stability, EET outcomes, and young people's perceptions of support received). This approach involves co-developing detailed scoring guides that define specific performance levels, such as 'beginning,' 'developing,' and 'advanced', for each outcome area, providing consistent and transparent benchmarks to assess progress objectively. These rubrics

provide consistent, transparent benchmarks that help evaluators assess progress objectively, identify strengths and areas for improvement, and track changes over time, including through regular administrative monitoring data. By clarifying what success looks like at each stage, rubrics support more meaningful analysis and facilitate communication of findings to stakeholders. Co-creating these criteria and targets with LAs and young people early in the evaluation process will help ensure buy-in and maintain focus on meaningful outcomes. Overall, this approach helps to monitor changes to the programme during national rollout, where there isn't an opportunity to compare with counterfactual areas.

The QED component could use a matched difference-in-differences approach, combining survey data with linked administrative records. To achieve this:

- **Matched or balanced difference-in-differences approach:** Even with a national rollout, it's likely that not all care leavers will engage in Staying Close support and activities, or will engage to different levels. This offers an opportunity to compare young people within LAs, matching on a range of individual-level and local-level characteristics. This helps account for differences between local contexts, while adjusting for any reasons why young people will engage or disengage from the Staying Close programme. Relevant factors could include length of time in and stability within care, mental health, previous safeguarding risks, and other social-demographic characteristics (e.g. gender, ethnicity).
- **Robust baseline data collection:** Including admin data, would initially be coordinated via LAs, who would invite eligible young people to participate. Subsequently, evaluators should be empowered to follow up directly with respondents, reducing LA burden and improving response management.
- **Longitudinal survey design:** We recommend a longitudinal survey starting before young people leave care, with annual follow-ups to track changes over time. This allows for clearer tracking of pre-intervention status and outcomes, especially when compared to wider data at baseline.
- **Use of proxy indicators:** Where programme fidelity is difficult to measure directly, administrative indicators such as PA caseload size can act as proxies. For instance, smaller caseloads of 6-7 typically associated with Staying Close, can help distinguish implementation sites.

- **Tracking intensity and duration:** It is important to capture how long young people have been receiving intervention activities. Future data collection should categorise participants based on key indicators such as the number of months engaged and access to core elements of the Staying Close offer (e.g. accommodation, EET, wellbeing support). Without this, it will be difficult to assess whether stronger impacts are associated with longer or more sustained engagement. This information can be captured through a combination of programme monitoring data and periodic updates from local authorities and PAs, ideally using a simple standardised form that can be updated quarterly.
- **Site selection:** Prioritise local authorities where Staying Close is more mature, or has been implemented at greater scale. This would improve the likelihood of detecting measurable impacts and ensure the evaluation captures more stable delivery models.

2. Employ a fully integrated mixed-methods design

Future evaluations should adopt a more coordinated mixed-methods approach, where qualitative data collection is used to interpret, enrich, and contextualise quantitative findings rather than being conducted separately. This integrated design involves aligning and planning qualitative and quantitative components throughout the evaluation, enabling systematic comparison and synthesis of data for a more comprehensive understanding of outcomes. A more integrated design would capture a broader range of experiences, improve understanding of unexpected patterns or outliers, such as from the regular monitoring data, and strengthen conclusions about young people's experiences and outcomes.

3. Adopt an 'action learning' model to enhance engagement

The success of the evaluation depends on strong engagement and sustained participation from local authorities and young people, the ultimate beneficiaries of Staying Close. Applying an 'action learning' model, built on principles of collaboration, co-production, mutual benefit, and shared learning, can help embed evaluation as a supportive process rather than a top-down assessment. By involving LAs and young people early and consistently, and valuing their insights, this 'bottom-up' approach can enhance trust, improve data quality, and ensure findings are both contextually grounded and practically useful. This could be achieved by recruiting LAs and young people to form a 'learning taskforce' and involving them in all stages of the evaluation design and delivery. For example, co-developing research tools such as surveys and topic guides, iteratively sharing emerging findings, and collaboratively testing and refining learning as it develops.

4. Focus qualitative case study selection strategically

To generate deeper insights into effective practice, qualitative case studies should prioritise LAs where Staying Close is well-established, delivered at scale, or has successfully overcome implementation barriers, particularly regarding the 'core' accommodation offer. This focus will enhance understanding of what contributes to successful outcomes and sustained delivery.

In addition, evaluators should recruit young people independently rather than relying on LA nominations, to reduce the risk of positive selection bias and ensure a more balanced representation of experiences. This could be done by asking respondents from the survey if they are willing to opt in to further research, using this as a mechanism to recruit young people for qualitative case studies. Evaluators should additionally seek to include unaccompanied asylum-seeking children (UASC), particularly given that language barriers and specific support needs were highlighted in this round of research.

5. Strengthen value for money data collection

The DfE should set up comprehensive LA cost data collection from the outset on an ongoing basis for the duration of the programme, rather than through a retrospective survey. The cost form should be as prescriptive as possible.

In addition, it is important to be mindful of when the cost forms are disseminated to LAs. This would ideally be at the end of the financial year to increase the likelihood that LAs have actual cost figures to report and are not reliant on projections. This will likely reduce the large variation in underspend figures seen in this pilot study and will ensure consistency with the data received from DfE.

6. Adopt a realistic overall timeframe

Given the complexities involved, the evaluation should be planned over several years, at least three, to allow robust assessment of outcomes. Interim analyses at key points can provide early insights and support ongoing learning and programme improvement.

Introduction

Background

In March 2024, there were over 83,500 looked after children in England (DfE, 2024a). This includes children placed in accommodation for longer than 24 hours and those subject to a care order or placement order. Residential care consists of housing placements where looked after children can receive regular support from trained social care professionals and live in secure units, children's and foster homes or other semi-independent living accommodation. There are various reasons why a child might enter care in England, with the most common reasons being due to abuse or neglect, family dysfunction (where parenting capacity is chronically inadequate) or due to a family being in temporary crisis or absent (ONS, 2022). Residential care is intended to provide these children with safe and structured living environments, provide opportunities to help them individually grow and develop, and help to provide access to wellbeing and trauma-related support where required.

However, when leaving residential care, many care leavers experience a 'cliff-edge' when they move towards more independent living. They report not feeling equipped to deal with the challenges of living independently and that they do not have the strong support networks required to help in this transition (Department for Education, 2023b). Many also face a severe risk of homelessness as securing suitable accommodation is challenging for them. They face a greater risk of unemployment as labour market and educational outcomes are also poorer among care leavers, on average, than their peers (Department for Education, 2021). Furthermore, they face these issues on top of the increased prevalence of mental wellbeing challenges many of these young people are already living with (such as anxiety, traumatic stress and depression) (Alderson et al, 2019).

While these challenges are well documented, there remains a notable gap in the evidence around effective support for care leavers, particularly in supported accommodation settings where young people can practise the skills needed for independent living. A recent scoping review by Whitley-Gronborg et al. (2025) found limited research in this area, highlighting the need for robust evaluation to inform future provision. Some relevant international evaluations offer early insights- for example, the YVLifeSet programme in Tennessee, which used an individualised case management approach alongside life skills training, financial assistance, and counselling (Courtney et al., 2019). Although findings were encouraging, the evaluation stressed the need for further programme refinement and continued research. These insights point to the importance of evidence-informed, tailored interventions that address the complex and intersecting needs of care-experienced young people as they move towards adulthood.

Rationale

Developed by the Department for Education, Staying Close is a programme of enhanced support for young people leaving residential care and other forms of placement and transitioning to independence. It provides care leavers with bespoke packages of practical and emotional support, which is also supported by a member of staff from their former children's home or from a care professional who they already know and trust. This can include, for example, additional support securing suitable next step accommodation, support to help young people develop their confidence and independent living skills, and support into education and employment. In particular, it aims to support care leavers' mental wellbeing, their sense of agency and their feelings of social connectedness and trust in their supportive networks (Department for Education, 2023b; Foundations, 2023).

Various evaluations now exist of the Staying Close programme in individual or small clusters of local authorities (LAs), mostly qualitative in nature and based on very small sample sizes. This includes evaluations of Staying Close in Portsmouth (Neagu and Dixon, 2020b), Ealing and Hounslow (Heyes et al, 2020), Bristol City (Allen et al, 2020), North East Lincolnshire (O'Leary et al, 2020), Cambridgeshire, Peterborough and Norfolk (Dixon, Creswell and Ward, 2020), Suffolk (Mitchell-Smith et al, 2020), Hampshire (Neagu and Dixon, 2020a), North Tyneside (Szifris et al, 2020). This literature of the earlier Staying Close highlights generally positive findings, that the programme seemed to help young people start, improve and keep relationships, find safe housing and get into education, jobs and training. This also builds on a broader literature on extended care programmes. For example, a review by Chavulak and Mendes (2022) indicates extended care programmes are related with positive housing outcomes. However, direct robust quantitative evidence of the impacts of Staying Close on care leavers' outcomes remains limited and the absence of a comparison group in many of the available evaluations means it is difficult to confidently attribute changes in outcomes to Staying Close (Foundations, 2023).

In 2022-23, Foundations, then What Works Centre for Children's Social Care, conducted a feasibility study to further understand the Staying Close programme, its theory of change, and how it can be robustly evaluated. This was funded by the Evaluation Accelerator Fund managed by the UK Government's Evaluation Task Force. The study made a series of recommendations for the future pilot of an evaluation of Staying Close and its outcomes. It recommended piloting a counterfactual-based quasi-experimental evaluation design, testing a survey to collect outcome data from care leavers and developing an economic evaluation that monetises the social benefits of the programme's outcomes where possible (Foundations, 2023). The Centre for Homelessness Impact (CHI) took charge of the management of this project and, with the support of its partner evaluators Verian and Simetrica-Jacobs, has piloted approaches to collect data and evaluate the impacts of the Staying Close programme on care leavers' outcomes. This evaluation was also funded by the Evaluation Accelerator Fund.

Intervention

Intervention description

Staying Close has been implemented in three stages between 2017 and 2023:

- **Phase 1:** From 2017/2018 – first Staying Close roll-out in 8 pilot councils and 3 charities. These started implementing from September 2017 onwards.
- **Phase 2:** From August 2022 – 15 additional councils received funding for Staying Close and took part in the feasibility study from Aug 2022 to July 2023. Councils started implementing from late 2022/Jan 2023.
- **Phase 3:** From May 2023 – 27 additional councils were selected and started implementing by October 2023.

In 2023-24, the Staying Close programme was therefore being implemented in 54 local authorities (including by three charities, some working across several council areas) across England.

The work of Staying Close can be seen in three dimensions, with specific methods of support arranged by, or through, the programme varying and tailored across local authorities (see Table 1).

Table 1. Staying Close dimensions and methods of support

Dimension	Type of support	Examples of method of support
Core offer	Somewhere to live and a trusted person to offer ongoing support	<ul style="list-style-type: none"> • Access to pods as a transition to a permanent home; • Access to private rental market; Commissioned independent accommodation; • Access to social housing; • Commissioned supported accommodation; • Arranged shared house/bed-sits.

Dimension	Type of support	Examples of method of support
Wrap-around support	Access to clinical services, life skills training, professional support, support into education and training	<ul style="list-style-type: none"> • Commissioned time from clinical psychologist; • Access to therapists providing support for staff and young people; • Access to clinician-led therapeutic hub/team; • Access to music/art therapy; Access to personalised support provided by keyworker, based on the strengths, needs and interests of the young person; • Access to dedicated Life Skills workers providing personalised support; access to life Skills programme; • Intensive 1-1 support in a training flat; Supported work placements or 'pre-apprenticeships'; Provided help to find work placements; Practical support to maintain work placements (e.g. transport, clothing/uniform, etc.); • Access to an education specialist who helps with college applications, CVs, etc.; • Support for voluntary or unpaid work to learn 'how to work'.
Foundational culture and practice	Encourage 'positive risk management', trauma-informed support, a strength-based approach, individualised support and co-production	<ul style="list-style-type: none"> • Young people given space to make mistakes while receiving support from their keyworker, if needed; • Use of trauma-informed practice to raise awareness among staff about the impact of trauma and to avoid re-traumatisation; • Support to identify personal, community and social networks, as well as identifying individual skills and interests; • Tailored support for individual need and progress; • Use of co-production to aid developing independence, decision making and feeling in control.

Interventions planned across LAs

According to our bid review exercise, local authorities proposed a range of activities within five key thematic area:

Core offer:

- **Accommodation:** Authorities proposed developing a variety of accommodation options for young people, including trainer flats to support smoother transitions to independence. Bid plans also included tailored tenancy support and strategic collaboration with housing providers to maintain proximity to previous placements and ensure continuity of care relationships.

Wrap-around support:

- **Wellbeing:** To enhance wellbeing support, many local authorities focused on embedding psychologists and multidisciplinary teams within accommodation settings and investing in internal workforce training to embed trauma-informed and psychologically informed care.
- **Independent living skills:** To build young people's readiness for independent living, authorities proposed structured life skills programmes delivered by specialist staff. These offers were to be further enhanced through digital tools, including online tutorials and multi-agency live chat support, embedded within familiar environments to promote consistent and accessible learning.
- **Education, Employment and Training (EET):** To address barriers to EET for young people, local authorities planned to partner with education providers and employers to create bespoke learning opportunities. These included accredited courses, taster work experiences, and practical skills development in areas such as ICT, coding, and creative industries.

Foundational culture and practice:

- **Social connectedness:** To strengthen social connectedness, local authorities focused on enabling access to welcoming, drop-in hub spaces; commissioning the Lifelong Links programme to help young people reconnect with family members; and providing outreach support. A relationship-based approach to strengthening social connectedness was central in bid plans, with trusted staff offering consistent support throughout each young person's transition.

When receiving ongoing contact and support from a trusted person through the Staying Close programme, for some young people this will be someone on the staff in their children's home for some young people.

Before Staying Close, in the pilots and in many other places around the country not yet making a Staying Close offer, staff from children’s homes continue to support young people informally and without remuneration or protection. Building on this, Staying Close recognises these important relationships and provides formal support to help and enable these supporting relationships through young people’s transitions to more independent living.

The Staying Close model differs from non-Staying Close offers in the following ways:

1. **Relational continuity** – Young people continue to receive support from adults they already know and trust, which fosters consistency and emotional security.
2. **Physical proximity** – Accommodation is supposed to be located close to the young person’s former children’s home or to familiar staff, maintaining important local connections.
3. **Intensive, emotionally attuned support** – The support provided goes beyond statutory requirements, offering a more holistic and emotionally responsive approach to meet individual needs. This is realised via working with Personal Advisors (PAs) with smaller caseloads (typically no more than 6-7 young people), enabling a more personalised and hands-on approach.

TIDieR framework

The template for intervention description and replication (TIDieR) framework is a checklist designed to improve the completeness and replicability of intervention reporting in evaluations.

Table 2. TIDieR summary framework

Category	Examples of method of support
Name:	Staying Close Programme
Why:	Upon leaving residential care, many care leavers report experiencing a ‘cliff-edge’ when they move towards more independent tenancy. They report not feeling equipped to deal with the challenges of living independently and that they do not have the strong support networks they require to help them with this transition (Department for Education, 2023b).

Category	Examples of method of support
What:	<p>Extended support service provision, mostly from local authorities, including:</p> <ul style="list-style-type: none"> • Core offer: Somewhere to live and a trusted person to offer ongoing support. • Wrap-around support: Access to clinical services, life skills training, professional support, support into education and training. • Foundational culture and practice: To encourage 'positive risk management', trauma-informed support, a strength-based approach, individualised support and co-production.
Who provided:	<p>Each Staying Close offer is established and delivered by local authorities and private providers within local authorities to meet the needs of care leavers. Staff will have relevant experience of working with young people in care and care leavers. Much engagement with care leavers was with their personal assistants.</p>
How:	<p>The focus of work will be on personalised support for each care leaver. This is likely mostly to be delivered in person, although contact by telephone, SMS text message or other digital means is also likely.</p> <p>It is likely that keyworkers will work in co-ordination with other specialist professionals working within the model (such as EET workers) and be able to connect young people with other relevant services available through the LA's local offer for care leavers.</p>
Where:	<p>Staying Close is provided in 54 local authorities across England.</p>
When and how much:	<p>Given the flexibility in delivering Staying Close, local authorities can offer help at various points in a care leaver's journey and on an ongoing basis.</p> <p>The intensity of the programme will vary according to the needs of care leavers. It is anticipated that this can be as much as weekly meetings with a keyworker, although this is likely to vary and change according to the presented needs of young people. Staying Close is not mandatory, so not all care leavers are expected to take up the offer.</p>
Tailoring:	<p>There are no formal intervention rules or a manual, so local authorities have a lot of freedom to tailor their Staying Close offer to the needs of young people. There is therefore tailoring between local authorities and within each one.</p>

All six IPE case study LAs aimed to deliver the full model across its three dimensions: (1) a core offer of accommodation and trusted relationships, (2) enhanced wraparound support, and (3) a psychologically and trauma-informed approach (see bid reviews in appendix B).

However, the Staying Close programme is intentionally “non-manualised” and designed to be flexible, enabling local authorities to tailor their delivery in response to the specific needs and circumstances of care-experienced young people in their area. These variations have implications for the evaluation, particularly in terms of assessing the programme’s fidelity - understanding what was delivered in comparison to the ‘ideal’ intervention model, as there is no ideal/prescribed model. As such, it presents challenges for drawing robust conclusions especially from statistical comparisons, given that what is being measured does not represent a uniform intervention across all areas.

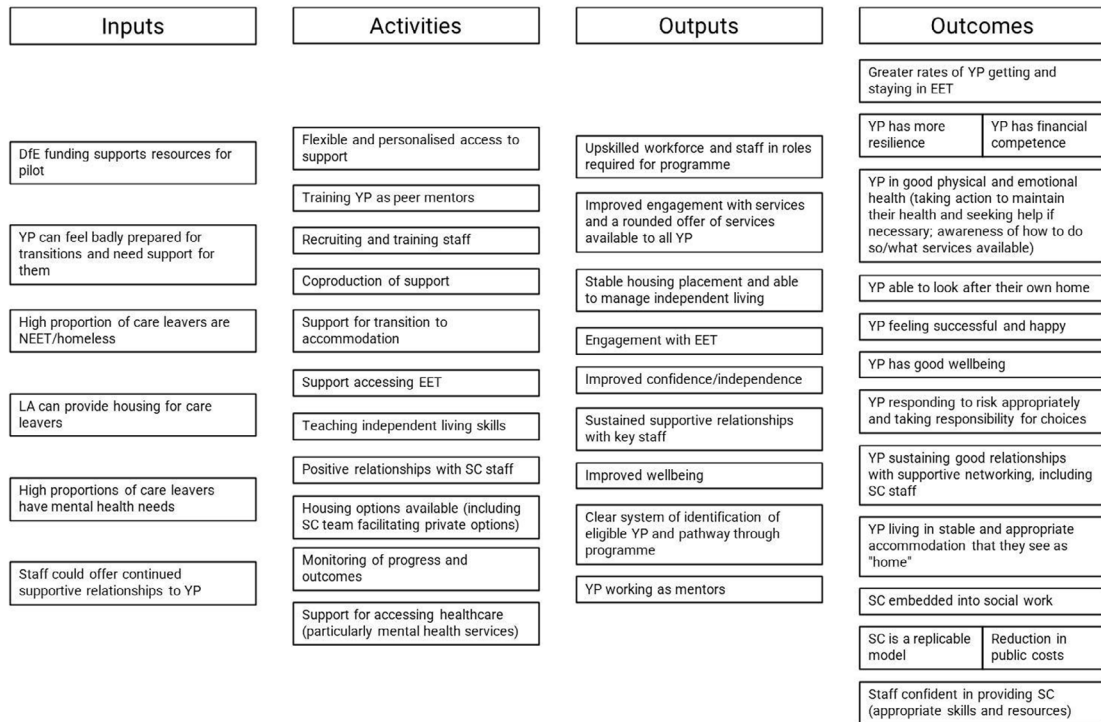
Theory of change

The feasibility study for the Staying Close evaluation developed a Theory of Change (ToC) in collaboration with DfE (Foundations, 2023). This included a review of evaluations of Staying Close pilot sites (phase 1) and the existing literature on support for care leavers as they transition to adulthood; a review of local authority applications for programme funding from the 15 local authorities that the programme was rolled out to in 2022 (phase 2); and interviews with staff. This identified important and expected outcomes for Staying Close as:

- An increase in the ability to maintain a tenancy in a suitable home
- An increase in the ability to live independently
- An increase in participation in education, employment and training (EET)
- A reduction in involvement in the criminal justice system (as perpetrators)
- An increase in the ability to form and draw on supportive relationships
- An increase in the ability to appropriately care for one’s own wellbeing.

The feasibility study also showed the theory of change visually (Figure 1).

Figure 1. Foundations (2023)
Visual representation of Staying Close's Theory of Change



The ToC was integrated into the design of our research tools. For example, as part of the process evaluation, we ensured that topic guides probed on whether the range of intervention activities outlined in the ToC were implemented. We also tested the outcome assumptions with both local authority delivery staff and young people.

Through this, we identified that several LAs faced challenges in delivering key programme activities, such as recruiting the necessary staff to deliver Staying Close, providing young people with suitable housing options, and support for accessing mental health care (please see IPE section for more details), which in turn disrupted the expected programme logic – resulting in some outputs and outcomes not being fully realised (see Table 3).

Table 3. Delivery gaps and their potential impact on output and outcome realisation

Activities that most LAs struggled to deliver	Outputs that may not have been weakened or missed	Outcomes potentially less attributable to Staying Close
<p>Recruiting staff – recruiting staff to deliver Staying Close took longer than expected (particularly specialist staff required to deliver wrap-around support) which significantly delayed the progress of implementation</p>	<p>Improved engagement with services and a rounded offer of services available to all YP</p>	<p>Staff confident in providing SC (appropriate skills and resources)</p>
<p>Housing options available – most LAs struggled to place young people in suitable housing due to building delays/lack of local accommodation stock</p>	<p>Stable housing placement and able to manage independent living</p>	<p>Young people (YP) living in stable and appropriate accommodation that they see as “home” YP able to look after their own home</p>
<p>Support for accessing healthcare – due to severe delays in recruitment of specialist staff, young people did not always receive timely mental health support from mental health professionals. This gap was plugged by their PAs</p>	<p>Improved engagement with services and a rounded offer of services available to all YP Clear system of identification of eligible YP and pathway through the programme</p>	<p>YP in good emotional health (taking action to maintain their health and seeking help if necessary: awareness of how to do so/ what services available)</p>

Evaluation aims, objectives and hypotheses

Summary of evaluation objectives

In this study, we conducted a pilot evaluation of the Staying Close programme. This covered several strands, including developing a pilot impact evaluation, conducting an implementation and process evaluation (IPE), and providing an economic evaluation of the programme's costs and outcomes. The evidence has been triangulated across the different strands.

Pilot impact evaluation

The pilot impact evaluation consists of a quasi-experimental design using entropy balancing. As a pilot evaluation, it provides preliminary evidence of outcomes, tests approaches for collecting data, and provides learning for future fully-powered impact evaluation. Data on care leavers' mental wellbeing and social connectedness was gathered using online surveys conducted in 53 participating local authorities; 39 of which were implementing Staying Close by March 2024 and 14 comparison areas that were not. The data includes local authorities from all three waves of the Staying Close roll-out, aiming at broadening the range of available data. The evaluation also collated and evaluated administrative data from the same local authorities on care leavers' EET status and accommodation outcomes.

Outcomes were collected for the cohort of eligible care leavers aged 16–25 at two time periods: Wave 1- (i) April to June 2024; and (ii) Wave 2- October to November 2024. Eligible care leavers are those who fall within the criteria outlined in Section 2. Both rounds of data collection included an online survey and administrative data collected from local authorities.

Our original design proposed piloting a difference-in-differences approach, with entropy balancing used to statistically adjust for pre-existing differences between Staying Close and Comparison areas. After reviewing the available data, we revised this approach in consultation with CHI. The new approach deviates from the protocol. The main consideration in this redesign was that Wave 1 data were collected for a wider group of care leavers than originally envisaged, including young people who had been supported by Staying Close in years prior to the evaluation, so Wave 1 could not be considered a baseline. The new approach still uses entropy balancing as originally intended, except with no baseline measure of each outcome. Instead of difference-in-differences, a “doubly-robust” approach was used that combines the entropy balancing with a regression adjustment. This was considered to be the most appropriate approach given data limitations; however, it reduces the robustness of causal inference. Both waves of data were treated as outcome data, because both waves were collected post-

intervention in all areas. We would expect to see different scales of impact depending on when Staying Close was rolled out in an area, how this interacts with the wave of data collection, and how long ago young people left care (as approximated by their age)

In addition to the main impact estimates, we report on the data collection process, summarising any necessary changes to the planned data collection strategy and reflecting on things that worked well and the key challenges. Where possible, we outline views from local authorities participating in the study (who were instrumental to the distribution of the online survey and provision of administrative data), collected as part of the IPE interviews, and provides data that can help to improve the accuracy and organisation of future planned data collection activities. This includes, for example, reporting parameters and statistics that can inform power calculations in future quantitative studies.

Aims

This work provided a pilot impact evaluation of the Staying Close programme. While pilot evaluations aim to give indicative evidence of a programme's outcomes, they are equally valuable for exploring how to practically implement a robust impact evaluation in the future.

Objectives

The objectives of this pilot impact evaluation were to:

- Examine whether the Staying Close programme has a positive impact on care leavers' outcomes.
- Practically test a data collection strategy to obtain information and outcome data on care leavers' wellbeing and social connectedness, as well as their EET and accommodation outcomes.

Research questions

The broader research questions this pilot impact evaluation aimed to help inform included:

1. What are the effects of the Staying Close programme on care leavers outcomes related to wellbeing, social connectedness, EET and accommodation?
2. How might we viably and effectively collect data on care leavers' outcomes in England?
3. Can we improve planned data collection strategies for impact evaluations on care leavers' outcomes in England to inform future power calculations?

Implementation and process evaluation

The IPE aimed to deliver a deeper view of the programme delivery approach and the processes involved in this. To do this, we mapped out programme plans for the third phase of Staying Close authorities, to capture the intervention's planned processes, delivery team structures and relevant contextual factors shaping implementation. In addition, four interviews were conducted with central government stakeholders who have an overarching view of the programme ambitions and policy context.

The IPE then involved an in-depth exploration of delivery processes and experience through a case study approach. Six local authorities were selected as case studies: City of Wolverhampton Council, St Helens, Devon, Nottinghamshire County Council, Darlington Borough Council and London Borough of Enfield. We conducted two rounds of interviews with both strategic and operational delivery team members, engaging a total of 41 stakeholders. Additionally, interviews were held with 15 young people across our 6 case study areas to gain insights into their experiences of the programme delivery and any emerging outcomes.

Aims

The IPE aimed to support the impact evaluation by providing a clear picture of how the programme was delivered and how it was received by both staff and participants. It also explored how the programme's activities connected to its intended outcomes

Objectives

Shaped by the above aims, the objectives of the IPE were to:

- Explore in-depth programme set-up and delivery, with a view to understanding unity or variation in the intervention and establishing the barriers and facilitators to delivery.
- Understand programme perceptions and experience across delivery teams and recipients, with a view to understanding any emerging effects and unintended consequences.

Research questions

The research questions that shaped the IPE were:

1. What interventions are planned across funded local areas?
2. What processes were followed in the set-up and programme delivery phases?
3. What was delivered? And what, if any, adaptations were made and why?
4. What were the barriers and enablers in each phase?
5. What learnings have been gathered in each phase?
6. How does the programme meet the needs of the stakeholders (delivery teams and programme recipients)?
7. What are the enablers and barriers to engagement for young people?
8. What effects did the programme have on young people, including housing outcomes?
9. What, if any, are the unintended consequences of the programme?
10. How does Staying Close compare to previous support to care leavers?

Economic evaluation

The economic evaluation sought to provide an assessment of the value for money (VfM) of the Staying Close programme from a societal perspective, with a specific focus on the value of the wellbeing impact on the young people affected. The VfM approach was guided by principles of welfare economics, considering both the social benefits and the costs of the programme collated directly from participating local authorities and DfE.

Aims

The VfM assessment looked to capture both the direct impacts on the wellbeing of individuals affected as well as secondary/indirect benefits of outcomes. These included impacts on government finances through the avoidance of government costs or on businesses through increased productivity. The assessment also looked to collate cost data directly from participating local authorities and DfE through a cost data submission tool.

Objectives

The objectives of the economic evaluation were to:

- Identify the social benefits of the Staying Close programme which can be valued in monetary terms by applying previously calculated benefit values to impacts found under the impact evaluation. Social benefits being considered as part of this pilot evaluation fall under three core outcomes:
 - Employment, education and training provided through local authorities
 - Accommodation provided or supported by local authorities
 - Enhanced sense of social connectedness from being supported through the Staying Close programme.
- Identify and collect data on the costs of the Staying Close programme (directly provided by local authorities and DfE) and assess this against data on grant funding awarded by DfE.

The initial intention at the start of the pilot was for the economic evaluation to provide a cost benefit analysis (CBA) to assess the VfM of Staying Close. However, as there was not enough evidence of statistically significant programme impacts within the evaluation timeframe, a break-even analysis has been conducted as part of this pilot evaluation to consider what level of impact would have needed to be evidenced for the benefits to exceed the costs.

It was not viable within the scope of this evaluation to capture and monetise all the potential benefits of Staying Close. However, this pilot evaluation demonstrates how key social benefits of the Staying Close programme could be measured and monetised and compares these benefits to the programme's delivery costs. We acknowledge where any gaps and limitations to the social benefits measured and cost data collected and highlight areas for further research.

Research questions

1. What are the costs associated with the Staying Close programme?
2. What is the VfM of the Staying Close programme?
3. How may we measure and monetise key social benefits of the Staying Close programme and compare this against collected cost data on the delivery of the Staying Close programme?

Timeline

The evaluation followed a two-wave data collection approach, covering recruitment, delivery, analysis, and reporting phases.

Table 4. Timelines for Wave 1

Wave 1	Timelines
IPE interviews	Conducted with programme stakeholders from February to April 2024
Survey & administrative data collection	Conducted from March to June 2024
Data analysis & reporting	Conducted from June to July 2024, with an interim presentation to CHI and DfE in August 2024

Table 5. Timelines for Wave 2

Wave 2	Timelines
IPE interviews	Engaged local authority staff, providers, and young people from September to November 2024
Survey & administrative data collection	Conducted from October to December 2024
Cost data returns	Collected from November to December 2024
Impact analysis	Conducted from December 2024 to February 2025
Value for money (VfM) analysis	Conducted from February to March 2025
Final reporting	Completed in March 2025

Protocol and Registration

This pilot evaluation is registered on the Open Science Framework (OSF) registry, <https://osf.io/zy48k>.

Ethics

A desk-based review was conducted at the start of the evaluation by Verian's internal ethics panel, which included a review of key documentation including our proposal, research protocol, our Data Protection Impact Assessment (DPIA), and our Legitimate Interests Assessment (LIA). The review confirmed that we passed the ethical assessment.

Given young people involved in the Staying Close programme are considered a vulnerable group, this raises important ethical considerations regarding the interviewing process. Before contacting any young people, the Verian research team developed a comprehensive briefing pack which they shared with local authorities to keep them informed and aligned throughout the interviewing process. This included documentation outlining our approach to interviewing young people (including an approach note, safeguarding approach, email recruitment template used to get in touch with young people and post-interview communications), as well as the materials we would send to participants (participant information sheet and consent form). These documents mapped out how we intended to identify and recruit young people in a way that ensures their safety and wellbeing throughout the process.

To support participation, young people were offered incentives: £40 shopping voucher for taking part in a 30–45 minute online interview, and a £25 shopping voucher for completing a 15-minute online survey. These incentives were designed to recognise their time and contribution to the evaluation.

Incentives were provided as e-vouchers, sent to participants via email on a weekly basis (twice per week). To manage expectations and account for any potential delays, all young people were informed in advance (as stated in our survey and qual briefing documents) that their incentive could take up to two weeks to process. While delays in processing vouchers were rare, this evaluation highlighted the importance of automating incentive distribution in future research, particularly when working with vulnerable young people. We received follow-up emails from a few participants seeking their incentive immediately after completing the survey or interview, underscoring the value of a more immediate and streamlined process to support participant trust and engagement.

All young people provided informed consent prior to participation- survey respondents consented via an introductory statement on the survey's front page, while interview participants received a briefing note outlining the study and consent process as part of the IPE. Consent was also verbally re-confirmed at the start of each interview to ensure ongoing informed participation.

Furthermore, prior to conducting fieldwork, all Verian researchers received comprehensive safeguarding briefings from Verian's Chief Safeguarding Officer. The team also collaborated closely with Dr Beth Watts-Cobbe, an academic expert on homelessness and housing inequalities, to ensure the quality and appropriateness of all IPE topic guides. Additionally, Dr Beth Watts-Cobbe conducted refresher training on interviewing vulnerable populations for all researchers involved in interviews with young people.

Ahead of the survey, we shared the full questionnaire with LAs so they had sight on all of the questions that would be asked of the care leavers. We also shared a privacy policy developed specifically for the Staying Close evaluation, detailing things such as how the care leavers data would be used, how their data would be stored, and how they could withdraw from the research. We also provided LAs with instructions for how to distribute the survey, as well as email and SMS templates that could be shared with care leavers. These templates included links to the survey, the privacy policy, and provided an email that they could use to contact us if they had any questions.

At the start of the survey, it was noted that the questionnaire included some questions which were of a sensitive nature, and if the respondent was not comfortable answering they could select 'prefer not to say'. Additionally, in line with Market Research Society requirements, respondents were asked during the survey for consent before seeing questions collecting ethnic origin (classified as special category data), as well as health and criminal offence information.

In case any of the questions raised challenging or upsetting issues for the respondents, we provided links to support materials at the end of the survey for talking and mental health services. In light of feedback, we would advise including a more detailed description of the types of topics covered in the survey in the introductory text of the survey so as to prepare a respondent (along with any individual supporting a respondent through the survey) of what to expect. Particularly for any survey with this population, where questions related to loneliness, belonging, social connectedness and general wellbeing are asked in succession. We would also advise providing a link to support materials at the beginning, as well as the end, for the same purpose of helping anyone engaging with the survey to feel more informed and prepared for the upcoming topics.

In line with the data sharing agreements, all sensitive data for care leavers such as ethnicity, criminal offence information and personal email addresses (which were collected to provide young people with their incentives) were strictly stored in the UK.

For the administrative data, the data collected was anonymised by the LAs, and was requested to be shared with us in a password protected file via a protected platform. Following ICO guidance, we developed the administrative data form so as only to request data that was purposeful, necessary and balanced; being based on legitimate research interest, on needing the data to quantify the impact of Staying Close, and on balance, being in the interests of care leavers.

Methods

Participant recruitment

For this evaluation, we aligned our eligibility criteria for the evaluation with those for the Staying Close programme itself.

Eligibility

The eligibility criteria for the survey and administrative data were the same, guided by DfE programme documents.² Young people were included in our study if they met the following criteria:

Table 6. Eligibility criteria

Eligibility criteria
<p>Residential care leavers or unaccompanied asylum-seeking children (UASC)/former UASC aged 16-25 between 1 January and 31 March 2024. This therefore covers young people born between 1 January 1999 and 31 March 2008.</p> <p>Young people were included if they:</p> <ul style="list-style-type: none"> • Were currently engaging in Staying Close activities, or • Were eligible to receive Staying Close support, even if they were not currently engaging in Staying Close activities. This accounts for capturing data on young people at the beginning of their journey through Staying Close in the earliest wave of data collection. <p>Residential care leavers or UASC/former UASC must also have spent at least 13 weeks in residential care (the 13 weeks don't have to be consecutive); or in care arrangements that might not be classed or registered as children's homes starting from the age of 14.</p> <p>Care arrangements that might not be classed or registered as children's homes, but which are in scope for this study, include:</p> <ul style="list-style-type: none"> • A registered residential children's home • Semi-independent, transitional accommodation • Self-contained accommodation with specialist personal assistance support • Self-contained accommodation with floating support • Supported lodgings • Bed and breakfast or emergency accommodation • Independent living, for example in a flat, lodgings, bedsit, bed and breakfast (B&B) or with friends, with or without formal support • National Health Service (NHS)/health trust or other establishment providing medical or nursing care. Use for hospitals of all kinds when the child is placed there as part of the Care Plan. Also use for other facilities provided by NHS/Health Trusts. • Family centre or mother and baby unit • Young offender institution (YOI) or secure children home <p>NB: this list is not exhaustive.</p>

Survey and admin data

The criteria above were shared in the wave 2 data collection guidance, and is a more detailed description of the original eligibility criteria that was developed and shared in wave 1 (which can be seen in Appendix C).

During the evaluation it was acknowledged that the criteria had caused confusion for some LAs, particularly those who were delivering Staying Close. For example, in wave 1, some Staying Close LAs submitted data only for their Staying Close cohort, not for the full care leaver eligible cohort according to our criteria. When this was identified, we reached out to LAs to clear up the confusion and to request data on the full cohort; however, it was not always possible for these LAs to submit the revised data within the necessary time frame.

After the wave 1 data collection, we therefore sought to add more detail to our description of the eligibility criteria – while keeping the parameters exactly the same – to try to make it even clearer to LAs. We also invited all LAs to a workshop where we discussed the revised wording, as well as the justification for these criteria to help LAs understand. We invited attendees of the workshop to ask questions, and after the meeting we shared an FAQ website which detailed key points and queries for anyone who was unable to attend.

IPE Interviews

Alongside the criteria outlined above, we applied the following sampling guidelines when selecting young people to interview for the IPE:

- 2-3 young people from each case study area.
- A mix of young people who have experience of Staying Close services and support. Where possible, we recruited a mixture of ages, genders and ethnic backgrounds across the case studies.

Our primary method of recruiting young people to participate in the IPE interviews was through the survey responses, supplemented by reaching out to case study councils to invite additional young people to participate.

Recruitment and enrolment

Survey

The survey was conducted online, and local authority and charity staff (most commonly PAs) were responsible for inviting eligible care leavers to take part in March-June 2024. We drafted an email for LAs to share with PAs, who shared the survey

invitation with young people. The email included the purpose of the survey, a copy of the questionnaire (for PAs only), information about how young people will receive the £25 shopping voucher as a thank you for their time and information about our data protection processes. The email also included instructions for inviting young people to participate and email and SMS invitation templates containing links to the online survey.

The same approach was followed in October-November when the second wave of the survey was conducted, with revised invitation materials explaining to care leavers we were interested in hearing from them again. There was also an additional strand of direct outreach to care leavers who consented to being recontacted after the survey, inviting them to the second wave of the survey, and asking permission to link their responses.

In total, we received 356 responses to our survey in the first wave of data collection and 595 responses in the second wave of data collection. Of these responses, we were able to link 286 of them at Wave 1 and 2.

IPE

Staying Close delivery stakeholders

DfE provided us with contact details for the key Staying Close stakeholders across each LA case study, chosen from the latest phase of Staying Close areas.

Table 7. Wave 1 interviews

LA	Staying Close team	Partner	Total interviewees
Wolverhampton	2		2
St Helens	2		2
Devon	2		2
Nottinghamshire	2		2
Darlington	2		2
Enfield	1	1	2
Total	11	1	12

Wave 2 (September – November 2024): The second round of interviews was conducted later in the programme to get a holistic view of programme delivery and experience. Interviews were conducted online and included a wide variety of delivery team members including those from the local authority, private provider/charity partners and keyworkers.

Table 8. Wave 2 interviews

LA	Staying Close team	Provider	Partner	Total interviewees
Wolverhampton	4		1	5
St Helens	3	1	1	5
Devon	4			4
Nottinghamshire	3		2	5
Darlington	2	2	1	5
Enfield	2	2	1	5
Total	18	5	6	29

Young people

Young people were recruited for interviews in two ways: the Staying Close survey or the relevant local authority.

Recruitment via the survey

As part of the survey, participants were asked if they consented to be recontacted for an interview about the programme. Those who opted in were emailed by our research team with an invitation to participate, along with an information sheet outlining the study and what their involvement would entail. This may have resulted in a sample that predominantly includes young people with positive experiences of the programme, potentially limiting the representation of more negative outcomes. However, it is also possible that those with more negative experiences were particularly motivated to share their views, meaning the sample could reflect a disproportionate number of critical perspectives.

Recruitment via local authorities

Where there were not enough participants from the survey, we supplemented recruitment by reaching out to councils to invite additional participants. We asked councils to share the participant information sheet and consent form with care leavers. Completed consent forms were securely shared with Verian, allowing us to set up interviews with the selected individuals.

Recruitment approach

Following this, our research team offered flexibility, scheduling interviews at a time that suited participants, and offering to re-schedule interviews if a participant did not attend the arranged interview time. All researchers received a briefing on participant safeguarding before the fieldwork began, and interviewers completed refresher training on interviewing vulnerable audiences.

Once interviews were completed, we sent each participant information that signposted to key support services alongside receiving a £40 online gift voucher as a thank you for taking part in the interview.

In total, we interviewed 15 participants. Interviews ranged in length, lasting 30-35 minutes up to approximately an hour, and were guided by participant engagement.

Table 9. Overview of young person interview participants

		n
Gender	Male	7
	Female	8
Age	18	5
	19	2
	20	5
	21	0
	22	1
	23	2
Ethnicity	White	12
	Minority ethnicity	3

	n	
Local authority	Wolverhampton	1
	St Helens	2
	Devon	3
	Nottinghamshire	4
	Darlington	2
	Enfield	3
Interview platform	Teams	10
	Zoom	1
	Telephone	4

Impact evaluation

Table 10. Impact evaluation summary

Project title	Staying Close Pilot Evaluation
Delivery Partner (Organisation)	53 local authorities, including 39 Staying Close areas (including 3 charities in the first phase of Staying Close) and 14 comparison areas
Evaluator (Institution)	Verian
Impact Evaluation design	Regression with entropy balancing and adjustment for covariates
Target Population	Residential social care leavers aged 16-25
Setting	England
Blinding (if applicable)	Not applicable
Number of (effective) clusters	53 local authorities, including 39 Staying Close areas and 14 comparison areas

Number of (effective) participants	Participants included from survey (Wave 1: 356, Wave 2: 595) Participants included from admin data (Wave 1: 5,771, Wave 2: 7,409)
Primary outcome	Wellbeing; social connectedness
Secondary outcome(s)	Education, training and education status; accommodation suitability; accommodation stability

Aims and objectives

This pilot quasi-experimental evaluation had three key objectives.

First, the study aimed to estimate the programme’s impact on a defined set of primary, secondary, and ancillary outcomes related to wellbeing and social connectedness, using data collected through survey responses from care leavers and administrative records from local authorities in England.

Second, it sought to practically test a strategy for collecting this survey data and administrative data, enhancing the understanding of how to effectively gather data on care leavers’ outcomes, as well as refining data collection strategies for future impact evaluations involving this group of young people.

Finally, the research aimed to provide valuable insights and recommendations for any future, fully powered impact evaluations of the Staying Close programme, or similar interventions developed for this population.

Data collection strategy

Survey and administrative data

We designed an online survey, along with an administrative data request for local authorities, to collect outcome data for care leavers.

The wellbeing and social connectedness questionnaire included mental wellbeing and social connectedness measures, along with proxy measures to allow the benefits of Staying Close to be monetised. Additionally, the survey included questions on demographics, care experience and engagement with Staying Close related activities. A copy of the wellbeing and social connectedness questionnaire can be found in Appendix D.

Cognitive testing interviews were conducted with 10 care experienced young people aged between 18 and 25, identified through a specialist research recruitment agency. Interviews were conducted online. These interviews tested the suitability of the questions; ensuring the wording was appropriate and easily understood; and assessed how burdensome the questionnaire was to complete.

For the administrative data, we created a Local Authority Administrative Data Questionnaire. This collected individual level data, capturing whether the individual engaged in EET (including apprenticeships), whether the young person is in suitable accommodation, and the number of times the young person has moved in the past year, along with characteristics such as gender, age and ethnicity. A copy of the Local Authority Administrative Data Questionnaire can be found in Appendix E.

The survey and administrative data were collected concurrently in two waves. Wave 1 was conducted from April to June 2024, and wave 2 took place from October to December 2024.

Selection of the comparison group

We initially set out to collect care leavers' data from 100 LAs according to budget constraints, which included all 54 Staying Close LAs who had implemented the programme by 2024, along with 46 matched comparison LAs invited to participate in the research.

To select the sample of LAs for the comparison group, we use a nearest neighbour (Euclidean) matching approach. We initially randomly selected 46 Staying Close LAs and matched these to 46 comparison LAs that were observationally the most similar according to: the percentage of households not deprived in the four individual dimensions of deprivation in the census (education, health, housing, employment), and the percentage of care leavers in suitable accommodation and in education, employment or training. Variable definitions and details are also available in Appendix F. It was not possible to match the selection criteria used by the DfE, as this was not explicitly stated and was based on a wider range of factors.

Despite being offered funding of up to £10,000 for participation, fewer matched comparison local authorities opted into the evaluation than anticipated. After 9 local authorities declined to participate as a comparison area, we excluded these local authorities from the pool and obtained some new matched local authorities. In total, 14 local authorities agreed to participate as comparison areas. Engagement from Staying Close LAs was also lower than anticipated, with 39 of the 54 Staying Close LAs submitting the necessary documentation and data-sharing agreements with us before research commenced.

Issues in quality and consistency of data

In reviewing both the survey and administrative data, we identified several limitations. Misunderstandings by some local authorities regarding the eligibility criteria may have resulted in some care leavers either being incorrectly invited or excluded from participation in the first wave of the survey, and incorrectly excluded or included in the admin data. In addition, because evaluators were not granted access to sampling frames and therefore could not control or standardize the number of invitations sent to care leavers, this lack of oversight likely increased selection bias, threatening the representativeness and generalizability of the findings. Local Authorities retained control over the administrative and cost data they shared with us, as well as which young people that were invited to survey. For example, if Staying Close local authorities were better at keeping in touch with care leavers at higher risk of poor outcomes, this could translate to worse average outcomes than the true population; however, it is equally possible that young people with poorer outcomes were harder to reach, which could bias the results in the opposite direction. Additionally, there was self-selection bias as participation in the survey was voluntary and possibly influenced by young people's experiences or willingness to engage. Further, there were considerable variations in the completeness of the survey and admin data we received. Some of the survey data missingness is attributable to the sensitivity of the questions, which allowed respondents to offer no response. Additionally for the admin data, the Strengths and Difficulties Questionnaire (SDQ) score was not used or reported by all local authorities (when the SDQ was explained, some reported using different questionnaires or tools). Others reported difficulties accessing some of the requested data such as data concerning substance use and previous criminal offences. Completeness issues were also reported when children had moved between local authorities during their time in care, and for care leavers aged 22-25, due to reported differences in requirements for data collection for this age range.

Impact evaluation design

Deviation from original design

After a review of the available data and the final research time frames, we identified the need for an adjustment in our original impact evaluation approach. In our original design, we proposed employing a difference-in-difference estimator, with entropy balancing weights to account for differences between care leavers in Staying Close and comparison areas.

A difference-in-differences estimator using panel data effectively compares the differences in changes in outcomes over time between the Staying Close group and comparison group. It controls for time-invariant unobserved differences in characteristics between care leavers from the Staying Close and comparison areas. However, during the course of the evaluation, it was determined that a difference-in-differences approach was unsuited to the data.

Most prominently, the Wave 1 data (collected between April – June 2024) was collected for a wider group of care leavers, including those who had been supported by Staying Close programmes in years prior to the evaluation. Additionally, due to factors outside of the control of the evaluation, data were collected later than originally planned in the proposal (data was originally planned to be collected from February-April 2024). These factors meant the Wave 1 data could not be treated as a baseline data. Instead, the Wave 1 data was more suited as outcome data – likely impacted by Staying Close if it is an effective programme. Using a difference-in-differences estimator would have had the potential to downwardly bias effect estimates, therefore we adopted a regression-based approach with entropy balancing, treating both Wave 1 and Wave 2 measures as outcomes.

Chosen design

Since Staying Close funding was rolled out to local authorities in a non-random way, we had to statistically adjust for any pre-existing differences between areas that received the funding (the Staying Close group) and areas that did not (the comparison group). This is so that we are comparing like-for-like. Any pre-existing differences may be responsible for differences in outcomes between the two groups, so if we did not adjust for them, there is a risk we would draw invalid conclusions about the effectiveness of Staying Close.

The approach we used to adjust for any differences between the groups is called entropy balancing (Hainmueller, 2012). This approach weights data from comparison areas so that area characteristics (such as deprivation) and individual characteristics (such as average age) in the areas are as similar as possible to those characteristics

in Staying Close areas. The characteristics used in this way in analyses are called covariates. Observations in the comparison areas that are more similar to observations in Staying Close areas were assigned a higher weight. Observations that are less similar were assigned a lower weight. Weighting may be thought of as a generalisation of matching approaches, with the main advantage that all observations are included in analyses and smoothly down-weighted if they are dissimilar to the intervention group; whereas in matching analyses, each observation is either in or out of analyses, depending on whether it is a close enough match.

Table 11 summarises the variables we included in the entropy balancing. This includes individual-level characteristics captured in both the survey and administrative data, along with additional attributes exclusive to the administrative data (which are only used for administrative data analysis). We also incorporate area-level characteristics in both analyses, which capture the wider context such as housing deprivation. See Appendix A for a summary of balance before and after weighting. These variables were selected because they are likely to influence both participation in the programme and the outcome measures.

Table 11. Covariates included in the entropy balancing and their source

Variable	Source ³	Description
Individual-level characteristics		
Age	Survey / admin	Age of individual in years
Gender (Male)	Survey / admin	Binary variable, where the value 1 indicates the individual is male, and 0 that they are not
Ethnicity (White)	Survey / admin	Binary variable where the value 1 indicates the individual is white, and 0 that they are a minority ethnicity
Asylum seeking child	Survey / admin	Binary variable where the value 1 indicates the individual is or has been an unaccompanied asylum-seeking child, and 0 that they are not
Offended	Survey / admin	Binary variable where the value 1 indicates the individual has previously offended (including current ongoing or outstanding convictions), and 0 that they have not
Adopted child	Admin only	Binary variable where the value 1 indicates the individual has previously been adopted, and 0 that they have not.
Time in care	Admin only	Number of months individual spent living in care.
Strengths and Difficulties Questionnaire (SDQ) score	Admin only	A Total Difficulties score ranging between 0-40, where a higher score reflects more behavioural or emotional problems. Given the degree of missingness, used only in sensitivity analyses.

Variable	Source ³	Description
LA-level characteristics		
Not deprived – education	Census	Proportion of households not deprived in the education dimension of the household deprivation indicator
Not deprived – health and disability	Census	Proportion of households not deprived in the health and disability dimension of the household deprivation indicator
Not deprived – housing	Census	Proportion of households not deprived in the housing dimension of the household deprivation indicator
Not deprived – employment	Census	Proportion of households not deprived in the employment dimension of the household deprivation indicator
Not deprived – composite measure	Census	Proportion of households not deprived in any of the four dimensions mentioned above
Care leavers in EET	Census	Proportion of care leavers in education, employment, or training
Care leavers in suitable accommodation	Census	Proportion of care leavers in accommodation considered 'suitable'

Crucially, we can only apply entropy balancing to measured characteristics. If there are any important unmeasured characteristics, we cannot take account of them quantitatively. However, when interpreting analyses, we have produced a reasoned assessment of the plausibility of estimated effects by triangulating with evidence from the implementation and process and economic evaluation strands.

We also employed a “doubly-robust” approach: fitting separate regression models for each outcome on the weighted data, and incorporating covariates used in the entropy balancing as predictors. This inclusion of covariates in the outcomes model increases the precision of estimates.

Primary outcome analyses: technical specification

In this pilot impact evaluation, we provide indicative estimates of the effects of Staying Close on care leavers' wellbeing and social connectedness outcomes using a regression approach with entropy balancing (the regression approach we used is also known as g-computation).

Individual causal effects are defined as the difference between what outcome someone experienced and what that outcome would have been if they had not lived in a Staying Close area (the counterfactual outcome). This individual causal effect cannot be directly measured, since each young person either lives in a Staying Close area or a comparison area, not both. However, if we have taken account of all important covariates, it is possible to estimate an average of these within-individual causal effects by modelling differences between individuals living in the two areas. As discussed above, we likely will not have been able to take account of all important covariates. The quantity we estimated (the estimand) was the average treatment effect on the treated (ATT). This is the average difference in estimated Staying Close and comparison counterfactual outcomes for young people who lived in Staying Close LAs.

We follow an intention-to-treat (ITT) approach to analysis: participants were analysed according to whether they were in Staying Close or comparison LAs, regardless of whether they engaged specifically with elements of Staying Close. This accounts for capturing data on young people at the beginning of their journey through Staying Close in the earliest wave of data collection. ITT analyses are standard in impact evaluation; if we had excluded young people who did not engage with Staying Close, then this would risk upwardly biasing effects since, e.g., those who did not engage with Staying Close may have stopped engaging as they felt the support offered was not helpful. ITT analyses also potentially dilute effect estimates, so another standard follow-up analysis, compliance analysis (typically using an approach called instrumental variable analysis), additionally models impact for young people who did engage with the programme being evaluated. It was not possible to use compliance analysis as we do not have data on whether young people engaged with Staying Close support.

More specifically, the steps followed were as follows:

1. Entropy balancing was used to estimate weights for the comparison group such that the two groups were balanced on covariates. Since the estimand is ATT, Staying Close LA observations were all assigned the weight of 1.
2. A regression model (or generalised linear model, for non-Gaussian outcomes) was fitted using these weights. We regressed outcomes on intervention group, covariates, and all first-order interactions between intervention and covariates.
3. This regression model was then used to estimate predicted potential outcomes (Staying Close and Comparison) for participants in Staying Close LAs (i.e., excluding comparison participants at this stage, given the ATT estimand).
4. Finally, the ATT was calculated as the mean of differences in these estimated potential outcomes. We report a simple effect size (in the original measure units) and standardised effect size (Glass's δ : the estimated effect divided by the comparison group standard deviation). LA cluster-robust standard errors were used; we report 95% confidence intervals.⁴

All analyses were conducted using R version 4.4.1 (R Core Team, 2024). Entropy balancing weights were estimated using `WeightIt` (Greifer, 2024a) and balance checking was visualised using `cobalt` (Greifer, 2024b). Marginal effects were estimated using the `marginaleffects` package (Arel-Bundock, Greifer, & Heiss, 2024). Power calculations were conducted using `PowerUpR` (Bulus, et al., 2021), intraclass correlations (ICCs) for which were estimated using linear mixed effects models in `lme4` (Bates, et al., 2015).

Interpreting the practical significance and uncertainty of findings

Following CHI guidance, we interpret a standardized mean difference of 0.2 as the benchmark for a “small” effect, 0.35 for a “moderate” effect, and 0.5 for a “large” effect. Standardised mean differences apply to questionnaire score outcomes such as the SWEMWBS score. There is no CHI guidance on how to interpret effects for binary outcomes, such as whether someone is EET. We present these effects as percentage point difference in predicted probabilities and transform this difference into a Cox Index to have an effect size measure comparable to a standardised mean difference such as Glass’s δ (What Works Clearinghouse, 2022). The Cox Index (d_{cox}) is defined as

$$d_{cox} = \frac{\ln \ln \left(\frac{p_{sc}}{1 - p_{sc}} \right) - \ln \ln \left(\frac{p_c}{1 - p_c} \right)}{1.65}$$

where p_{sc} is the proportion of young people in Staying Close and p_c is the proportion of young people in the comparison group with the outcome of interest. We used the sample proportion for p_{sc} and the doubly-robust estimated difference to calculate p_c . This calculation mirrors the ATT estimand discussed above.

We report 95% confidence intervals for all estimates. Each value within an interval can be interpreted as highly compatible with the data, assuming that the model is approximately correct (see Gelman and Greenland, 2019, for a summary of the recurring debate on interpreting intervals). Confidence intervals perform a similar function as p-values; however, they helpfully focus attention on the magnitude, direction, and uncertainty of estimates (width of the interval), rather than on whether a finding is “statistically significant” or not.

We report all “small”, “medium”, and “large” benchmarks that fall within an interval, highlighting also whether an effect of the opposite direction or zero, is compatible with the finding. For example, if a standardized mean difference were 0.3 and the interval were [0.2, 0.4], then the findings would be compatible with a small or moderate positive effect. If the interval were [-0.2, 0.1], the finding would be compatible with a small negative effect or a zero or negligible positive effect.

Sensitivity analysis

To further evaluate the robustness of our findings, we performed sensitivity analyses that involved changing model specifications, including and excluding covariates, and modifying the sample; specifically, by restricting it to care leavers with data available in both waves of data collection.

Full summary of outcome measures

The primary outcomes of interest in this pilot impact evaluation were the wellbeing and social connectedness of care leavers. Data was collected at two time periods, April to June 2024 and October to November 2024. Eligible care leavers in both the Staying Close areas and the comparison areas were invited to participate in the survey. Details of our data collection strategy is provided in section 5.

Wellbeing outcome

The Department of Health and Social Care defines wellbeing as “about feeling good and functioning well and comprises an individual’s experience of their life and a comparison of life circumstances with social norms and values”. The theory of change developed by Foundations for Staying Close outlines a number of expected outcomes relating to young people’s mental health and wellbeing. This includes helping them be more resilient, in good physical and emotional health, feeling successful and happy and, more directly, having good wellbeing.

We measured care leavers’ positive mental wellbeing using the Short Warwick–Edinburgh Mental Well-being Scale (SWEMWBS). The SWEMWBS is a short version of the Warwick–Edinburgh Mental Wellbeing Scale (WEMWBS). The WEMWBS was developed to measure the impact of projects and programmes that aim to improve mental wellbeing. It includes 14 statements which cover both feelings and functioning. The SWEMWBS only uses 7 of these statements and focuses on functioning. The seven statements are positively worded with five response categories from ‘none of the time’ to ‘all of the time’ (Appendix K).⁵

The SWEMWBS is a particularly appropriate measure of mental wellbeing for this study because it has been extensively validated for populations of young people aged 15 -21 (McKay & Andretta, 2017; Ringdal et al, 2018), as well as the general population (Shah et al, 2021, Ng Fat et al, 2017). In addition, the responses to its questions can be easily operationalised into a single score for use in the impact analysis. The SWEMWBS is scored by first summing the scores for each of the seven items, which are scored from 1 to 5. The total raw scores are then transformed into metric scores using the SWEMWBS conversion table. If there was missing data for no more than 50% of a participant’s item responses, then prorating was used to compute a total score.

Social connectedness outcome

The Staying Close programme aims for young people to sustain and promote good relationships with a supportive network, including Staying Close staff. We measured the strength of these relationships by assessing young people's social connectedness. While there are varied definitions of social connectedness, in this study we adopt a definition of social connectedness aligning with the US Centres for Disease Control definition (see below). This includes the quality of relationships and recognises the need for a network of relationships as outlined in the programme theory of change:

"Social connectedness is the degree to which people have and perceive a desired number, quality, and diversity of relationships that create a sense of belonging, and being cared for, valued, and supported."

We measure care leavers' social connectedness in this evaluation using an adapted version of the ENRICH Social Support Instrument (ESSI). The ESSI measure includes seven items about the nature of relationships available to the respondent. The indicator has demonstrated good internal consistency and has been shown to correlate positively with other social support instruments and negatively with measures of depression (Blumenthal et al, 1987; Beck et al, 1981). It is also being used as a proxy measure of social connectedness by other similar impact evaluations commissioned by the Centre for Homelessness Impact (see Hume, 2022).

However, several of the items in the ESSI measure were deemed not appropriate for residential care leavers in their original form. Namely, items 3 (about love), 4 (on daily chores) and 6 (marriage or living with a partner) (see Appendix G). We therefore developed an edited version of the ESSI indicator based on questions that are applicable to this context (see Appendix H for further details). The adapted ESSI measure was cognitively tested with a sample of young care leavers before the survey questionnaire was finalised (Appendix L).

To minimise the mental burden on respondents, our adapted ESSI measure also used the SWEMWBS's response scale rather than the indicator's original scale. Both SWEMWBS and the original ESSI measure use a 5-item response scale measuring frequency. However, while the responses at the extreme ends and the mid-point of the two scales are identical, the phrasing of the intermediate points is different (see Appendix I). In line with the SWEMWBS measure, we instead created a categorical variable asking respondents to select one of the following five options for each relevant question: i. none of the time; ii. rarely; iii. some of the time; iv. often; v. all of the time.⁶ Individual items were summed for a total score, with higher scores indicating greater social support (Vaglio, et al 2004). Item responses were scored from 1 (none of the time) to 5 (all of the time), with item 7 (living with spouse) scored 4 for "yes" and 2 for "no." (Mitchell et al. 2003, p. 399). If there was missing data for no more than 50% of a participant's item responses, then prorating was used to compute a total score.

Secondary outcomes

The secondary outcomes of interest are related to care leavers' EET status and their accommodation outcomes. Data was collected using the Local Authority Administrative Data Questionnaire tool developed for this study. This data sharing activity was arranged with LAs in two discrete submission periods, April to June 2024 and October to November 2024.

Education, employment and training (EET) status

For most young people leaving residential care, success in achieving independence will require them to access education or training and to secure and sustain employment.

Our main indicator for this outcome includes a binary indicator where the value 1 denotes that the individual is engaged in EET (including apprenticeships), and the value 0 if they are not.

Accommodation outcomes

Accommodation is key to the Staying Close programme since young people leaving their children's home self-evidently need somewhere new to live. Finding suitable housing can be difficult in most circumstances, and for any young person starting out on their own there are new skills to learn and challenges to overcome when they leave home.

We collect data on two key types of accommodation outcomes the Staying Close programmes aims to impact. The first outcome is related to the suitability of care leavers accommodation, and the second is about accommodation stability. For both outcomes, we used proxy measures based on existing administrative data local authorities collect.

Accommodation suitability: The first outcome related to accommodation consists of a proxy binary variable indicating whether the individual is in suitable accommodation (1), or not (0). Similar information is also collected by LAs for the Children looked after in England statistics by the Department for Education. Accommodation suitability can be somewhat of a subjective assessment by LAs, hence why this was considered to be a proxy variable.

Accommodation stability: The second outcome related to accommodation consists of a proxy variable measuring a count of the individual's number of accommodation moves in the past year. This outcome measure assumes that young people in more stable accommodation will tend to move between properties less than those in less stable accommodation.

Ancillary outcomes

We also examined the following ancillary outcome measures to supplement our main analysis.

Social connectedness ancillary outcomes

For the purposes of monetising the social connectedness benefits of Staying Close, the survey questionnaire included two additional questions. This reflected that there was not an appropriate methodology available to incorporate the main preferred indicators discussed above into the economic evaluation. The two additional questions Rely (“Thinking about your friends and wider support network, how much can you rely on them if you have a serious problem?”) and Lonely (“How often do you feel lonely?”) are related proxy variables based on questions from the Understanding Society longitudinal survey (University of Essex and Institute for Social and Economic Research, 2024).

The original questions from the Understanding Society survey were not appropriate for use with residential care leavers, so we adapted them to fit this purpose (a comparison is provided in Appendix J). As the loneliness measure Lonely included a 6-point response frequency scale, the phrasing was changed to match the SWEMWBS response scale to minimise the cognitive burden on respondents. These adapted questions were cognitively tested with a sample of young care leavers before the questionnaire was finalised (Appendix M).

Education, employment and training (EET) status ancillary outcomes

In addition to the main binary outcome related to whether individuals are in engaged in EET (above), we collected data from LAs on a nominal outcome variable on whether each individual is engaged in higher education; education other than higher education; apprenticeship; training or employment; or not in EET (including apprenticeships). We also asked individuals to report their primary occupation in the survey. These questions inform the economic evaluation, which outlines the social benefits that can be applied to these EET status changes.

Accommodation ancillary outcomes

We collated additional outcome data from LAs on individuals’ type of accommodation outcomes. Like the ancillary education outcomes, these variables inform the economic evaluation, which provides social values for the benefits of relative changes in care leavers’ type of accommodation. Using administrative data, we collected additional outcome data from LAs on whether each individual has no abode, whether they are in temporary accommodation, or whether they are in accommodation which is not temporary.

Descriptive statistics to inform future impact evaluation power calculations

Finally, our descriptive analysis aims to report information that can inform power calculations in future work and impact evaluations in this area. This includes measures of variance explained by covariates, survey response rates and attrition at each data collection point (for the pooled sample and Staying Close and comparison groups separately), as well as intracluster correlation (ICC) coefficients).

Implementation and process evaluation

Qualitative interviews with Staying Close delivery stakeholders

Fieldwork period 1 (February – April 2024): The first round of interviews focused on exploring programme planning and set-up processes and experience. In this round, 1-hour qualitative interviews were conducted online with two stakeholders involved in the initial phase of the programme for each case study. These stakeholders included strategic programme leads and project managers. Contact details were provided by DfE.

Fieldwork period 2 (September – November 2024): The second round of interviews were conducted later in the programme to get a holistic view of programme delivery processes and experience. This round involved up to five 1-hour stakeholder interviews to establish what was delivered against the plan, what worked well, barriers to delivery and key learnings. Interviews were conducted online and included a wide variety of delivery team members including those from the local authority, private provider/charity partners, partner organisations and keyworkers.

Qualitative interviews with young people (programme recipients)

Alongside the second round of stakeholder interviews, we also conducted up to three qualitative interviews in each selected case study area with programme recipients. These interviews lasted between 30- 45 minutes and were conducted online via Teams/ Zoom or telephone call.

Case study analysis

We conducted individual case study analyses and applied thematic analysis to identify key patterns and themes. In addition, we used a matrix approach to compare and organize these themes across different areas, helping us draw out similarities and differences and link them to outcomes where possible.

Economic evaluation

Value for money

The economic evaluation aimed to assess whether the Staying Close programme was a good use of public resources, its value for money (VfM). It complements the impact evaluation by comparing the costs to the benefits of Staying Close.

Typically, a cost benefit analysis (CBA) would be undertaken to assess the VfM of the programme. However, due to the data limitations and difficulties in detecting statistically significant programme impacts, a CBA was not deemed feasible. As such, a break-even analysis was conducted instead as a suitable approach in these circumstances.

Break-even analysis

A break-even analysis assesses the likelihood that the benefits, converted into monetary values, outweigh the costs of Staying Close. Taking into account the programme costs, break-even analysis examines the minimum impact needed to have occurred as a result of Staying Close so that the monetary value of the benefits outweighs the costs.

For example, the break-even analysis draws on estimates of the monetary value of the suitable accommodation benefit and information on actual project costs to estimate the number of people which would need to move into suitable accommodation for Staying Close to break even.

The break-even analysis focused on two outcomes:

- Loneliness, and
- Suitable accommodation.

These outcomes were chosen based on the findings from the IPE that the greatest perceived impacts of Staying Close were in improving sense of social connectedness for young people, with its associated lonely outcome. The impact evaluation also evidenced that care leavers in Staying Close areas were more likely to be in suitable accommodation compared with care leavers in comparison areas.

The break-even analysis captures both the primary benefits of outcomes (the direct impact on wellbeing of individuals) and the secondary benefits of outcomes (the impacts on other stakeholders such as businesses and government). In particular the secondary benefits represent the avoidance of or reduced government costs (that is benefits to the exchequer), to businesses or both. The outcomes have an associated primary benefit and secondary benefits.

The *loneliness* outcome secondary benefit is estimated based on previous research (Simetrica-Jacobs, 2020), which looked at 1) the reduced government healthcare costs associated with reductions in moderate to severe loneliness, and 2) increased productivity in the workplace from reductions in loneliness⁷. The suitable accommodation outcome secondary benefit is estimated on GP visit costs and the associated reduction in GP visits from healthcare improvements derived from suitable accommodation.

The primary benefits are monetised using wellbeing valuation. The pre-estimated wellbeing values come from a wide body of research and are then adjusted to take account of deadweight. Deadweight has been estimated on the proportion from the comparison group that gained the outcome.

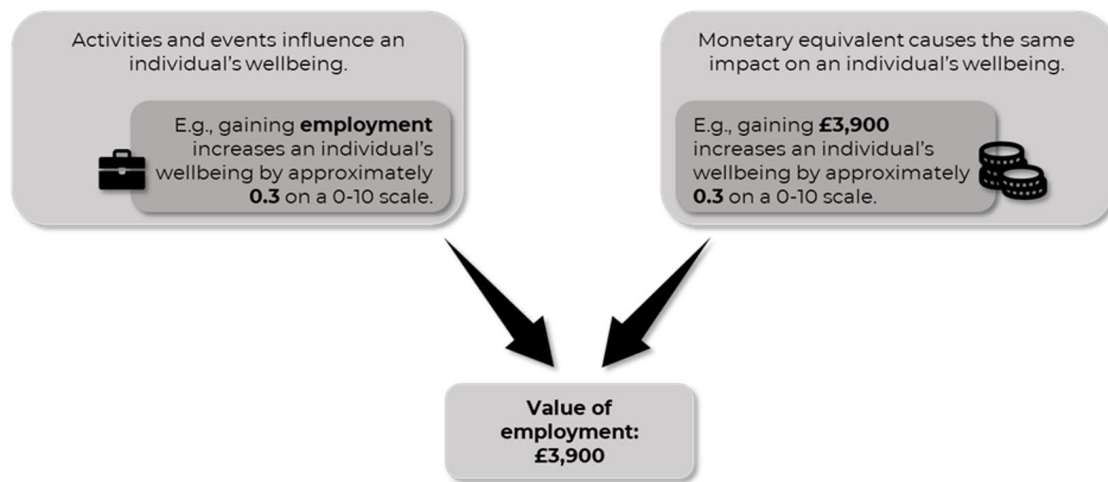
The wellbeing values are estimated per person per year. However, it is acknowledged that some outcomes/benefits may be applied with a longer time horizon given that they may have long-term impacts. These different time horizons have been reflected as part of the overall break-even sensitivity analysis. The main break-even analysis focuses on a 1-year horizon, with 5- and 10-year horizons considered as part of the sensitivity analysis.

Wellbeing valuation

As the main expected benefits of Staying Close are non-cashable, wellbeing valuation was used to estimate these benefits. This involves measuring the impact of an outcome by its effect on subjective wellbeing. This is one of the recommended valuation methods set out in HM Treasury Green Book (2022) and in the Green Book Supplementary Guide on Wellbeing Analysis in Appraisal (2021).

As outlined in Figure 2 below, it does this by estimating the impact of the driver on wellbeing and then calculating the amount of additional income that an individual would need to experience the equivalent change in wellbeing. Since wellbeing values are based on how individuals actually experience a good, wellbeing valuation can help widen the range of additional drivers that can be incorporated into economic analysis.

Figure 2. Wellbeing valuation methodology



The HM Treasury Green Book sets out a recommended approach to applying the wellbeing valuation approach. In particular, it develops the concept of “wellbeing adjusted life years” (also called WELLBYs). A WELLBY corresponds to the monetised value of a one-point change in life satisfaction (on a scale from 0 to 10) per person per year (HM Treasury, 2021). It is this approach that we apply to measure the potential primary benefits of Staying Close.

Throughout the core wellbeing analysis, we estimate the relationship between outcomes of interest (suitability of accommodation or loneliness) and subjective wellbeing whilst controlling for key other explanatory factors – notably health, alongside further characteristics such as income (where relevant and available), age and gender.

Cost data form

In addition to data on the benefits (the outcomes), data on the cost of Staying Close is required for the economic evaluation. This was collected directly from local authorities and DfE through a cost data form.

The cost data form was shared and signed off by DfE in December 2023. This form was then shared with local authorities. A cost form Q&A session was held in November 2024 for local authorities. Completed cost forms from local authorities were returned between November 2024 and February 2025. It is worth acknowledging that the cost form and collected data had some limitations, this is discussed further in sections Economic Evaluation Costs and Limitations VfM.

The cost form asked for comprehensive information on Staying Close programme costs, including:

- Accommodation costs (rent, utilities, other)
- Staff/volunteer information (pay scale point, annual salary, contracted working hours, employer contributions)
- Overheads
- Intervention activities (time, travel, preparation, no. participants)
- Recorded staff time
- Additional expenditures (equipment)
- External services (translators, targeted youth support)
- Individual participation information (months in accommodation, activities participated in)
- Broad healthcare costs (including mental health, drug and alcohol support services).

A representative from the DfE provided their staff costs in supporting local authorities in October 2024.

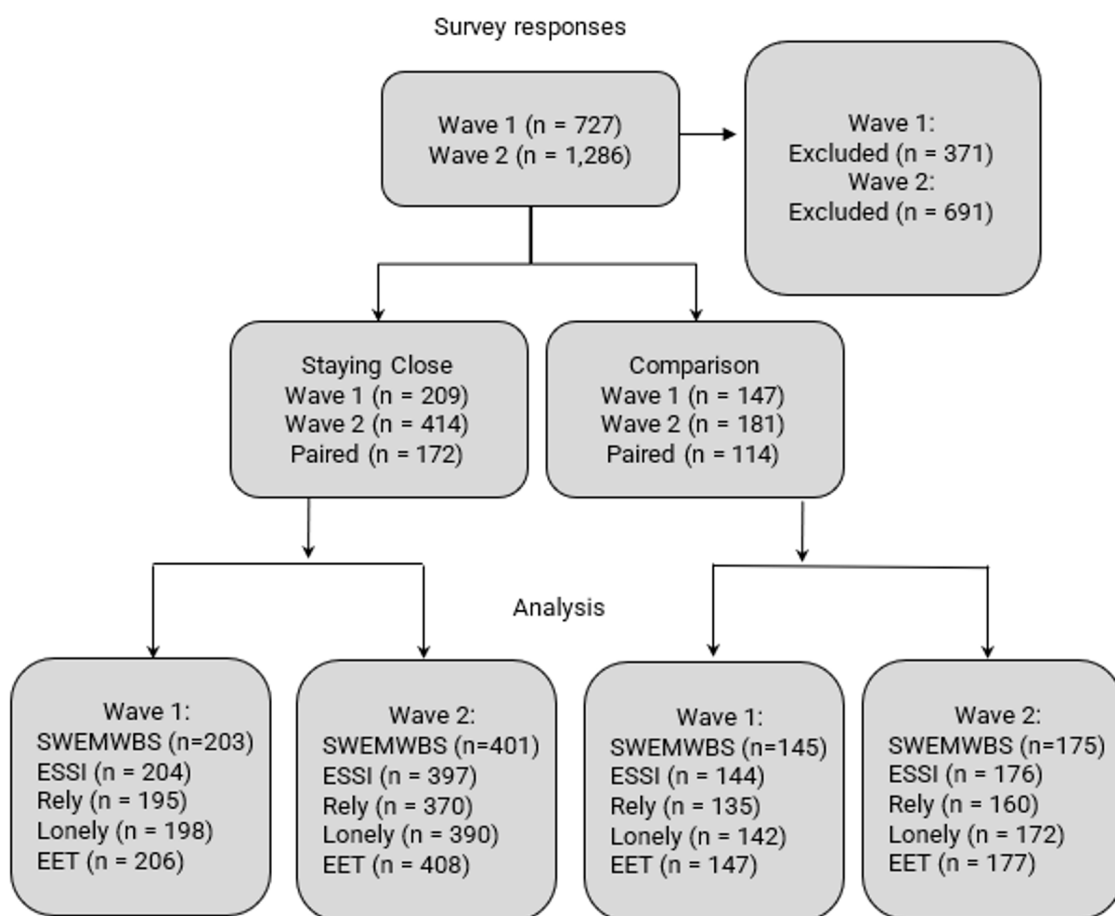
The cost form asked for information in financial terms. As such it was possible to directly monetise the cost information.

Results

Impact evaluation

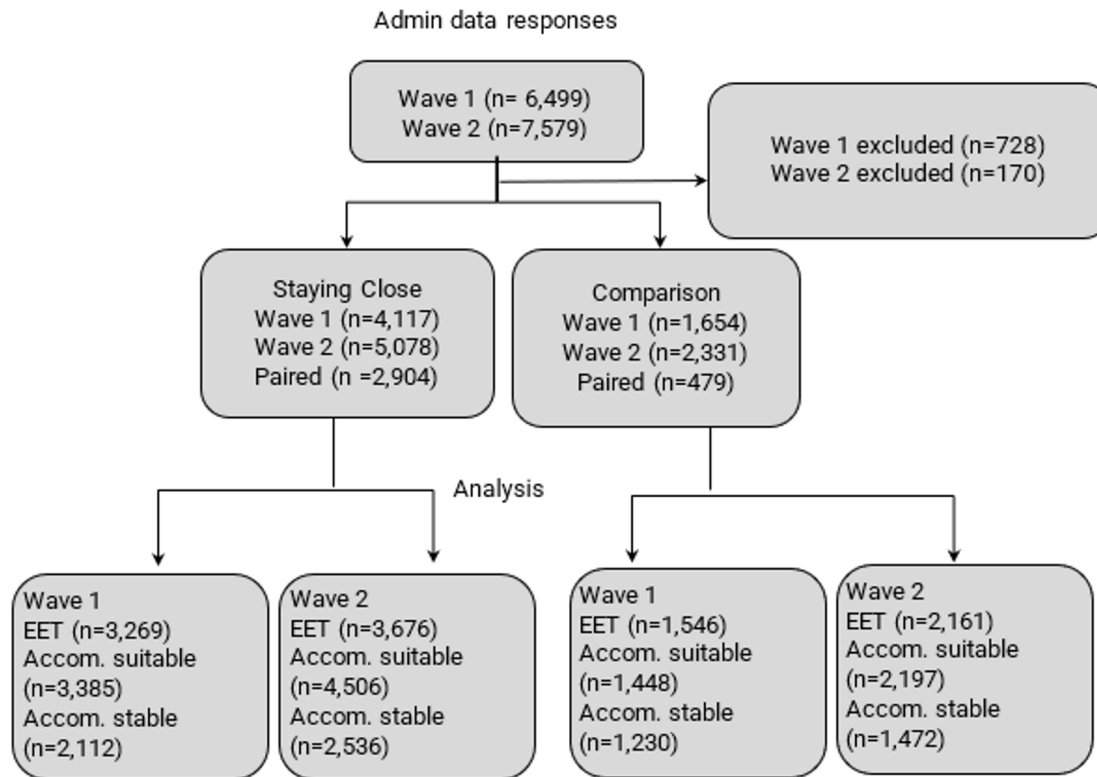
Participant flow

Figure 3. Participant flow (survey)



A significant proportion of survey respondents (28%) in Wave 1 could not be matched to either a Staying Close or comparison LA, due to not providing a valid postcode, so they had to be excluded from the analysis. Of survey observations that were excluded from analyses, most were due to participants providing more than one response per wave, potentially as they received the survey multiple times. Where there was more than one response in a wave, we kept the first. Some responses were also excluded as they were unusually fast, so it was unlikely that participants would have had time to read and engage with the questions.

Figure 4. Participant flow (admin data)



We excluded 43 cases from Bromley from the administrative data because, although Bromley was sampled as a comparison area, St. Christopher’s charity delivered the programme there. In addition, 855 care leavers that had been in care for less than 13 weeks (3 months) were also removed from the data as they did not meet the eligibility criteria for Staying Close support (we believe this was due to confusion around the eligibility criteria).

Sample size

Table 12 shows the power calculations from the Protocol and Table 13 shows the actual achieved minimum detectable effect size (MDES) for the primary outcome, measured using the survey data. The variance explained by participant-level covariates is much lower than originally planned (3% and 7% versus 36%) since we do not have a baseline measure of the outcome. Note also that the analysis is different: originally a difference-in-differences approach on entropy balanced data was proposed whereas now we are using only entropy balancing – again given the absence of a baseline measure of outcomes. The scenarios originally considered suggested a wide range of MDES values from “small” effects to “large” effects (0.26 to 0.59). The achieved MDES was around “moderate” (0.38).

Table 12. Original power calculations for planned difference-in-differences analysis on entropy balanced data. See the protocol for further information on the assumptions made.

		Scenario A	Scenario D	Scenario C	Scenario D
Minimum Detectable Effect Size (MDES)		0.26	0.41	0.32	0.59
Minimum Detectable Effect Size (MDES)	level 1 (participant)	0.6	0.6	0.6	0.6
	level 2 (cluster)	0.1	0.1	0.1	0.1
Intracluster correlations (ICC)	level 2 (cluster)	0.05	0.05	0.05	0.05

		Scenario A	Scenario D	Scenario C	Scenario D
Level of statistical significance (α)		0.01	0.01	0.01	0.01
Power ($1 - \beta$)		0.8	0.8	0.8	0.8
Alternative hypothesis: One- or two-sided		Two	Two	Two	Two
Average cluster size		15	3	15	5
Number of clusters	Intervention	54	54	54	54
	Comparison	46	46	46	46
	Total	100	100	100	100
Number of participants	Intervention	810	162	810	243
	Comparison	690	138	690	207
	Total	1500	300	1500	450
Design effect (VIF)		1	1	1.5	1.5

Considering the achieved MDES in more detail (Table 13 below), the sample size was fixed to the achieved sample size for the primary outcome, as weighted by entropy balancing. Recall again that no weights were applied to the Staying Close group, as required by the ATT estimand. The level of statistical significance (α) was set to 5% (95% confidence intervals) and power ($1 - \beta$) to 80%. All analyses were two-tailed. This MDES calculation also takes account of clustering, since young people who live within the same local authority have slightly more similar outcomes to each other than young people who live in different local authorities (the ICCs were about 0.05).

Table 13. Minimal detectable effect size (MDES) for achieved survey sample, after weighting.

		Survey data (wave 1)	Survey data (wave 2)
Minimum Detectable Effect Size (MDES)		0.380	0.378
Variance explained by covariates	level 1 (participant)	0.079	0.079
	level 2 (cluster)	0.019	0.019
Intracluster correlations (ICCs)	level 2 (cluster)	0.055	0.047
Level of statistical significance (α)		0.05	0.05
Power ($1 - \beta$)		0.8	0.8
Alternative hypothesis: One-sided or two-sided		Two	Two
Average cluster size		3.87	3.44
Number of clusters	Staying Close	37	40
	Comparison	27	32
	Total	64	72
Number of participants	Staying Close	203	401
	Comparison	145	175
	(Weighted)	44.96	48.23
	Total	348	576
	(Weighted)	247.96	449.23

Study population characteristics

Study population characteristics were collected from multiple sources, including individual-level survey and administrative data, as well as area-level census data on deprivation (2021) and Children Looked After (CLA) data (2022).

Table 14 presents the continuous variables for participant characteristics used in the survey analysis. Individual-level data includes gender, age and declared convictions. Area-level deprivation indicators related to education, employment, health and housing were derived from census records. Finally, CLA data provided area-level insights to the proportion of care leavers aged 17-21 in education, employment or training (EET), and accommodation and suitability outcomes.

Table 14. Survey data participant characteristics before balancing (continuous variables)

Variable	Staying Close		Comparison		Mean diff		Glass's δ					
	Wave	M	SD	Valid n	n	M	SD	Valid n	n	Mean diff	Glass's δ	
	Staying Close					Comparison						
Variable	Wave	M	SD	Valid n	n	M	SD	Valid n	n	Mean diff	Glass's δ	
LA level: proportion Care leavers (17-21) in education, employment, or training (EET) -	1	0.60	0.08	209	209	0.57	0.07	147	147	0.02	0.35	
	2	0.59	0.08	414	414	0.60	0.08	181	181	-0.01	-0.20	
LA level: proportion not deprived (education)	1	0.78	0.03	209	209	0.77	0.03	147	147	0.00	0.14	
	2	0.77	0.03	414	414	0.78	0.03	181	181	-0.01	-0.22	
LA level: proportion not deprived (employment)	1	0.88	0.03	209	209	0.87	0.03	147	147	0.01	0.23	
	2	0.88	0.03	414	414	0.88	0.03	181	181	-0.01	-0.27	
LA level: proportion not deprived (health)	1	0.66	0.03	209	209	0.67	0.04	147	147	-0.01	-0.19	
	2	0.65	0.03	414	414	0.67	0.04	181	181	-0.02	-0.43	

Variable	Staying Close		Comparison		Mean diff		Glass's δ				
	Wave	M	SD	Valid n	n	M	SD	Valid n	n		
	Staying Close					Comparison					
Variable	Wave	M	SD	Valid n	n	M	SD	Valid n	n	Mean diff	Glass's δ
LA level: proportion not deprived (housing)	1	0.93	0.03	209	209	0.92	0.04	147	147	0.02	0.46
	2	0.94	0.03	414	414	0.93	0.04	181	181	0.01	0.15
Gender (male proportion)	1	0.45	0.50	206	209	0.40	0.49	147	147	0.05	0.09
	2	0.48	0.50	408	414	0.41	0.49	177	181	0.07	0.14
Age	1	19.64	1.97	209	209	20.82	2.10	147	147	-1.18	-0.56
	2	19.88	2.05	414	414	20.67	2.00	181	181	-0.79	-0.40
Declared conviction	1	0.07	0.26	209	209	0.09	0.28	147	147	-0.02	-0.06
	2	0.10	0.30	414	414	0.07	0.26	181	181	0.03	0.11
Care leavers (17-21) – proportion in suitable accommodation	1	0.88	0.08	209	209	0.89	0.06	147	147	-0.01	-0.20
	2	0.88	0.08	414	414	0.91	0.05	181	181	-0.03	-0.53

Table 15 presents the categorical variables, individual-level data on whether a survey participant is an asylum seeker, along with their ethnicity. The largest differences are for ethnicity at Wave 1, with nearly 27% of participants in the comparison group belonging to a minority ethnicity compared with 18% in the Staying Close group. At Wave 2, the differences reduce as the number of survey participants belonging to a minority ethnicity drops to 18%.

Table 15. Survey data participant characteristics before balancing (categorical variables)

Wave	Variable	Level	Staying Close		Comparison		% point diff
			n	%	n	%	
1	Asylum seeker	Born UK	106	50.7	74	50.3	0.4
		Missing	5	2.4	4	2.7	-0.3
		No	77	36.8	59	40.1	-3.3
		Yes	21	10.0	10	6.8	3.2
	Ethnicity	No	31	14.8	14	9.5	5.3
		Minority ethnicity	38	18.2	39	26.5	-8.3
		White	140	67.0	94	63.9	3.1
2	Asylum seeker	Born UK	221	53.4	98	54.1	-0.7
		Missing	17	4.1	5	2.8	1.3
		No	131	31.6	53	29.3	2.3
		Yes	45	10.9	25	13.8	-2.9
	Ethnicity	No	52	12.6	23	12.7	-0.1
		Minority ethnicity	70	16.9	33	18.2	-1.3
		White	292	70.5	125	69.1	1.4

Note: n = count of observations; % point diff = Percentage point difference

Table 16 on the following page presents differences between Staying Close and comparison areas in the administrative data. The most noteworthy differences are for age (Staying Close participants are on average 3 to 4 months older than comparison participants), ethnicity at Wave 2 (comparison participants are 20 percentage points more likely to belong to a minority ethnicity than Staying Close participants), and months spent in care (Staying Close participants spent between 6 to 9 months more in care on average than comparison participants).

See Appendix A for differences between the two groups before and after balancing.

Table 16. Administrative data participant characteristics before balancing

Variable	Wave	Staying Close			Comparison			Mean diff	Glass's δ
		M	SD	Valid n	M	SD	Valid n		
LA level data: Not deprived (education; proportion)	1	0.78	0.03	4,117	0.78	0.04	1,654	-0.00	-0.00
	2	0.77	0.03	5,078	0.78	0.03	2,331	-0.00	-0.09
LA level data: Care leavers (17-21) - EET proportion)	1	0.58	0.05	4,117	0.59	0.05	1,654	-0.01	-0.15
	2	0.58	0.06	5,078	0.59	0.06	2,331	-0.01	-0.14
LA level data: Not deprived (employment; proportion)	1	0.88	0.02	4,117	0.88	0.04	1,654	0.01	0.16
	2	0.88	0.02	5,078	0.86	0.04	2,331	0.02	0.46
LA level data: Not deprived (health; proportion)	1	0.66	0.03	4,117	0.66	0.04	1,654	0.01	0.15
	2	0.66	0.03	5,078	0.67	0.03	2,331	-0.01	-0.21
LA level data: Not deprived (housing; proportion)	1	0.93	0.05	4,117	0.94	0.03	1,654	-0.01	-0.32
	2	0.94	0.04	5,078	0.90	0.05	2,331	0.04	0.73
LA level data: Care leavers (17-21) - suitable accommodation (proportion)	1	0.90	0.04	4,117	0.91	0.04	1,654	-0.01	-0.32
	2	0.88	0.08	5,078	0.89	0.05	2,331	-0.01	-0.14
Age	1	20.00	2.25	4,117	19.64	1.88	1,654	0.36	0.19
	2	19.76	2.16	5,078	19.49	2.04	2,331	0.27	0.13

Variable	Wave	Staying Close			Comparison			Mean diff	Glass's δ
		M	SD	Valid n	M	SD	Valid n		
Ethnicity (white proportion)	1	0.62	0.48	4,108	0.60	0.49	1,649	0.03	0.05
	2	0.61	0.49	5,069	0.42	0.49	2,294	0.20	0.40
Gender (male proportion)	1	0.65	0.48	4,090	0.65	0.48	1,649	-0.00	-0.00
	2	0.65	0.48	5,037	0.68	0.47	2,327	-0.03	-0.06
Previously identified with substance use problem	1	0.15	0.36	1,706	0.14	0.35	1,260	0.01	0.04
	2	0.18	0.38	2,113	0.22	0.41	1,024	-0.04	-0.09
Months spent in care	1	42.54	43.79	4,028	36.21	40.35	1,298	6.33	0.16
	2	38.00	41.47	4,595	28.78	32.83	2,034	9.22	0.28
Previously offended	1	0.12	0.33	2,532	0.04	0.20	1,298	0.08	0.39
	2	0.15	0.35	2,864	0.16	0.37	1,351	-0.02	-0.05
Unaccompanied Asylum-Seeking Child (UASC)	1	0.27	0.45	4,028	0.30	0.46	1,654	-0.03	-0.06
	2	0.29	0.45	4,979	0.31	0.46	2,331	-0.03	-0.06

Primary analysis

For the two primary outcomes (wellbeing metric and social connectedness) we used all available area-level covariates and individual covariates in both the entropy balancing and outcome models (doubly-robust estimation). The area level covariates were:

- Not deprived – education
- Not deprived – health and disability
- Not deprived – housing
- Not deprived – employment
- Not deprived – composite measure
- Care leavers in EET

The individual covariates were:

- Age
- Gender (Male)
- Ethnicity (White)
- Offended (declared in the survey as having previously offended)
- Asylum seeking child (again, as declared in the survey)

Appendix A includes a summary of the entropy balancing using “Love” plots. These show that entropy balancing was highly effective at balancing the characteristics.

The findings are presented in Table 17 and Table 18 below, which shows descriptives before any balancing, the simple effect size in original measure units and the standardised mean difference (Glass's δ), both with 95% confidence intervals.

As a sensitivity check, we also estimated effects without covariates in the outcomes model. Given that entropy balancing converged and reduced imbalance to zero, we expected that the coefficients would be the same or very similar. We also expected that the confidence intervals would be wider, since the covariates explain variance in outcomes. The findings were as expected for all models (coefficients matched to two decimal places, confidence intervals wider), so we are confident that the model with covariates in the outcomes model (doubly-robust) is the most appropriate to interpret.

For the primary, secondary, and ancillary outcomes, we report results separately for the Wave 1 and Wave 2 samples. Wave 1 data includes a broader group of care leavers, some of whom received support from Staying Close prior to the evaluation period. As a result, care leavers in both waves are likely to have been influenced by the programme. We conducted a sensitivity analysis using data from young people who participated in both waves, treating their Wave 1 outcomes as baseline measures (see Appendix O).

Table 17. SWEMWBS wellbeing outcome summary (doubly robust estimation)

Outcome	Unadjusted					Entropy balanced	
	Staying Close		Comparison			Est [95% CI]	Glass's δ [95% CI]
	n (miss)	M (SD)	n (miss)	Wt n	M (SD)		
Wellbeing metric (Wave 1)	203 (6)	21.96 (4.75)	145 (2)	45.0	22.32 (5.39)	-1.17 [-2.24, -0.11]	-0.22 [-0.42, -0.02]
Wellbeing metric (Wave 1)	401 (13)	21.94 (4.81)	175 (6)	48.2	22.33 (4.68)	-0.30 [-0.95, 0.35]	-0.06 [-0.20, 0.08]

Note: miss = Missing; Wt n = Weighted sample size; Est = Simple estimate in original measure units; M = Mean; SD = Standard deviation

Table 18. Social connectedness outcome summary (doubly robust estimation)

Outcome	Unadjusted					Entropy balanced	
	Staying Close		Comparison			Est [95% CI]	Glass's δ [95% CI]
	n (miss)	M (SD)	n (miss)	Wt n	M (SD)		
Social connectedness (Wave 1)	204 (5)	21.96 (5.54)	144 (3)	45.6	26.26 (5.95)	-1.33 [-2.24, -0.42]	-0.22 [-0.38, -0.07]
Social connectedness (Wave 2)	397 (17)	26.03 (5.43)	176 (5)	48.1	26.51 (5.96)	-0.89 [-2.01, 0.24]	-0.15 [-0.34, 0.04]

At Wave 1 there was wide uncertainty in impact estimates, with negligible-to-moderate effects for Wellbeing (SWEMWBs) and Social Connectedness (ESSI). For both measures, Staying Close was associated with a worse outcome (small effect). At Wave 2, the observed effects were compatible with a small/moderate negative to zero impact on both measures. Given limitations, these results should be understood as having no clear evidence of either a positive or negative impact, rather than as evidence of no impact.

As an additional sensitivity check, we re-ran the analyses for young people who responded to the survey in both waves and gave their consent to link their answers between the two time points. The findings – consistent with the primary analysis - are presented in Appendix O.

Secondary analysis

For the secondary outcomes (EET, accommodation suitability and accommodation stability), we used the following variables as covariates for entropy balancing and in the outcome regression models:

- Area-level household deprivation dimensions from the census (2021). While the original plan was to use four distinct deprivation dimensions (education, employment, housing, and health), this proved computationally challenging for entropy balancing. As a result, we opted for a composite binary measure indicating whether a household is deprived in at least one dimension (see Appendix O with sensitivity analysis results with individual deprivation measures).
- Area-level accommodation suitability for 17-21 year old care leavers from the Children Looked After statistics (2022)
- Area-level EET participation of 17-21 year old care leavers from the Children Looked After statistics (2022)

Individual-level:

- Age
- Gender
- Ethnicity
- Whether the young person is an Unaccompanied Asylum Seeking Children (UASC)
- Months spent in care
- Whether the young person has previously offended
- Whether the young person has been previously identified as having a substance use problem

Education, Employment and Training (EET)

This is a binary outcome reflecting the care leaver’s activity status at the time of data collection. LAs were asked if the young person was “engaged in higher education, education other than higher education, apprenticeship, training or employment”.

Table 19. EET outcome summary

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
EET status (Wave 1)	3269 (848)	51.5	1546 (108)	813.7	50.4	-2.4 [-6.6, 1.8]
EET status (Wave 2)	3676 (1402)	45.9	2161 (170)	769.0	53.8	-6.9 [-15.5, 1.8]

Note: n = Sample size; miss = Missing; Wt n = Weighted sample size

In both waves, the findings are compatible with a moderate-to-small negative to zero impact in EET status. The estimates are equivalent to a Cox Index of -0.06 and -0.16, respectively. The point estimates and uncertainty are broadly similar with and without double robustness (see Sensitivity analysis section).

As a sensitivity check, we run the analysis on EET status in Wave 2 with a subset of the sample consisting of young people i) with data in both waves of admin data collection and ii) aged 16 to 18. This allowed us to have an “extended” specification that conditioned the estimate on the EET status in Wave 1. Our findings indicate a positive impact on EET status on Wave 2 amongst care leavers aged 16 to 18 with similar EET status in Wave 1 (see results in Appendix O).

As part of the sensitivity analysis, we used the Total Difficulties Score from the Strengths and Difficulties Questionnaire (SDQ) provided by the LA as a proxy for a pre-intervention baseline measure (see detail in Appendix O). The results are compatible with a small-to-moderate positive effect in Wave 1, and with a moderate-to-large negative effect in Wave 2.

In addition, we replicated the analysis with a reduced sample excluding the LAs that, according to the cost templates, had spent less than 50% of the Staying Close funding. The results are presented in Appendix O, and suggest a worse EET outcome in the 13 Staying Close areas that reported spending at least 50% of the funding (Cox Index -0.24 in wave 1, and -0.32 in wave 2; CIs compatible with a small-to-moderate negative impact).

Accommodation suitability

This is a binary outcome reflecting whether, at the time of data collection, the young person was in accommodation deemed suitable based on guidance for the Children Looked After statistics. The LAs were pointed to DfE’s guidance on how to choose suitability status. In general, “accommodation is to be regarded as suitable if it provides safe, secure and affordable provision for young people. Accommodation that clearly exposes the person to risk of harm or social exclusion by reason of its location or other factors should be coded as ‘unsuitable.’” (DfE 2024b, p105).

Table 20. Accommodation suitability outcome summary

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
Accommodation deemed suitable (Wave 1)	3385 (732)	95.1	1448 (206)	839.5	93.8	3.4 [1.0, 5.8]
Accommodation deemed suitable (Wave 2)	4506 (572)	94.1	2197 (134)	655.3	92.6	14.9 [10.2, 19.5]

Note: n = Sample size; miss = Missing; Wt n = Weighted sample size; % point diff = Percentage point difference

The findings indicate a moderate positive impact in wave 1 (Cox Index 0.34) and a large positive impact in wave 2 (Cox Index 0.87) in accommodation suitability. The 95% CIs are compatible with a moderate to large positive impact. This suggests that care leavers in Staying Close areas were more likely to reside in accommodation deemed suitable by the LA, compared to those in comparison areas.

We found that the estimates of accommodation suitability are sensitive to the choice of covariates in the outcome regression model. For comparison, we report weighted entropy balancing estimators from models without covariates in the regression in Appendix O.

In Wave 2, the doubly-robust estimate – which includes the same variables used for entropy balancing as covariates – suggests that being in Staying Close areas increases the predicted probability of being in suitable accommodation by 15 percentage points. However, this effect disappears when the covariates are excluded from the model. With further exploration we identified that the covariate that is driving this effect is the area-level percentage of care leavers in suitable accommodation. Notably, this covariate is also correlated with the outcome at wave 2. This suggests that part of the observed effect may be attributable to underlying differences in accommodation suitability across Staying Close areas, rather than the programme itself. In a regression that excludes this covariate, young people in Staying Close areas appear 2.8 percentage points more likely to be in suitable accommodation.

The findings from additional sensitivity analyses (conditioning on SDQ and subsetting the sample based on expenditure) are consistent in direction and larger in magnitude, suggesting positive impact on accommodation suitability. Conversely, the 95% CIs from the linked 16-to-18-year-old sample cross zero and are compatible with a small negative effect to a moderate positive effect. All the results are presented in Appendix O.

Accommodation stability

This outcome measure is the number of accommodation moves in the past year, ranging from zero to 15. Given the high proportion of zeros in the outcome (57% in wave 1 and 47% in wave 2), we opted for a quasi-Poisson specification. This model handles overdispersion, where the variance is greater than predicted by the Poisson model. We also found evidence of zero-inflation and explore the sensitivity of the model to a Hurdle specification in the Sensitivity analysis appendix.

Table 21. Accommodation stability outcome summary

Outcome	Unadjusted				Entropy balanced		
	Staying Close		Comparison		M (SD)	Est [95% CI]	Glass's δ [95% CI]
n (miss)	M (SD)	n (miss)	Wt n				
Number of accommodation moves (Wave 1)	2104 (2013)	0.81 (1.25)	1230 (424)	279.4	0.64 (1.10)	-0.25 [-0.47, -0.02]	-0.22 [-0.43, -0.02]
Number of accommodation moves (Wave 2)	2404 (2674)	0.96 (1.35)	1472 (859)	489.9	0.84 (1.07)	-0.05 [-0.25, 0.15]	-0.05 [-0.23, 0.14]

Note: n = Sample size; miss = Missing; Wt n = Weighted sample size; M = Mean; SD = Standard Deviation; Est = Simple estimate in original measure units

The doubly robust estimator indicates a small to moderate positive effect in accommodation stability in Wave 1, as care leavers in Staying Close areas experienced fewer accommodation moves in the past 12 months on average compared to their peers in comparison areas. The 95% CIs at Wave 2 crosses zero and are compatible with a small negative to negligible positive impact.

The findings from the sensitivity analysis, presented in Appendix O, are largely in line with the results from the main analysis.

Ancillary outcomes

We conducted additional analyses on three ancillary survey outcomes: "Rely," "Lonely," and "EET." At Wave 2, Staying Close was associated with greater feelings of loneliness and less reliance on others, indicating worse outcomes. Additionally, Staying Close was associated with a negative effect on EET outcomes in both waves. Detailed results are provided in Appendix N.

Implementation and process evaluation

Programme set-up and delivery

This section explores how the Staying Close programme was set up and delivered across local areas, highlighting key activities, adaptations, and early learning. The following research questions are answered in this section:

- What interventions are planned across local funded areas?
- What processes were followed in the set-up and programme delivery phases?
- What was delivered? And what, if any, adaptations were made?
- What learnings have been gathered in each phase?
- How does Staying Close compare to previous support to care leavers?

Summary of findings

While LA staff agreed that Staying Close's core focus was aimed at providing suitable accommodation for young people, significant challenges were encountered in delivering this aspect by most LAs, including severe delays in building projects, problems around recruiting managers and staff for trainer flats and the general shortage of housing stock. However, despite this, most Staying Close PAs successfully delivered 'wrap-around support' to young people, taking a leading role in delivering wellbeing support, independent living skills, EET and strengthening social connectedness. According to young people, the programme's greatest perceived outcomes were seen in improving their sense of wellbeing and social connectedness—key outcomes in the programme's theory of change.

A trusting relationship with their Staying Close Personal Advisor is the key mechanism of change at the heart of the programme, with progress in other support areas stemming from this strong bond. The individualised nature of the support, which is seen as flexible and responsive, is frequently highlighted as one of the programme's key strengths by programme staff and beneficiaries. In contrast to the wider national context, where Personal Advisors often manage high caseloads (20+), Staying Close prioritises building strong, personalised relationships by keeping PA caseloads smaller (6-7 maximum). This approach allows for more dedicated, individualised support, significantly strengthening the connections between PAs and young people, and enhancing their overall experience.

Further information is included as case studies in Appendix B.

As noted in the introduction, the Staying Close programme is intentionally non-manualised and designed to be flexible and responsive to the specific needs and circumstances of care-experienced young people in each local area. As a result, there is considerable variation in how the programme is delivered, and no single, uniform model of intervention is in place across areas. This variability means we are unable to draw conclusions about fidelity— that is, how closely delivery aligns with an 'ideal' or standardised version of the intervention. Instead, this section compares the activities listed in LAs' bid plans (see annex J) with what was actually delivered in practice (outlined by interviews and triangulated with survey findings), focusing on commonalities, variations and implications for fidelity.

Interventions planned across LAs

According to our bid review exercise, local authorities proposed a range of activities within five key thematic area:

Core offer:

- **Accommodation:** Authorities proposed developing a variety of accommodation options for young people, including trainer flats to support smoother transitions to independence. Bid plans also included tailored tenancy support and strategic collaboration with housing providers to maintain proximity to previous placements and ensure continuity of care relationships.

Wrap-around support:

- **Wellbeing:** To enhance wellbeing support, many local authorities focused on embedding psychologists and multidisciplinary teams within accommodation settings and investing in internal workforce training to embed trauma-informed and psychologically informed care.
- **Independent living skills:** To build young people's readiness for independent living, authorities proposed structured life skills programmes delivered by specialist staff. These offers were to be further enhanced through digital tools, including online tutorials and multi-agency live chat support, embedded within familiar environments to promote consistent and accessible learning.
- **Education, Employment and Training (EET):** To address barriers to EET for young people, local authorities planned to partner with education providers and employers to create bespoke learning opportunities. These included accredited courses, taster work experiences, and practical skills development in areas such as ICT, coding, and creative industries.

Foundational culture and practice:

- **Social connectedness:** To strengthen social connectedness, local authorities focused on enabling access to welcoming, drop-in hub spaces; commissioning the Lifelong Links programme to help young people reconnect with family members; and providing outreach support. A relationship-based approach to strengthening social connectedness was central in bid plans, with trusted staff offering consistent support throughout each young person's transition.

Please see 'Bid review mapping' in the annexes for a detailed breakdown of the Staying Close activities undertaken by the 6 LAs.

Programme set-up

During interviews, LA staff commented that many of the bids they submitted were overly optimistic, particularly in underestimating the challenges involved in key set-up tasks, such as securing suitable accommodation for young people and recruiting specialist staff, such as psychologists and clinical nurse specialists, to provide the 'wrap-around' care needed for young people. Factors such as workforce shortages, housing availability, broader policy and funding landscapes affected the extent to which LAs could implement the programme as they set out in their bids. LA staff reflected that the bids would have benefited from being more detailed, with clearer descriptions of each element of delivery. This would have allowed teams to assess the feasibility of their plans, leading to a smoother and more efficient implementation process.

"For future reference, structure the bid form differently to be more realistically challenging for us applying. Have you got the right job description in place? Have you got the buildings lined up? Maybe the top 10 points in the bid document – have you got them lined up for delivery? Especially when this is an innovation, more detail is needed."
(Head of Service)

Nevertheless, delays were used as an opportunity to strengthen other areas of programme support, such as wellbeing support and life skills development programmes. In addition, launch events and opportunities to share learning with other LAs were viewed as valuable components of the programme set-up process by LAs. LA staff and young people reported that the launch events (e.g. Pizza party in Darlington) were effective in bringing young people and their Staying Close Personal Advisors together, helping to establish early rapport and strengthen relationships.

In addition, knowledge-sharing between neighbouring local authorities played a valuable role in the early implementation stages. Authorities that were further along in implementation offered practical insights to others, and regular 'round table' meetings created a supportive forum for ongoing collaboration, learning, and problem-solving as the programme developed. For example, Darlington met with South Tyneside whilst they were waiting for their Staying Close funding to be released, and learned that they faced severe recruitment challenges in their programme set-up. This allowed them to anticipate and mitigate similar issues, so they focused on finalising their job descriptions, supporting young people in preparing references, and completing police checks in advance of receiving their funding. This preparation enabled them to move quickly once funding was received, and they were able to recruit staff more efficiently than anticipated.

Programme implementation

While most LAs faced challenges in delivering the core accommodation element of the programme, they performed well in delivering broader 'wrap-around' support to young people. Personal Advisors play a central role in the success of the programme, often stepping in to deliver all aspects of wrap-around support- from promoting young people's wellbeing and social connectedness to supporting their engagement in EET and development of independent living skills. These areas of support are closely interconnected and collectively contribute to the strong, trusting relationships formed between PAs and young people.

Accommodation (core-offer)

During the planning and set-up phase, all case study LAs shared a common vision for the Staying Close programme, with a clear focus on accommodation at its core. However, as the programme progressed, there was growing recognition of the gap between the ambitious goals outlined in the Staying Close bids and the practical challenges of implementation. Despite being a core element of the programme, most LAs struggled to place young people in suitable accommodation due to several barriers. These included the general shortage of housing stock, a high number of young people placed out of area due to this scarcity (Wolverhampton), severe delays in building projects (Devon and St Helens), unexpected investment in existing accommodations to make them fit for purpose (Devon) and wide-spread problems around recruiting managers and staff for trainer flats. In some cases, such as in Devon, shared accommodation led to interpersonal conflicts, and the lack of available next-step housing options made the transition more difficult.

"Young people are scared to go to a new house when they've got settled in a place. They're worried about what the outcome will be. It's hard for young people to be moved about - maybe to a new house and area they've never been to before, with new staff and a place they've never set foot in before. It's hard."

(Staying Close support recipient)

A key learning from this for LA staff was the importance of having a well-defined and proactive housing plan, along with careful matching of housemates to avoid mismatched personalities and to ensure a more harmonious living environment.

"A bit more homework at the referral stage [should have taken place] because it turns out two of our YP knew each other previously and didn't like each other. As soon as they walked in and saw each other, that's when the fun started. But we weren't informed. Ask the right questions."

(Team Manager)

However, Darlington and Wolverhampton have made good progress in delivering their Staying Close accommodation offers, with models largely aligned to their original plans. Each LA successfully rolled out a range of accommodation options for their young people, including trainer/taster flats, semi-independent supported living, and pathways to independent housing. Notably, Darlington has seen young people successfully transition into their own tenancies, which is a positive indication of long-term outcomes. In addition, young people highlighted some examples of the programme effectively helping them to maintain their homes through early contact with PAs while still in residential care, and assisting with practical matters like moving in, unpacking, and managing finances (e.g. in Enfield and Nottingham). However, shared challenges persist- most significantly, the national shortage of housing stock, which has created bottlenecks in taster/trainer flats. This limits the ability to move new young people into the programme and may impact its overall reach.

Wrap-around support

Wellbeing

Many of the young people referred to the Staying Close programme are in crisis, dealing with mental health issues or trauma (e.g. Enfield), substance use (e.g. Nottinghamshire), or physical health problems from unsuitable temporary housing (e.g. Devon). As part of delivering 'wrap-around' wellbeing support to young people, most LAs planned to expand their existing teams by hiring specialist support (e.g. Psychologist/ Art Therapists/ Clinical nurse specialists). However, as previously mentioned, most LAs struggled initially to recruit specialist staff into their teams, and these recruitment gaps, particularly in clinical roles, sometimes hindered the ability to offer timely and specialized mental health support. Staying Close PAs often stepped in to provide additional emotional and wellbeing support, and maintained this level of support even when specialist staff were eventually hired.

Staying Close PAs, with their lower caseloads (6-7 compared to 20+ for non-Staying Close PAs), can spend more one-on-one time with each young person, accompanying them to GP or dentist appointments, assisting with job applications, and discussing their worries and concerns. This helps build supportive relationships that make the young people feel safe and settled. PA-led activities like bike rides and cinema outings played a role in reducing isolation and supporting mental health, as well as supporting overall wellbeing.

Indeed, young people reported that the support provided through their Staying Close PAs had exceeded their expectations, with PAs often going above and beyond their formal role to offer consistent, personalised and meaningful support.

"I've received a lot of help in the past and I wasn't expecting much. It's [Staying Close support has] been a lot more helpful than any other help I've had."

(Staying Close support recipient)

A trusting relationship with their Staying Close Personal Advisor is at the heart of the programme, with progress in other support areas stemming from this strong bond. The relationships formed between young people and their PAs are frequently described as trustworthy, non-authoritative, and genuinely caring, with many young people comparing their PAs to older siblings. The individualised nature of the support, which is seen as flexible and responsive, is frequently highlighted as one of the programme's key strengths by programme staff and beneficiaries.

"When you're with [PA], you don't feel like it's someone with authority over you – she makes it clear she's on the same level and has made mistakes too, so you can really relate to her" (Staying Close support recipient)

"They [PAs] make you feel like you are welcomed into the world, basically, and you can do stuff, and you can be yourself as well...they're really good"

(Staying Close support recipient)

Independent living skills

Most LAs delivered strong life skills programmes that closely aligned with what they set out in their original bids, effectively supporting young people to develop the skills needed for independent living. For the young people that were successfully placed in suitable accommodation, they said that Staying Close's focus on practical skills such as budgeting and meal planning was essential in supporting young people's transition to independent living. Hands-on training and accessible life skills materials were crucial for maintaining accommodation, as seen in St Helens and Nottinghamshire, where mini or audio guides were developed in collaboration with care leavers.

"We developed this 'all singing, all dancing' life skills package. Young people were quite clear in telling us - treat us as you would treat your own child - and we would never say to our own children, here is some big life skills book you've got to do now just to show that you're ready. So, what we've done instead is produce mini life skills guides that can be printed out. PAs can go through them with young people that can come into our care hub if they want to."

(Futures Team Leader)

"I've lived independently for a while, but I will say, the specifics of things such as bills was never actually explained to me. So, I had an idea of everyone has their electric bill but actually setting those up and actually doing them and contacting the people, making sure everything's set up and payments are all done – my mentor has helped me a lot."

(Staying Close support recipient)

A key learning was that an individual approach to learning life skills was more effective than group sessions, with most young people preferring one-on-one time with their PA over small group activities. Some local authorities, like Darlington, initially used group skills learning but later switched to an individual approach. In addition, asylum seeking young people facing language barriers and young people with low learning levels responded better to activities demonstrated by their PA rather than written materials, as in Wolverhampton.

Education, employment, and training (EET)

The primary aim of EET support is to help young people move from being NEET (Not in Education, Employment or Training) to actively engaging in EET opportunities, while also building their confidence and skills. Support is tailored to each young person's aspirations and includes exploring employment options, assisting with job searches, CV writing, and applications, as well as identifying relevant training opportunities to enhance their skills.

The effectiveness of the implementation of EET support was mixed across LAs. EET services were successfully delivered in line with bids in some local authorities (St Helens and Devon), while others (Darlington and Wolverhampton) encountered challenges that hindered effective implementation. In Darlington the EET service was decommissioned and in Wolverhampton, the EET advisor worked part-time, resulting in a shortage of appointments for the large cohort. In both cases, Staying Close PAs attempted to plug the gap. Staying Close PAs and wellbeing practitioners/social prescribers frequently help young people with their EET aspirations. All areas of support overlap and helping care leavers with their applications and taking them to interviews is all part of the close relationship shared between Staying Close PAs and young people.

"It could be that I'm helping a young person access the army because that's something they've always wanted to do. So, sitting down with them, filling in the forms, making some phone calls - those things have really, really helped the young person. They're practical things but when a young person can see that you're willing to do something a little bit different and willing to help, it's important."

(Staying Close Wellbeing Practitioner/Social Prescriber)

The programme also faced barriers in supporting young people with language or learning challenges, particularly for UASC. Again, the key learning was that EET support must be individualised to cater to diverse needs and circumstances, with enough staffing and resources to ensure consistent support for all young people. Tailoring EET support to each young person's aspirations was a successful strategy in St Helens and Devon, which benefitted from established EET advisors within their LAs. The team provided young people with personalised plans that supported young people through job applications and interviews, with some local business partnerships offering them priority interview opportunities. Tailoring services is a key principle in Staying Close, so it is important it is shown in practice.

"I wouldn't have done it without the hub and the Futures team as I wouldn't know what to write on my CV."

(Staying Close support recipient)

Foundational culture and practice

Social connectedness

Building wider social connections was another important element of the Staying Close programme, and one that most local authorities successfully delivered- largely due to the support that PAs give young people. Due to the individualistic nature of the programme, social connectedness can look different for each young person. While the focus for some may be to engage in fun activities with their PAs, for others it may be to extend social networks with their peers or to rebuild personal connections.

PAs played a crucial role in promoting community integration by encouraging young people to engage in local activities like going to the gym, joining local sports clubs or boxing at the hub in St Helens – each also offering valuable health benefits. They encouraged young people to engage in community activities and offered emotional support, particularly through peer relationships and group workshops. One young person highlighted the importance of PAs continuing to encourage participation in activities, even if young people initially decline. Another young person described how the support they had received had made them want to make friends while another discussed how their PA was helping to get them out of their house.

"[PA] is actively working on helping me get out of the house – going on walks, going for a coffee, speaking to me about my family, my college, my social life, my workplace environment. It's been really good"

(SC support recipient)

Integration is especially important for refugees in areas with a high proportion of UASC, such as St Helens, where the lack of ethnic diversity may pose additional challenges. St Helens has had success in promoting community integration for male unaccompanied asylum-seeking children and has also created a thriving baby group to help young mums overcome isolation. However, not all young people felt comfortable participating in these activities, particularly those placed in isolated areas.

Re-establishing links with family or previous carers is important but must be timed carefully as can be seen in the case of the 'Lifelong Links' programme in Darlington, where young people were initially too preoccupied with moving into new accommodation to engage with the programme. Additionally, re-establishing these relationships can risk rejection and involve safeguarding issues or enquiries about payment from previous carers (e.g., Wolverhampton). Key learnings included the importance of carefully timing the introduction of additional support networks and ensuring young people have access to urban areas with good public transport links to prevent isolation and facilitate community integration.

Young people's reported experiences of support

In addition to the evidence from case study areas, we also drew on survey responses from young people across all Staying Close and comparison areas to understand the type of support they reported receiving.

Table 43 below illustrates that young people in treatment areas receiving Staying Close support accessed additional support compared to those in comparison areas, across several activities, which align with our qualitative findings:

- Arranging contact with family members or siblings (social connectedness) – (9 percentage points higher in Staying Close areas in Wave 1, and 4 points higher at Wave 2)
- Attending therapy (including music therapy) (wellbeing) – (5 points higher in Staying Close areas at Wave 1)
- Help applying for benefits (independent living skills) – (11 points higher in Staying Close areas at Wave 1)
- Help developing practical skills (independent living skills) – (19 points higher in Staying Close areas in Wave 1, and 10 points higher at Wave 2)
- Help finding a work placement or apprenticeship (EET) – (7 points higher in Staying Close areas in Wave 1, and 3 points higher at Wave 2)

- Help with job applications (EET) – (12 points higher in Staying Close areas in Wave 1, and 8 points higher at Wave 2)

However, young people in comparison areas scored higher in the following areas:

- Help with college or university applications (EET) – (1 percentage point higher in comparison areas in both waves)
- Meeting with your Personal Advisor in person (social connectedness) (5 points higher in Wave 2)
- Phone calls or text messages with your PA (social connectedness) – (4 points higher in comparison areas in Wave 1 and 3 percentage points higher in Wave 2)

Additionally, taking the average number of reported activities selected by respondents, there was not much difference between Staying Close and comparison areas. Those in Staying Close areas reported an average of 3 activities, and those in comparison areas reported an average of 2.7.

As a result, it could be plausible that the qualitative findings from the IPE capture genuine stories of perceived successes, but these may not be widespread enough to produce positive average effects in the impact evaluation.

Table 22. 'Quantity' of Staying Close-type support from surveys

	Wave	Staying Close		Comparison		% point diff
		Total n	%	Total n	%	
Arranging contact with family members or siblings	1	209	21	147	12	9
	2	414	16	181	12	4
Attending therapy (including music or art therapy)	1	209	18	147	13	5
	2	414	12	181	12	0
Help applying for benefits	1	209	45	147	34	11
	2	414	40	181	40	0

	Wave	Staying Close		Comparison		% point diff
		Total n	%	Total n	%	
Help developing practical skills	1	209	39	147	20	19
	2	414	29	181	19	10
Help finding a work placement or apprenticeship	1	209	24	147	17	7
	2	414	20	181	17	3
Help with college or university applications	1	209	24	147	25	-1
	2	414	24	181	25	-1
Help with job applications	1	209	32	147	20	12
	2	414	29	181	21	8
Meeting your personal advisor in person	1	209	62	147	55	7
	2	414	55	181	60	-5
Phone calls or text messages with your personal advisor	1	209	62	147	66	-4
	2	414	61	181	64	-3

Barriers and enablers to programme implementation and engagement

This section focuses on the barriers and enablers to programme implementation and engagement. The following research questions are answered in this section:

- What were the barriers and enablers in each phase?
- What are the barriers and enablers to engagement in young people?
- What learnings have been gathered in each phase?

Summary of findings

Several factors contributed to the engagement of young people in the Staying Close programme. Most notably:

- The intensive, personalised support provided by PAs (due to their smaller caseloads) is a key mechanism of change which contributes to young people's sense of wellbeing and social connectedness.
- Offering incentives- such as a free coffee or meal with a PA- was a common and highly effective strategy for encouraging young people to engage with the PA and therefore the programme. These small rewards acted as a key mechanism of change, helping to overcome initial barriers to participation, particularly among those who were isolated or hesitant to take part in group activities.

The barriers to engagement include:

- A lack of clarity among staff regarding the division of roles and responsibilities within the Staying Close model,
- A range of external factors such as workforce shortages, limited housing availability, and broader policy and funding constraints for delivering public services.

Despite facing various challenges, LAs have demonstrated resilience and adaptability, often creating innovative solutions to address certain challenges and meet the evolving needs of young people.

Enablers

Several factors contributed to the engagement of young people in the Staying Close programme:

1. Smaller caseloads and persistent, trust-building support from PAs: The Staying Close model reduces pressure on workers by allowing PAs to focus on smaller caseloads (typically no more than 6-7 young people), enabling a more personalised and hands-on approach. This intensive support provided by PAs is a key mechanism of change and improves outcomes for young people, particularly those with complex needs, including mental health challenges, trauma, or difficulties navigating adult life. The one-on-one time with a trusted adult provides young people with a sense of security, stability, and meaningful engagement. Moreover, the consistency and persistence of PAs were key to maintaining engagement, especially when young people initially resisted support. Their PAs' determination to never give up- returning to offer help even during tough periods was crucial in fostering feelings of being valued and respected. This combination of personalised support and trust-building was instrumental in ensuring ongoing engagement and supporting positive outcomes (particularly feelings of wellbeing and social connectedness) for young people.
2. Incentives for young people to engage in the programme: Simple rewards offered by Staying Close PAs such as offering to go out for a coffee or meals in restaurants or vouchers for specific engagement, were common and very effective in motivating young people to participate. These rewards were another key mechanism of change which helped break down barriers to engagement, particularly with those who were isolated or hesitant to join group activities. Fun group activities, such as go-karting or laser tag, were particularly popular, offering young people the chance to bond with their PAs and with one another in a fun and social setting.
3. Positive, supportive relationships among LA staff, partners and providers: Internally, strong backing from senior management, Staying Close team members and partner organisations and providers is a key enabler. This support is especially important when facing obstacles (such as struggling to recruit staff to deliver Staying Close) and when progress slows, helping the team stay motivated and maintain morale.

"It's been a bumpy old ride in some respects. But there is real goodwill and motivation to get this over the line. In some places, frustration would have meant people walking away, but not here. From our lead member through to the guys working operationally, absolutely everybody's committed to it. The team won't accept anything other than really high-quality provision."

(Head of Service)

4. Giving young people a voice: Allowing young people to actively participate in

decisions about the programme, such as helping to select Staying Close staff by joining interview panels (e.g. Nottinghamshire), was a powerful motivator for engagement. Feeling listened to and having a say in shaping future services increased young people's investment in the programme and boosted their self-esteem and confidence.

Wellbeing case study 1

Young Person: Daniel* is an 18 year old NEET trans man with several mental health issues including ADHD, OCD, and anxiety/depression.

Situation: He faced a number of difficult life circumstances and had begun using drugs and alcohol to cope. Frequent disruptions to his living situation- five accommodation moves due to license breaches- added to the instability. He was also estranged from his mother, and the breakdown of a close relationship triggered significant mental health crisis, during which he began to self-harm and experienced suicidal thoughts.

Intervention: The Staying Close team responded promptly, providing mental health support and referrals to appropriate services. The Staying Close Co-production Officer built a relationship with Daniel over time which resulted in a significant improvement in his mental health and overall wellbeing. He was helped to reconnect with his mother and re-establish his relationship with his partner. In addition, he was encouraged by his PA to engage in his community and attend various workshops/events. His confidence grew, and he became actively involved in co-production work- taking part in interview panels for his LA and helping to produce posters and other materials for the Staying Close team, which he distributed around his supported accommodation. These steps reflected a significant improvement in both Daniel's mental health and his overall wellbeing.

*Name changed for privacy

"We just offer to take them out. We say, 'where do you want to go? We'll take you for a meal.' And that can sometimes break barriers ... The biggest thing is food – everyone loves food!"

(Staying Close Coordinator)

5. Regular social events for young people: Regular social gatherings encourage strong, supportive relationships between Staying Close PAs and young people. It was seen as particularly useful for the Staying Close cohort to build relationships with all the PAs on the Staying Close team, so that weekends and annual leave could be covered seamlessly without causing undue stress on young people when their own PA wasn't available.
6. Sharing lessons among LAs: Neighbouring LAs that were more advanced in delivering Staying Close provided valuable insights to others during the initial set-up phase. This early support, combined with regular 'round table' meetings for ongoing guidance and advice, has proven to be beneficial as the programme continues to progress.

"There was a round table meeting at the beginning attended by [LA]. We met with that team manager to share key lessons and enablers which was really helpful. Because there are so many different versions and models of Staying Close, and every LA is doing it differently, we can all learn from each other."

(Advanced Practitioner, Staying Close Team)

Barriers

Despite the general positivity surrounding the Staying Close programme, some concerns and challenges were voiced by different stakeholder groups which could affect how effectively it meets its intended outcomes for young people.

1. Lack of awareness and understanding of the programme: in some local authorities, there is a lack of clarity and awareness regarding the programme's specifics, including the eligibility criteria for referrals of young people to Staying Close and the scope and remit of the Staying Close PA's role. Local authority teams and partner organisations have expressed confusion about these areas, which they acknowledged led to delays or missed opportunities for referrals at times. There is also a notable concern about role overlap. Some stakeholders, including social workers and PAs, have raised issues about the scope of responsibilities assigned to Staying Close PAs. In some cases, PAs are expected to take on tasks outside their remit, such as managing housing or welfare claims, which leads to confusion and concerns about accountability.
2. In addition, some care leavers found the concept of having two PAs (one as part of Staying Close and another as part of their regular care plan) confusing and unnecessary. This perceived redundancy led to disengagement. A suggestion was made to reframe the Staying Close PA role with a different title, such as 'Staying Close Mentor' to clarify the additional, more intensive support being offered.

3. Lack of access to trauma-informed mental health support services: As previously mentioned, many young people referred to Staying Close are dealing with mental health challenges and past trauma, which sometimes led to chaotic behaviour, substance use, or avoidance of services. In addition, young people often fall through the cracks of adult mental health services once they turn 18. Many have been discharged from Child and Adolescent Mental Health Services (CAMHS) due to missed appointments and, in some cases, have never received mental health support as children. As a result, they struggle to navigate the adult mental health system and find themselves stuck without the necessary support. In some LAs, recruitment delays have created gaps in integrating trauma-informed mental health services within Staying Close, forcing teams to rely on signposting to other support services. For example, in Wolverhampton, staff struggled to recruit a psychologist and art therapist, eventually hiring a nurse practitioner but later than expected. While the nurse practitioner could only signpost to services, they were still effective in providing support within the limited wellbeing offer.
4. Young people's mistrust of professionals and desire for independence: Another barrier to engagement for young people in Staying Close was the mistrust that many young care leavers had towards professionals, services, and adults in general. Young people explained that this mistrust was exacerbated by previous negative experiences and a desire to achieve independence at 18. Many young people were resistant to engaging with another programme and another set of adults, fearing further disappointment or abandonment. For these individuals, the idea of leaving care and managing on their own felt more appealing than accepting help. This is where the persistence of Personal Advisors proved crucial. Their consistent, supportive approach, even in the face of rejection by young people, helped build trust and encouraged young people to engage with the programme, gradually overcoming their fears.
5. Cultural and language barriers: For unaccompanied asylum-seeking children (UASC), language differences and cultural barriers posed additional challenges to engagement, as recounted by staff in Darlington, Wolverhampton and St Helens. Despite efforts to provide translated materials and interpreters, the lack of effective communication often led to misunderstandings or disengagement. A more demonstrative approach (as seen in St Helens via a targeted programme helping to integrate UASC) proved to be more successful in engaging these young people. In St Helens, a group has been commissioned specifically to help with community integration for young male asylum seekers. Telling stories and understanding journeys helps young refugees to be accepted and increases a sense of social inclusion. The project has been highly successful in enhancing the Staying Close offer to young asylum seekers who may be struggling with specific anxieties. Targeted therapeutic work on resourcefulness, tackling stigma and working through trauma has made an appreciable difference amongst the UASC community.

“We work exclusively with the male asylum-seeking refugee community. We wanted to create a project that was about combining the two communities together - those who have lived here for long time predominantly haven't had experiences of diversity or an understanding of that refugee journey ... We're seeing a lot more of the refugee community coming into the area. So, how do we support that integration, particularly in this borough where there were concerns around a lot of hate crime.”

(External Provider commissioned to work with male UASC)

Context: External factors influencing implementation

In addition, several external factors hindered the successful delivery of Staying Close:

- 1. National shortage of housing stock and service availability:** Several external factors outside of Staying Close prevent young people from being placed in suitable accommodation, including a general shortage of housing stock, a high number of young people placed out of area (Wolverhampton), delays in building developments (Devon, St Helens), unexpected investment in existing accommodations to make them fit for purpose (Devon) and problems around recruiting managers and staff for trainer flats. Crucially, the challenge is not just about the overall supply of housing, but also the shape of that supply- specifically, the lack of affordable and appropriate housing that young people can realistically access. Many young people leaving care have very low incomes and are reliant on social security entitlements, such as Local Housing Allowance (LHA), which often do not cover market rents. This makes it difficult for them to compete effectively for housing and further limits available options
- 2. Recruitment issues in social care market:** As previously mentioned, recruitment of staff to deliver Staying Close was a key barrier faced by councils in setting up and delivering Staying Close. The poor quality of applicants was particularly remarked upon and was thought to be reflective of the national shortage of applicants in the social care market. The job ads attracted unsuitable applicants seeking an easy role, but Staying Close teams and care leavers on interview panels rejected them, favouring older candidates with family experience who demonstrated warmth or passionate care-experienced young people close in age to care leavers. Delays in recruitment led to gaps in some teams, such as the absence of a psychologist in Wolverhampton and slow recruitment of resilience workers in Nottingham. These recruitment issues limit the support available to young people and have impacts on the effectiveness of the programme in meeting their needs and often require PAs to take on additional responsibilities to compensate.

“It’s been noticeable that the quality of applicants has been quite disappointing. People just apply for every single job on the council website. It’s frustrating because I work with a wonderful team of committed people and we’re building this new team, I want the same kind of people. The unforeseen consequence is people thinking, ‘that sounds easy’, but it’s not easy. You’re not just dropping somebody off at college and then watching daytime TV. It’s trauma informed and understanding journeys and histories and how that impacts on the future and challenging yourself.”

(Futures Team Manager)

Nevertheless, local authorities sought to overcome recruitment challenges by exploring practical solutions during the setup and planning stage:

- Recruiting staff with the right values and attitudes but lacking experience: While this approach offers potential, it has its drawbacks, including long training and induction process with a steep learning curve and no guaranteed success.
- Sourcing staff internally from within the LA: This approach has its advantages, as internal staff are already familiar with the often-lengthy local decision-making processes.
- Offering permanent contracts: In some cases, NHS partners agreed to recruit for specialist roles on permanent contracts, rather than short-term or two-year contracts, despite the uncertainty of continued DfE funding.
- Starting the contract setup process early: Recognising that setting up employment contracts takes time and causes delays, LAs made efforts to initiate this process as early as possible to avoid further setbacks in recruitment.
- LA guarantor scheme: While this scheme was initially discussed with enthusiasm by one LA (Wolverhampton) as a means of helping young people access private tenancies, it was ultimately investigated and rejected during the delivery stage. The prohibitive qualifying criteria meant that most young people did not meet the necessary requirements.

3. Lack of awareness & understanding of the Staying Close model among the wider sector: Since Staying Close is a relatively new programme, especially in phase 3 LAs, awareness and understanding among stakeholders (social care teams and young people) remains limited. Teams involved in Staying Close highlighted the importance of actively promoting the programme to young people who could benefit from its support and partners within the LA and wider networks. Clearly communicating the unique aspects of the programme (such as more individualised and dedicated support offered by PAs) was crucial to fostering greater engagement, commitment and assistance from others. Staying Close teams are unsure where responsibility for this promotion lies, but senior management within the LA has been suggested as a starting point. Other members of the Staying Close teams, especially those in co-production roles have taken on the task of publicising the programme and bringing stakeholders together.

“I have regular meetings and forums with all of our support accommodation providers and social care colleagues, I’m almost like the head of marketing in that I’m in the room with the right people making the noise. We also developed a service guide and posters in services. We do drop-ins and move around so that more young people are known to my team than we currently have referrals open for and that’s exactly what I wanted.”

(Staying Close Team Manager)

4. Geographical challenges: Young people living in rural areas or who were placed out of the area faced significant challenges in engaging with the programme. The lack of transportation options and the geographical distance from family or social networks led to feelings of isolation, making it harder to engage with Staying Close services. To mitigate these challenges, LAs like Wolverhampton focused on organizing larger events that could accommodate a greater number of young people, including those placed out of the area. For example, they organized a conference where young people and their PAs could share experiences and learn from each other. Additionally, regular fun events, such as laser tag and go-karting, were planned to cater to a larger cohort and foster engagement.

Perceived outcomes

This section explores the perceived outcomes of the Staying Close programme for young people.

The following research questions are answered in this section:

- How does the programme meet the needs of the stakeholders (delivery teams and programme recipients)?
- What effects did the programme have on young people, including housing outcomes?
- How does Staying Close compare to previous support to care leavers?

Summary of findings

All stakeholders qualitatively interviewed as part of the evaluation- including local authority staff, delivery partners, and young people themselves- had overwhelmingly positive things to say about the impact of the Staying Close programme on young people. In particular, young people consistently praised their PAs for providing invaluable, wrap-around support, especially in areas such as employment and training, mental health, and the development of essential life skills.

Across all stakeholder groups interviewed, there is broad recognition of the Staying Close programme's positive impact on young people, particularly in its ability to offer personalized, compassionate support to young people transitioning out of care. Young people themselves express a high level of satisfaction with the programme, frequently praising their Personal Advisers for the tailored support they receive.

“Even though it's her job, she actually cares, which is something, if you're a foster kid, you pick up on - if they're just trying to clock in, clock out, which is the most common case. I can talk to her and she's not looking at her watch going - your time's up. She's done a lot for me and I look forward to seeing her all the time as well. She's really fun.”
(SC support recipient)

Young people outlined that the support which they had found most useful to be the tailored, 'wrap-around' support provided to them by their PAs - especially employment and training, mental health support, life skills support. In some cases, the young people were focusing on one priority at a time, while others were focusing on multiple priorities simultaneously.

“The biggest positive impact would be that I’m myself again, I’m a lot more happier, I am lot more wiser and healthier”

(SC support recipient)

Accommodation providers, including organisations like the YMCA, also express positive feedback of Staying Close, viewing the programme as a vital support system for vulnerable young people who may otherwise face difficult transitions. In particular, they appreciate the programme’s flexibility in accommodating young people with specific needs, such as asylum-seeking minors. Specialist health services, such as drug and alcohol teams, also express appreciation for the safety net Staying Close provides, ensuring that young people do not slip through the cracks into precarious situations.

Indeed, many of the young people we interviewed were in crisis situations and felt a sense of desperation. They believed they had no one they could ask for help and often felt close to “giving up.”

Wellbeing case study 2

Young person: Ali*, a young male asylum seeker, was suffering a mental health crisis due to deaths in his family at home. Struggling with grief and isolation, he began to withdraw from daily activities, and those around him noticed significant changes in his behaviour and wellbeing.

Situation: Ali's Staying Close PA noticed that there was a decline in his motivation and engagement, and he was also losing weight. These were all signs that Ali was not coping well.

Intervention: With the help of different teams of professionals, the Staying Close Coordinator developed a support package to assist Ali in the most appropriate way. His PA took him to a GP appointment, supported him with accessing medication, made sure he was taking the medication and referred him to talking therapy. His PA also ensured that he had enough food, that his bills were being paid and the heating/electricity in the home was functional. In addition, the Staying Close Apprentice (care experienced himself) supported Ali in his lifestyle and establishing a better routine: accompanying him to the gym, spending time with him at home and ensuring he was attending college.

Thanks to the tailored, wrap-around support, Ali made significant progress and is now more confident, re-engaged with college, and able to manage his mental health with greater independence. He has developed coping strategies, built trusting relationships, and continues to thrive with the knowledge that support is there when he needs it.

*Name changed for privacy

Unintended consequences

This section explores the positive and negative unintended consequences of Staying Close.

The following research question is answered in this section:

- What, if any, are the unintended consequences of the programme?

Summary of findings

Staying Close has led to a handful of unintended consequences, both positive and negative. On the positive side, the programme extended support to young people's broader networks and helped alleviate pressures on other services. However, some challenges emerged as well. For instance, mismatched accommodation placements led to increased conflicts and difficulties within shared living arrangements. These unintended consequences, while limited in number, had implications for the programme's overall impact.

Positive unintended consequences

1. **Supporting the young person's wider network:** Staying Close PAs unexpectedly found themselves supporting the friends and partners of the young people in their care, which proved to be an effective way of building trust and demonstrating the team's genuine commitment.

"One young person has a friend that comes over – she'll come to me with problems, and we'll support her as well. It builds trust because my young person is very aware that I don't have to give her any help at all. And I do want her to do well, as much as I want him to do well."

(Staying Close PA)

2. **Reduced pressure on other services and increased cross-team collaboration:** While its main aim has always been to support care leavers, in practice Staying Close has taken a lot of pressure off keyworkers or other teams including PAs, social workers and accommodation providers. Additionally, it has increased consultation and liaison with other teams in some cases.

"Residential providers don't have the greatest view of supported accommodation and vice versa, due to misconceptions and a lack of working relationships. Staying Close has given the opportunity to get those people round the table and produce collaborative work."

(Senior Practitioner, Staying Close Lead)

3. **Identified gaps in support services:** In some cases, Staying Close highlighted deficiencies in other services and teams. These include in children's homes with no baking equipment for those who might wish to make a cake and no car to give young people a lift to appointments. The lack of a car and no chance of a lift to appointments or activities had a negative consequence: young people tended to stay in and were reluctant to engage in the community.

Negative unintended consequences

- 1. Mismatched accommodation placements and increased conflicts:** Lack of information about young people's backgrounds, personality types, and histories led to mismatched placements in shared accommodation in some LAs, increasing the risk of conflicts and difficulties in cohabitation.
- 2. Over-selling and under-delivering Staying Close in some cases:** Some local authorities highlighted the risk of over-selling and under-delivering Staying Close. This is because there was little overall awareness and understanding of the programme and there is a need to promote or 'sell' Staying Close to increase engagement. However, in the case of specific problems, such as delays to securing suitable accommodation, a change of provider or gaps in the team due to recruitment problems, there can be a feeling of disappointment among young people and partners and a breach of trust.
- 3. Role ambiguity leading to increased workload for Staying Close PAs:** Another negative unintended consequence of the Staying Close programme is the feeling of being burdened with other people's work. Since the remit of Staying Close is still not well defined, there can be an assumption that Staying Close PAs have the time to take on additional tasks. For example, some supported living staff are not working on areas that they should, such as independent living skills, leaving it for the Staying Close team.

"What we found is some of the basics that they need support within their accommodation should be done by the support workers that work in that building and sometimes we've had to do some of that. For example, helping with budgeting, keeping the room tidy and stuff like that."

(Staying Close Wellbeing Practitioner/Social Prescriber)

Future plans for sustainability

This section explores local authorities' early views on the future of Staying Close.

Summary of findings

The majority of LAs have expressed a desire to continue delivering Staying Close, having observed positive impacts in their young people. At the time of interviews being conducted (September – November 2024), Staying Close teams that had strong local commitment from senior management felt optimistic about sustaining the programme even if DfE funding was not renewed. However, other LAs, particularly those that were more focused on financial savings, felt pessimistic about the possibility of sustainability without ongoing funding from DfE.

Local authorities have been collecting data to evidence outcomes and cost savings through the Staying Close programme. Most now feel they can show the many benefits of the programme.

"In terms of cost saving, I've got a spreadsheet to evidence how we are saving money by the support that's been put in place to transition people to flats earlier than we probably would do if we didn't have the project."

(Staying Close Team Manager)

Some LAs have underspent due to gaps in the team caused by a failure to recruit some roles. These LAs hoped to extend the programme temporarily on this basis. Where there is local commitment from senior management, Staying Close teams felt optimistic about sustaining the programme, even if DfE funding was not renewed:

"There is a passion internally to support these vulnerable children wherever we can. I'm optimistic that if we can evidence the impact we can have, then it'll be really difficult not to find the funding."

(Staying Close Team Manager)

"I'm told that there's a commitment - if I can show that this works, then the LA will remain committed to it in the long-term. So that's down to me and the team to get the evidence right: how many tenancies don't fail for young people who move on? How we evidence that young people move on in much better positions with their emotional health and welfare - all those measures that we report to the DfE, but all those soft measures as well is the evidence that it's working. And I've had nothing but support from senior management."

(Futures Team Manager)

However, some LAs are focused on financial savings and for this reason, they are reliant on DfE funding. In these cases, the Staying Close teams feel pessimistic about the possibility of sustainability.

“Funding within the local authority is a big problem. We are facing a lot of budget constraints that are leading to service cuts - I know that effectively the local authority won't be able to fund this project. I rely on the possibility that the DfE will be able to help us to see through this project, to buy time to show outcomes.”

(Staying Close Team Manager)

“The Council are trying to claw as much money back as they can and cost-cut where they can, so we are not hopeful. We are well aware of the financial impact to the Council as well. It has to be a strong justification of how it's saving the Council money, because, unfortunately, as sad as that sounds, that is what they want to hear.”

(Staying Close Team Manager)

LAs noted that if DfE funding stops and the Staying Close programme does not continue, it would be a backward step towards the 'cliff edge' for young people. In this case, learnings would be taken forward, borrowed staff would return to their previous role and some PAs may be redeployed. Many team members would be back on the jobs market - some may be already looking for new roles in anticipation of the end of the programme.

Formative recommendations

This section outlines key recommendations aimed at strengthening Staying Close, focusing on improving service delivery, addressing identified challenges, and enhancing its long-term impact.

Summary of findings

We propose 3 core recommendations for both the DfE and LAs to improve future delivery of Staying Close:

1. Prioritise early planning to ensure delivery feasibility and clarity
2. Increase awareness and understanding of Staying Close
3. Develop best practice guides for LAs to use when planning for and setting up Staying Close

1. Prioritise early planning to ensure delivery feasibility and clarity

- Ensure detailed planning when embarking on delivering Staying Close covering all critical areas of delivery such as property availability, recruitment timelines, health and safety requirements, capital investment, and other key factors to facilitate smoother and faster delivery.
- Ensure early, detailed planning of accommodation delivery that reflects local housing constraints, including stock shortages, capital project timelines, and refurbishment needs. Engage housing delivery teams from the outset to build realistic milestones into delivery plans and develop contingency arrangements- such as interim agreements with local housing providers- to reduce reliance on out-of-area placements.
- Given widespread challenges in recruiting specialist roles, it is important to initiate recruitment as early as possible to mitigate administrative delays that can stall recruitment. In addition, consider offering permanent contracts for key roles, particularly clinical specialists to address barriers associated with short-term contracts and uncertain funding. As last-resort options, LAs suggested prioritising candidates with the right values but limited experience- provided adequate training is available- and exploring internal recruitment to benefit from staff familiar with local processes.

2. Increase awareness and understanding of Staying Close

- **Within LAs:** Ensure the foundational elements of the programme- including accommodation readiness, key staff appointments and any necessary building work- are in place before promoting it within the LA. This helps manage expectations and ensures that internal teams are engaging with a programme that is ready to deliver.
- Once these foundations are secure, strengthen internal communication so that partner teams across the LA have a clear understanding of the programme's purpose, offer, and referral processes.
- Developing targeted training sessions or accessible guidance materials can support external teams in seeing how the programme fits within the broader support system.
- Alongside this, promote and invest in cross-LA communities of practice to encourage ongoing collaboration and shared learning. This could be achieved through hosting regular roundtable events and/or pairing local authorities preparing to implement Staying Close with neighbouring authorities that are further along in delivery to share lessons learned and enable tailored, real-time guidance to help foster more confident and consistent delivery across regions.

- **With Providers:** Provide clearer guidance on the remit of Staying Close to avoid role ambiguity and ensure responsibilities are well understood by partners and providers. Ensure Staying Close teams establish clear expectations and timings with providers at the outset of contracts, particularly regarding the recruitment of specialist staff.
- **Among Young People:** Staying Close teams face challenges in engaging care leavers, who may be reluctant to accept further support. Misconceptions, such as the need for a second Personal Adviser, which can seem unnecessary- add to the difficulty. These misunderstandings highlight the need for clearer, more targeted communication that emphasizes the unique aspects of the Staying Close offer- such as more individualised and dedicated support offered by PAs. By differentiating Staying Close from standard statutory provision, delivery teams can help young people better understand the added value and relevance of the programme to their individual journeys.

3. Develop a best practice guide for LAs to use when planning for and setting up Staying Close

The Staying Close programme is intentionally designed to be flexible and responsive to the specific needs of care-experienced young people in each local area, resulting in significant variation in delivery and no single uniform model. To support this adaptive approach while promoting consistency, the DfE and LAs should develop a best practice guide (using insights from this report) that outlines key principles, effective strategies, and core components proven to support positive outcomes. Furthermore, clearer communication about how Staying Close differs from business as usual (BAU), particularly the personalised and intensive support from Personal Advisors, will help manage expectations and highlight the programme's unique value, all while allowing room for local adaptation.

Key learnings should include:

- **Maintaining smaller caseloads (no more than 6-7 YP)** is essential to ensure that PAs can provide highly intensive, individualised, and flexible support- qualities that truly set Staying Close apart from business-as-usual provision. Emphasising this intensiveness is important, as it underpins the programme's ability to respond closely to each young person's unique needs and circumstances.
- **Prioritise the use of accessible, practical life skills materials** presented in manageable, easy-to-understand formats- such as bite-size guides, visual tools, or translated resources- rather than large, text-heavy folders. This is particularly important for young people with limited English proficiency, lower literacy levels, or specific learning needs. Tailored materials and delivery can help ensure all young people are meaningfully supported to engage and progress.

- **Tailoring support:** Given the barriers faced in supporting young people with language or learning challenges, especially among unaccompanied asylum-seeking children (UASC), education, employment, and training (EET) and life skills support must be tailored to individual needs and circumstances. This requires sufficient staffing and resources to provide consistent, one-to-one support. Wherever possible, prioritise personalised delivery through Personal Advisors (PAs), who can build trusted relationships and adapt content accordingly. In contrast, avoid small group activities where language barriers or cultural differences might lead to discomfort, disengagement, or exclusion.
- **Improve the matching process for shared accommodation** by developing a more structured and proactive approach to housing planning, by gathering and using information on young people's backgrounds, personality types, and histories to inform placement decisions. LA staff highlighted that careful matching of housemates is important to avoid personality clashes and promote more stable, harmonious living environments. Introducing compatibility assessments or consultation sessions before placing young people in shared accommodation could further support this process
- **Offering incentives to encourage engagement from young people** - particularly those who may be more socially isolated- such as a free coffee or meal, or enjoyable group activities like go-karting or laser tag. Facilitate regular social events to help foster strong, supportive relationships between Personal Advisors (PAs) and young people.
- **Amplify the voices of young people** by engaging with them on a regular basis (gathering their feedback on needs, challenges, and service effectiveness to continuously refine the offer) and involving them in recruitment panels, marketing materials (posters, videos), and reward their participation.

This guide will serve as a resource for local authorities to tailor their implementation while ensuring alignment with the programme's overall goals. Complementing this, self-assessments and regular submission of MI data- along with regular check-ins with staff, peer learning forums, spot audits, and feedback from young people- can help monitor adherence to best practices, identify challenges early, and provide a richer, multi-dimensional understanding of how well these practices are being embedded in local delivery.

Economic evaluation

Costs

Overall, 23 LAs completed the cost data form. Of these, eight were deemed of good quality with minimal gaps in the submission and detailed comments where there were gaps. The good-quality data forms also clearly set out which costs were already incurred and which were projected, as well as broke down staff time on Staying Close.

In most of the 23 cost forms, accommodation expenditures were not covered by Staying Close. Rather, it was LA-owned property or other funding used. It is also worth noting that Staying Close runs until the end of March 2025, while the LA cost forms were submitted beforehand, meaning there was a degree of forecasting needed.

All except two LAs reported total delivery costs which were below the available DfE grant funding. On average, the annual Staying Close delivery costs reported by the LAs were 63% of the DfE grant funding (this increases to 78% when focusing only on the eight LA cost forms deemed of good data quality). These figures include the use of projected costs where provided. Overall, large variation was visible in the data, with LAs reporting total delivery costs of from 2% to 126% of the DfE grant funding (variation reduces to between 35% and 126% when focusing only on the eight LA cost forms deemed of good data quality). Only eight LAs reported having spent 85% or more of the DfE grant. This can be seen in Table 23 below. The majority of this underspend is a result of the use of projected cost figures. According to the DfE, once projections are updated with actual figures, this underspend is likely to be resolved.

Table 23. Reported delivery costs as proportion of overall budget

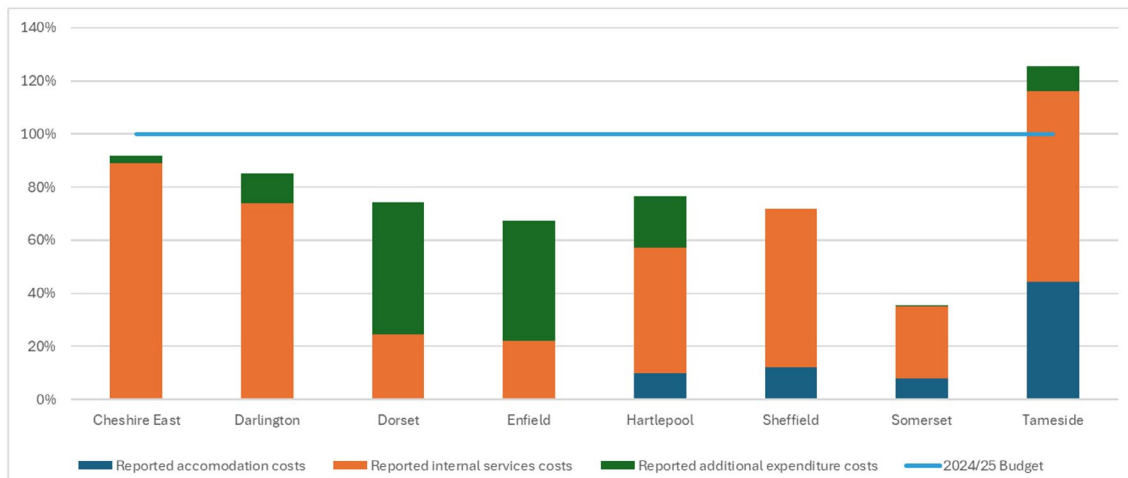
Local authority	Reported delivery costs as proportion of budget	Good data quality
Bolton	2%	No
Bristol	66%	No
Cheshire East	92%	Yes
Darlington	85%	Yes
Doncaster	89%	No
Dorset	74%	Yes
Durham	10%	No

Local authority	Reported delivery costs as proportion of budget	Good data quality
Enfield	67%	Yes
Gloucestershire	94%	No
Hartlepool	76%	Yes
Leicester	103%	No
Lincolnshire	78%	No
Manchester	90%	No
Newcastle	46%	No
Northamptonshire	64%	No
Nottinghamshire	3%	No
Sheffield	72%	Yes
Somerset	35%	Yes
Stockport	99%	No
Tameside	126%	Yes
Wirral	15%	No
Wolverhampton	53%	No
York	18%	No

Figure 5 shows the reported delivery costs for the eight good data quality LAs broken down by accommodation costs, internal services and overheads, and additional expenditures. Accommodation costs relate to local authority costs and not what young people supported by Staying Close may be paying privately in rent. Internal services costs cover LA staff involved in Staying Close. This has been scaled for the proportion of time spent working on Staying Close. Additional expenditure covers costs relating to external services or staff (such as translators and/or targeted youth support), as well as any training material, travel, catering and equipment costs.

On average, around 50% is reported to be spent on covering LA staff time in the delivery of Staying Close. On average, less than 10% is spent on accommodation costs, and around 17% on additional expenditures.

Figure 5. Breakdown of reported delivery costs for eight good data quality LAs



Limitations with the cost data must be acknowledged. While small underspends may be an indication of efficiency, larger underspends are more likely to indicate projects that were only partially implemented. For example, a few LAs experienced challenges in recruiting the right staff, leaving vacancies which would have been funded by the DfE grant, and therefore not spending the allocated salary budget (this was also recognised as part of the IPE).

Another likely explanation for the large discrepancy between reported costs and DfE grant funding is incomplete cost data being provided. There are several possible reasons for this incomplete cost data:

- Due to the timing of the cost form submission there was a degree of forecasting required, which not all the LAs were comfortable undertaking. Of the eight good-quality LAs, three (Cheshire East, Enfield and Tameside) provided costs that were clearly labelled as being projected.
- Some LAs provided incomplete cost forms as they did not have the data on certain elements (as this had not been set as a requirement from the outset) and felt uncomfortable estimating (particularly when the person completing the form had not been involved from the outset and / or was not involved directly in project delivery).
- In certain instances where the cost element had not been set out from the outset there was no record of the cost e.g. travel expense or the timesheet did not allow for such a breakdown of cost information.
- LAs populated the 'Other (please specify)' element of the cost form with a range of additional costs. These highlight cost areas that were not specified within the cost template form and it is possible that not all LAs fully considered these areas. Improvements in this area are addressed in Section 4 (Lessons Learned).

It is likely that the cost data reported by the LAs reflects both partial implementation (e.g., reflecting recruitment challenges) as well as incomplete cost data (e.g., due to the elements of forecasting required). Overall, for the break-even analysis the LA cost of delivering Staying Close was estimated as the average across the eight good-quality data forms.

A representative from the DfE provided their staff costs in supporting local authorities. This cost information was deemed of good quality and incorporated into the break-even analysis.

Overall, the estimated average cost per LA for implementing Staying Close was around £356,800, including around £353,800 of costs at LA level and around £3,000 reflecting the apportioned DfE costs to each LA. On average the LAs had a budget of around £450,000 for delivering Staying Close. The final amount awarded to each LA by DfE can be found on the published Grant Determination Letter.⁸

Benefits

Due to the data limitations and difficulties in detecting statistically significant positive impacts of Staying Close within the evaluation timeframe, it was not possible to attribute benefits (or averted costs) to the programme. This does not mean that Staying Close did not have benefits. Rather, it was not possible to measure and evidence these as part of this pilot evaluation.

However, it was possible to estimate and monetise benefits to the individuals affected for a likely set of outcomes and undertake a break-even analysis for these to assess how many individuals would need to have experienced that impact for the benefits to match the costs.

The break-even analysis focused on two benefits:

- Loneliness, and
- Suitable accommodation.

The selection of these outcomes was based on the findings from the impact evaluation and IPE, which suggested that the evidence was strongest for Staying Close delivering these potential benefits. Findings from the IPE noted that the Staying Close Programme's greatest perceived impacts were seen in improving sense of social connectedness for young people i.e. the lonely outcome. There was also evidence from the impact evaluation that care leavers in Staying Close areas were more likely to be in suitable accommodation compared with care leavers in comparison areas (see Section 3).

The direct primary benefits have been monetised through wellbeing valuation (see Section 2).

As set out in Section 2, the lonely and suitable accommodation outcomes also have associated secondary benefits (averted government costs), which have been monetised.

The pre-estimated benefit values have been updated to 2024 prices. These have then been adjusted to take account of deadweight, based on the proportion from the comparison group that gained the outcome in the relevant period. As such, the comparison group acts as the counterfactual to this break-even analysis.

Break-even analysis results

As set out in section 2, the break-even analysis sought to understand what level of impact would have been required for the Staying Close Programme to have generated benefits that at least equalled the costs of the programme. When benefits are expected to last 1 year, the number of young people that will have to gain an outcome is estimated using the following formula:

$$\frac{\text{Total cost per LA}}{[(\text{Wellbeing} + \text{Exchequer}) \times (1 - \text{deadweight})]}$$

Considering the loneliness outcome, for Staying Close benefits to equate or exceed the costs, the programme would have to improve the loneliness (defined as moving them from feeling lonely 'some of the time' to 'none of the time') of at least 17 young people for each LA and maintain this improvement for one year for the benefits to equate to the costs. Such an impact would have generated a total discounted benefit valued at close to £357,000. Existing research (such as Simetrica-Jacobs, 2020) shows that loneliness is a strong determinant of wellbeing.

Similarly, on the suitable accommodation outcome, Staying Close would have to move at least 113 young people to suitable accommodation (defined as moving them from not being satisfied with how the home is maintained and repaired to being satisfied) for each LA and maintain this improvement for one year for the benefits to match the costs. Such an impact would have also generated a total discounted benefit valued at close to £357,000.

The inputs of each of the above are presented in Table 24 below.

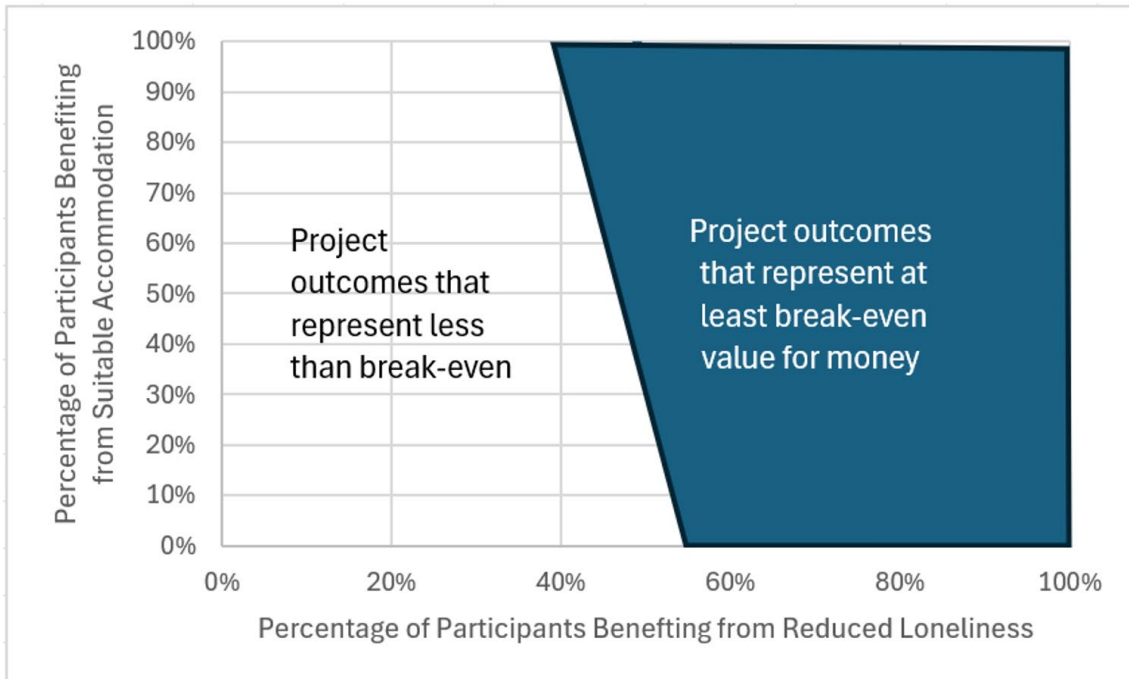
Table 24. Inputs for the calculation of the number of young people affected per LA

Outcome	Total costs per LA	Wellbeing value	Exchequer value	Deadweight	Number of people affected per LA
Lonely	£356,800	£20,598	£541	3%	17
Suitable accommodation	£356,800	£8,140	£33	61%	113

For illustrative purposes, the break-even analysis above focuses on a single outcome at a time. On average, based on the eight good-quality data forms completed by the LAs, each LA supports 27 young people. As such, the level of impact required for the lonely outcome (17 young people) is possible for the programme under this simplified scenario, albeit unlikely given that the programme would have to positively impact at least 63% of participants. Conversely, the level of impact required for the suitable accommodation outcome (113 young people) is not viable.

However, it is more likely that Staying Close will deliver more than one outcome (not necessarily to the same young people). Staying Close benefits can also equate to the costs, the break-even value for money, through different combinations of benefits/ outcomes by LA (as shown in Figure 6).

Figure 6. Different combinations of lonely and suitable accommodation outcomes for the Programme to break even



Axes numbers indicate how many young people would need to benefit from each LA for the programme to break even.

There are combinations of outcomes that are feasible based on the average number of young people supported by each LA. For example, if the programme were to improve the loneliness of 14 young people and provide suitable accommodation for 22 young people, Staying Close would break even at this LA level. These do not necessarily need to be the same individuals. While technically feasible, such a level of impact remains high given the number of individuals in the cohort and the relative weakness of impact findings within the wider evaluation. It is not unrealistic to assume that a combination of outcomes can be achieved by the programme, this is a likely scenario for the programme.

While at the top end, the break-even analysis at a combined outcome level shows that the threshold number of young people required to achieve the outcome by LA is technically possible, albeit the number of beneficiaries may be difficult to achieve in reality. Two scenarios that may make a break-even scenario more feasible are speculated below.

- While on average each LA supports 27 young people, some LAs have expressed plans to increase this. For example, one of the good-quality-data LAs reported currently supporting nine young people but aiming in future to support 142.
- While an increase in care leavers is likely to result in increased costs, it is likely that some efficiencies could be made, e.g. no need to prepare training material again. This could mean that the cost per participant is lower and hence that the level of impact required for the outcomes included in the break-even analysis is, in reality, lower than the figures set out above.

Sensitivity analysis

The break-even analysis outlined above is based on the central WELLBY and over a 1-year time period. However, sensitivity analysis has been undertaken on the following key parameters:

- Cost estimates (10% and 20% higher than reported by the LAs and DfE), to reflect the uncertainty in cost estimates
- Time horizon (1-, 5- and 10-years), to reflect the fact that some outcomes/benefits may have long-term impacts
- WELLBY value (Central, Low and High), in accordance with the HM Treasury Green Book Supplementary Guidance.

Cost estimate sensitivity analysis by outcome is shown in Table 25. The time horizon is held constant at 1 year and the central WELLBY is used throughout. As expected, the higher the cost, the higher the break-even threshold required by LA. More young people need to achieve each outcome in order to break even.

Table 25. Cost estimate sensitivity analysis

	Reported cost	Reported cost +10%	Reported cost +20%
Lonely	17	19	21
Suitable accommodation	113	124	135

Numbers indicate how many young people would need to benefit from each LA for the programme to break even.

Time horizon and WELLBY value sensitivity analysis by outcome is shown in Table 26 and Table 27. As expected, the higher the WELLBY the lower the break-even threshold required by the LA. The most significant changes occur when considering potential impact over a longer time period. The longer the time horizon over which impacts are maintained, the lower the break-even threshold required by the LA. In calculating benefits over time, in line with the HM Treasury Green Book, wellbeing values have been discounted at 1.5%, while secondary benefits use the 3.5% discount rate. It should be noted, however, that the time horizons given in Table 26 are indicative only. The likely duration of benefits over a multi-year period would need to be established and evidenced before results beyond a 1-year time horizon could be applied.

Table 26. Loneliness outcome sensitivity analysis – time horizon and WELLBY

Time horizon	Low WELLBY	Central WELLBY	High WELLBY
1-year	18	17	17
5-year	4	4	3
10-year	2	2	2

Numbers indicate how many young people would need to benefit from each LA for the programme to break even.

Table 27. Suitable accommodation outcome sensitivity analysis – time horizon and WELLBY

Time horizon	Low WELLBY	Central WELLBY	High WELLBY
1-year	146	113	92
5-year	30	23	19
10-year	16	12	10

Numbers indicate how many young people would need to benefit from each LA for the programme to break even.

When modelling the benefits as lasting over a multi-year period, the threshold number of young people required to achieve the outcome by LA is significantly more feasible. For example, the loneliness of just four young people in each LA needs to be improved and maintained for a 5-year period for Staying Close to break even. Similarly, each LA would need to move 23 young people to suitable accommodation and maintain this for a 5-year period for the Staying Close programme to break even. However, as noted above, these values are indicative only – although there is scope for benefits that last into the medium- and long term, further research is needed to justify the estimation of VfM beyond a 1-year time horizon.

It is likely that Staying Close would realise benefits for more than one outcome. This would mean that the level of impact by outcome required for the break-even analysis is even lower than what set out in the sensitivity analysis.

Discussion of overall economic evaluation results

Overall, data for the break-even analysis relied on the completion of cost forms by the LAs that were a part of the programme. Of the 23 LAs that completed the cost data form, eight were deemed to be of high enough quality for use in the analysis. Large underspends were found upon examination of these forms, with the annual Staying Close delivery costs reported by the eight LAs being 78% of the DfE grant funding, on average. Moreover, there was large variation among the eight LAs, with figures of between 35% and 126% being reported. These underspends are likely due to cost forms being filled out at least one month before the end of the financial year, meaning that LAs either didn't report costs over a full financial year or provided a projection of costs.

Given the lack of definitive positive findings from the pilot impact evaluation, it is not possible to assess definitively the value of Staying Close's benefits and hence conduct a full social cost benefit analysis. As such, it is not possible at this stage for the pilot to make a firm positive conclusion that Staying Close represents value for money.

However, the break-even analysis shows it is possible, under certain scenarios, for the generated benefits from Staying Close to at least meet the costs. This is feasible (albeit at the top end) when a combination of outcomes is achieved. This break-even threshold is significantly more viable if the benefits are sustained over a longer time period. However, a longer time horizon is a less likely scenario and evidence for this would need to be established. As such, assessing impact over a longer time horizon will be an important aspect of any future evaluation to determine the suitable time horizon.

Staying Close may also generate several other outcomes / benefits that were not possible to evidence or monetise as part of this evaluation. If so, the break-even analysis would have a lower threshold, that is fewer young people needing to achieve outcomes in order for the programme to break even.

In support of this analysis, evidence from case studies, the wider literature, similar interventions and qualitative input can be drawn upon to assess if the required change from the break-even analysis under the different scenarios is plausible and hence determine whether Staying Close represents value for money.

In future, when implementing Staying Close, the LA delivery teams and DfE should be mindful of the series of recommendations to improve the design of the intervention (outlined in the recommendations section below).

Discussion

Interpretation

This study involved conducting a pilot evaluation of the Staying Close programme. This covered several strands of work, including developing a pilot impact evaluation, conducting an implementation and process evaluation (IPE), and providing an economic evaluation of the programme's costs and outcomes. The evidence has been triangulated across the different strands.

Impact could not be reliably measured due to data limitations. The quantitative impact evaluation results are therefore inconclusive. The pilot impact evaluation did not find robust evidence suggesting that Staying Close has led to better outcomes. The evaluation faced several limitations, including the lack of a baseline, not being able to link survey and admin data, and barriers to identifying which respondents took part in the programme. Together, this means we're not able to rule out that unobserved differences (not captured in our data) between local authorities or between young people in Staying Close areas are driving the variation in outcomes that we observed, rather than being due to the programme itself. These limitations are set out in more detail below.

Primary outcomes

The impact analysis focussed on two primary outcomes: wellbeing (SWEMWBs) and social connectedness (ESSI). For both measures, Staying Close was associated with a worse outcome in wave 1 of data collection, with small negative to zero impact in wave 2. However, given limitations to the impact evaluation method used, these results should be understood as having no clear evidence of either a positive or negative impact, rather than as evidence of no impact.

In contrast to the IE findings, the IPE found that the programme's greatest perceived outcomes were in improving young people's sense of wellbeing and social connectedness, with a trusting relationship with their Staying Close Personal Advisor, acting as the key mechanism of change at the heart of the programme. These changes were largely driven by Staying Close Personal Advisors holding smaller caseloads (7 maximum compared to 20+ normally). Smaller caseloads help to provide a more dedicated, individualised support, significantly strengthening the connections between PAs and young people, and enhancing their overall experience. This is rooted in the principle of tailoring Staying Close to each young person.

The divergence between the IE and IPE findings may be due to several factors, including the limitations in the quality and completeness of data used in the impact analysis, which restrict its ability to draw firm conclusions about the impacts of Staying Close. The divergence could also be down to differences in the survey and IPE sample frames. The survey captured responses from young people across all Staying Close areas and all phases of implementation (phases 1-3), whilst the IPE interviews focused exclusively on six phase 3 LAs, which had only recently begun implementing Staying Close. For example, the young people we interviewed may have experienced a short-term increase in their sense of wellbeing and social connectedness following more dedicated support from their PA, something that may have been more in contrast from their more recent experience in care.

Secondary outcomes

The impact evaluation also quantified secondary outcomes: education, employment or training (EET) status, accommodation suitability and accommodation stability. We found no evidence of young people being more likely to be in education, employment or training in Staying Close than in comparison areas. Positively, there is evidence that care leavers in Staying Close areas were more likely to be in suitable accommodation compared with care leavers in comparison areas in wave 1. But we found no evidence of a difference in accommodation stability between young people in Staying Close and comparison areas. As with the primary outcomes, given limitations, these results should be understood as having no clear evidence of either a positive or negative impact, rather than evidence of no impact.

In contrast to the positive IE evidence that care leavers in Staying Close areas were more likely to be in suitable accommodation than care leavers in comparison areas, our IPE interviews with delivery stakeholders found that most LAs struggled to deliver the core accommodation offer of Staying Close and place young people in suitable accommodation. This is due to several barriers, including severe delays in building projects, problems around recruiting managers and staff for trainer flats and the general shortage of housing stock. These barriers could also account for the large underspend reported by some areas, which was captured by the value for money analysis.

Again, this discrepancy between the IE and IPE findings is likely down to differences in the survey and IPE sample frame. This could suggest that the LAs involved in earlier phases of delivery (e.g. LAs in phase 1 or 2 of implementation) had more time to address initial accommodation challenges, compared to the LAs that we interviewed that only recently started implementing Staying Close.

Another possible explanation for the contrast between quantitative and qualitative findings is that the Staying Close programme may not have been intense enough for effects to show up in the impact evaluation. Our survey results suggest some increased engagement from care leavers with LAs on certain Staying Close activities, but these differences were not substantial (as local authorities in comparison areas still provide similar activities that fall under the scope of Staying Close). As a result, the qualitative findings from the IPE case studies do capture genuine stories of perceived successes, but these may not be widespread enough to produce positive average effects in the IE.

VfM

A full social cost benefit analysis is not possible given that impact could not be reliably measured due to data limitations in the pilot impact evaluation. In fact, on average the annual Staying Close delivery costs reported by LAs were 63% of the DfE grant funding, supporting the findings from the IPE on recruitment challenges and lack of specialist provision. However, just eight LAs provided robust cost data overall, further limiting our ability to carry out deeper cost benefit analysis.

Instead, we adopted a break-even economic analysis. This shows it was possible, under certain scenarios, for the generated benefits from Staying Close on social connectedness and being in suitable accommodation to at least meet the costs. That is, the level of impact required for social connectedness outcome (17 young people from the average 27 young) is viable for the programme, albeit at the top end. A more likely scenario is that more than one outcome will be achieved by the programme. Under this scenario there are different combinations where the programme will break even, such as if the programme were to improve the social connectedness of 14 young people and provide suitable accommodation for 22 young people.

There is currently insufficient evidence to be confident that the programme would deliver enough benefits to represent good value for money. Any further funding or rollout should therefore be accompanied by a full evaluation, in line with the recommendations set out in the Conclusions and Recommendations section.

Limitations

This report has highlighted several limitations encountered throughout the evaluation. Recognising these challenges is essential to understanding the findings in context and to informing improvements for future evaluations of Staying Close.

1. Limited co-production with key stakeholders

We evaluated a programme that was already set up, with lots of parameters outside our control, such as which LAs were involved in phase 3 of Staying Close. This lent itself to a QED approach rather than an RCT, for example. In the evaluation design, we did incorporate some participatory elements, such as cognitive testing of survey questions with care leavers, engagement with local authorities during the implementation phase and ongoing engagement with the DfE. However, we could have deepened the co-production further. This may have helped overcome some of the challenges experienced, including high levels of missing data and difficulties in capturing intended outcomes. Earlier and more sustained involvement of care-experienced young people and LA stakeholders in the design and development stages could have strengthened engagement, improved data quality, and enhanced the overall relevance and impact of the evaluation.

Impact evaluation

2. No baseline

One of the main limitations of this pilot is that it was not possible to gather baseline data at (or ideally, just before) the time point when participants left care, due to the long time period this would have covered and resources available. Plus, as all three phases of Staying Close have been included within the evaluation, earlier phases had already started supporting care leavers many years earlier. We have therefore treated both wave 1 and wave 2 as measuring post-intervention outcomes. Ultimately, this means that we do not have a genuine pre-programme baseline. This means we could not tell how similar Staying Close participants were to comparison participants at baseline. Nor could we use pre-intervention data to balance the groups (to maximise the comparability of the intervention and comparison groups). We attempted to restrict our analysis to only young people who were 16 years old at wave 1, to approximate a baseline; however, the sample size was not big enough to do so and we had to include participants up to 18. Additionally, this was only possible for the admin data, not the survey data.

3. Change in impact evaluation design

Our original design proposed a difference-in-differences approach, using entropy balancing to adjust for pre-existing differences between Staying Close and comparison areas. However, because Wave 1 data included a broader group of care leavers than initially planned—including individuals who had received Staying Close support prior to the evaluation—we revised the impact evaluation strategy. While we used entropy balancing to address group differences, baseline outcome measures were unavailable, as Wave 1 data were collected post-intervention. Consequently, we adopted a 'doubly robust' method that combines entropy balancing with regression adjustment. This approach was deemed the most appropriate given the data constraints, though it limits the strength of causal inference.

4. Unobserved confounders

Differences in outcome measures observed between the groups on, e.g., wellbeing (SWEMWBS) and social connectedness (ESSI), could be due to differences outside Staying Close support (e.g. the underlying characteristics of the comparison areas, and/or time varying factors, that are just different to the intervention areas). To address this, we included covariates intended to balance the treatment and comparison groups. These were selected based on their likely association with both programme participation and the outcomes of interest. Nonetheless, we acknowledge the presence of unobserved factors that could not be accounted for.

5. Uncertainty around which specific care leavers received the intervention

While we captured survey responses from young people on the different Staying Close activities that they engaged in, the programme is intentionally designed to be flexible and variable across local areas, and tailored to individual needs. As a result, some young people in non-intervention areas may have also accessed similar support, and not all eligible young people in intervention areas necessarily received programme activities. This means that when analysing outcomes across all eligible care leavers, any true programme effects may have been diluted and therefore very difficult to detect.

6. Other programmes and interventions operating in parallel

Other programmes and types of support were operating alongside Staying Close, to varying extents across LAs, and may have affected outcomes. This complicates attribution of any observed impacts to Staying Close alone. Additionally, the survey results from young people indicate that Staying Close activities were also being provided in comparison areas, further blurring the distinction between Staying Close and comparison areas.

7. Data inconsistencies across LAs

As outlined in Section 2, the evaluation team had limited control over the administrative data supplied by LAs, and the ways in which surveys were administered to young people, which have led to inconsistencies in data quality across areas.

Given these limitations, it is best to see the IE findings as indicative of the programme and helping to build support of evidence on working with care leavers across a range of outcomes, especially wellbeing, social connectedness, EET and accommodation.

IPE

8. Limited case study scope

The six case study areas were selected based on pre-defined criteria agreed with DfE and CHI, which included selecting LAs that had only recently begun implementing the programme (phase 3 LAs), to enable exploration of early-stage challenges and initial responses. Other selection factors included geographic location, funding size, number of young people supported, contextual factors, examples of best practice, and opportunities for learning. While the findings provided valuable insights and lessons learned, particularly ahead of the national rollout of Staying Close, by design they do not fully reflect the diversity of experiences across all programme local areas—particularly those that have been implementing Staying Close for several years (e.g. phase 1 or phase 2 LAs). As previously highlighted in the IPE section, interviewing young people outside of our six case study areas would have helped to capture a broader range of perspectives, support deeper exploration of unexpected patterns or outliers seen in the impact evidence, and ultimately strengthen conclusions about young people's experiences and outcomes. But this also comes back to resources and the balance of work within this project overall.

9. Selection bias in young people's perspectives

The young people we interviewed were recruited through our survey, which was distributed to care leavers via LAs, or directly recruited by LAs themselves. This recruitment process may have resulted in a sample that predominantly includes young people with positive experiences of the programme, potentially limiting the representation of more negative outcomes. However, it is also possible that those with more negative experiences were particularly motivated to share their views, meaning the sample could reflect a disproportionate number of critical perspectives.

VfM

Overall, given the lack of definitive positive impact findings from the impact evaluation, it is not possible to assess the value of the programme's benefits and hence conduct a full social cost benefit analysis, as would usually be the case when undertaking a value for money assessment. This does not mean that the programme does not have benefits. Rather, it was not possible to measure and evidence their materialisation as part of this evaluation.

In addition, the break-even analysis has been conducted based on the cost estimates provided within the LA cost forms. Even when focusing on the better-quality data cost forms, gaps and lack of consistency in the data remain with subsequent limitations to their use. As such, caution should be applied in drawing firm conclusions from this cost data.

Lessons learned

Project set-up

A key takeaway from the project set-up was the importance of allocating enough time for engaging with local authorities. Early and thorough engagement helps prevent delays and ensures smooth implementation.

Challenges encountered:

- Because of the contractual set-up of this project, we decided to use a joint data controller approach to personal data with LAs. This raised several valid questions from LAs, requiring clarification and legal considerations.
- Establishing data sharing agreements with over 50 LAs was complex and time-consuming. This needs to be agreed with LAs in advance (by DfE and CHI).

What worked well:

- Proactive engagement and support from DfE, including sending out targeted communications to encourage LA buy-in.
- A mailbox to answer email queries from LAs, supplemented by setting up calls when needed, helped resolve issues efficiently.
- Maintaining a live frequently asked questions (FAQs) document towards the end of the first round of the data collection period ensured that LAs had access to up-to-date guidance and common clarifications.

Areas for improvement:

- Clearer and more detailed instructions for LAs would have mitigated confusion during the set-up phase.
- As outlined in section 2 on eligibility criteria, LAs lacked clarity on the definition of a 'residential care leaver,' impacting wave 1 data collection and analysis. This highlights the need to invest time in the inception phase to ensure eligibility criteria are well understood and uniformly applied when LAs submit administrative data and distribute surveys. The changes of eligibility for Staying Close between the different phases has also fed into this.

Lessons from data collection and analysis**Matching LAs to Staying Close and comparison authorities:**

A significant proportion (28%) of survey respondents in wave 1 could not be matched to either Staying Close or comparison LAs, due to not providing a valid postcode, affecting the robustness of the evaluation. We asked respondents to provide a postcode because, often, this information is easier for a young person to know and provide, rather than the specific LA that they are living in. For LAs, this can be the lower or top tier (in two-tier areas) or the originating or current LA (for those placed out of areas). We also had some survey respondents supported by charities, at least one operating in several LAs.

The questionnaire was amended in wave 2 to include a drop-down menu listing pre-assigned Staying Close and comparison LAs. This change helped address some of the issues with missing or invalid postcode entries. For respondents who completed the survey in wave 1 but didn't include a postcode, we were able to retrospectively assign this for 286 respondents who completed the wave 2 survey.

Limitations in data availability and consistency:

More comprehensive administrative data would have strengthened the analysis, including information on the number of young people eligible for the programme, how many actually participated (in treatment areas), and how many were invited to the survey. With fuller data, we could also have applied statistical methods (such as weighting) to adjust for non-response and improve the robustness of the findings.

Furthermore, there were considerable variations in the number of completed surveys and submitted administrative data requests per LA. To better understand these discrepancies, we conducted follow-up calls with three LAs to explore their approaches to survey distribution. This is also partly related to the understanding of eligibility for both Staying Close and for this evaluation. Overall, survey response rates appeared to reflect the level of engagement from local authority staff: areas where PAs and Staying Close Project Managers were more proactive, they achieved higher response rates from young people, while the area with lower response rates attributed this to recent staffing pressures, team departures, and a lack of direct line management, which limited staff capacity to engage young people.

Conclusion And Recommendations

This study involved conducting a pilot impact evaluation, an implementation and process evaluation (IPE), and an economic evaluation of the programme's costs and outcomes. Findings from each strand have been triangulated to provide a comprehensive understanding of the programme's implementation, effectiveness, and value for money.

The evaluation was guided by three key aims:

- Assess the programme's impact on primary, secondary, and ancillary outcomes related to wellbeing, social connectedness, EET status and accommodation, using a combination of survey responses from care leavers and administrative data from local authorities in England.
- Test and refine data collection methods for care leavers, particularly in relation to the feasibility and practicalities of collecting both survey and administrative data to inform future evaluations.
- Generate insights and recommendations to inform the design of any future, fully powered impact evaluations of the Staying Close programme or similar interventions for care-experienced young people.

There have been significant challenges in conducting a robust impact evaluation, including the lack of a baseline, not being able to link survey and admin data, and barriers to identifying which respondents took part in the programme.

The pilot impact evaluation did not find robust evidence suggesting that Staying Close has led to better outcomes, as impact could not be reliably measured due to data limitations. The quantitative impact analysis results are therefore inconclusive. The impact analysis focussed on two primary outcomes: wellbeing (SWEMWBs) and social connectedness (ESSI). For both measures, Staying Close was associated with a worse outcome in wave 1 of data collection, and with small negative to zero outcomes in wave 2. The impact across secondary and ancillary outcomes was mixed. Given the limitations, the results should be understood as having no clear evidence of either a positive or negative impact, rather than as evidence of no impact.

In contrast to the IE findings, the IPE found that the programme's greatest perceived outcomes were in improving young people's sense of wellbeing and social connectedness. A trusting relationship with their Staying Close Personal Advisor has been the key mechanism of change at the heart of the programme. These changes were reported to be driven by Staying Close Personal Advisors holding smaller caseloads (7 maximum compared to 20+ normally), interviewees told us. Smaller caseloads help to provide a more dedicated, individualised support, significantly strengthening the connections between PAs and young people, and enhancing their overall experience.

Many of the young people we interviewed were in crisis situations and felt a sense of desperation. They believed they had no one they could ask for help and often felt close to "giving up." Being listened to and supported with their individual needs by a PA under Staying Close may well explain young people's positive outcomes through interviews compared to the broader but null or negative outcomes from the impact evaluation.

Nevertheless, local authorities faced significant challenges in delivering the programme. Workforce shortages have impacted how LAs were able to implement Staying Close as originally intended, especially to employ psychologists and clinical nurse specialists, to provide wrap-around care. A shortage of suitable housing has limited councils' ability to accommodate care leavers. These issues reflect wider systemic challenges in delivering public services, including persistent recruitment and retention difficulties in health and social care, pressures on local authority budgets, and a broader shortfall in affordable and supported housing.

Another possible explanation for the contrast between quantitative and qualitative findings is that the Staying Close programme may not have been intense enough for effects to show up in the impact evaluation. The VfM analysis indicates that some areas had underspent (this is likely due to some LAs not providing projected costs for the whole financial year, as well as wider challenges, such as recruitment of staff to deliver Staying Close), and our survey results suggest some increased engagement from care leavers with LAs on certain Staying Close activities, but these differences were not substantial compared to comparison areas. As a result, the qualitative findings from the IPE case studies capture genuine stories of perceived successes, but these may not be widespread enough to produce positive average effects in the IE.

Finally, the break-even economic analysis used data on the costs of the programme that was collected through the completion of cost forms by 23 LAs. This break-even approach was necessary as the inconclusive impact findings meant a full social cost benefit analysis was not possible; this does not mean the programme has no benefits, only that they could not be evidenced in this evaluation. Of the completed cost forms, eight were deemed of good quality and were used in the analysis. However, caution should be applied in drawing firm conclusions as even these high-quality forms contained gaps and inconsistencies. Examination of this data revealed that

there were large underspends across most LAs, with an average of 78% of DfE grant funding being used for the programme. Large variation existed across LAs, with figures of between 35% and 126% being reported. This was likely due to the cost forms being completed before the end of the financial year, with the majority of LAs not projecting their costs forward. Using this data, the break-even analysis shows it would be technically possible, under certain scenarios, for the generated benefits of the programme's impacts on loneliness and ensuring suitable accommodation to at least meet the costs. However, this is towards the top-end of feasibility since the number of beneficiaries may be difficult to achieve in reality. Other scenarios, such as a time period beyond one year over which the benefits are sustained, would require further research in order to justify its use in the estimation of VfM.

Recommendations

Recommendations for programme delivery

- **DfE should co-create 'best practice' guides** (using insights from this report) that outlines key principles, effective strategies, and core components proven to support positive outcomes. Furthermore, clearer communication about how Staying Close differs from business as usual, particularly the personalised and intensive support from Personal Advisors, will help manage expectations and highlight the programme's unique value, all while allowing room for local adaptation. Key learnings should include:
 - Keeping Staying Close PA caseloads at a manageable level (no more than 6-7 young people each) to ensure that PAs can provide intensive, individualised, and flexible support- qualities that truly set Staying Close apart from business-as-usual provision.
 - Prioritising the use of accessible, practical life skills materials presented in manageable, easy-to-understand formats- such as bite-size guides, visual tools, or translated resources- rather than large, text-heavy folders.
 - Tailoring support: Education, employment, and training (EET) and life skills support must be tailored to individual needs and circumstances. Wherever possible, prioritise personalised delivery through PAs, who can build trusted relationships and adapt content accordingly. In contrast, avoid small group activities where language barriers or cultural differences might lead to discomfort, disengagement, or exclusion.
 - Improving the matching process for shared accommodation by developing a more structured and proactive approach to housing planning, by gathering and using information on young people's backgrounds, personality types, and histories to inform placement decisions. Introducing compatibility

assessments or consultation sessions before placing young people in shared accommodation could further support this process.

- Offering incentives to encourage engagement from young people- particularly those who may be more socially isolated- such as a free coffee or meal, or enjoyable group activities like go-karting or laser tag.
- Amplifying the voices of young people by engaging with them on a regular basis (gathering their feedback on needs, challenges, and service effectiveness to continuously refine the offer) and involving them in recruitment panels, marketing materials (posters, videos), and reward their participation.
- LAs should prioritise early planning when a local authority embarks on delivering Staying Close. Ensuring feasibility and clarity around accommodation availability and recruitment timelines for key personnel is essential and will help streamline implementation once funding is secured.
- LAs should increase awareness and understanding of the Staying Close programme and model using clear guidance and resources co-developed with DfE for programme staff, partners, providers and young people. Alongside this, promote and invest in cross-LA communities of practice to encourage ongoing collaboration and shared learning. This could be achieved through hosting regular roundtable events or pairing local authorities preparing to implement Staying Close with neighbouring authorities that are further along in delivery to share lessons learned and enable tailored, real-time guidance to help foster more confident and consistent delivery across regions.

Recommendations for the future evaluation of Staying Close

With Staying Close confirmed for national rollout, continuing to evaluate the programme has become more important than ever. An impact evaluation will be essential to understanding whether Staying Close is achieving its intended impact at scale, identifying variation in outcomes across LAs, and ensuring that implementation remains true to the core principles of the approach.

Evaluation at this stage is also critical for building a strong national evidence base, supporting accountability, and informing future decisions about resource allocation, policy development, and ongoing improvements to the programme. Without it, there is a risk that valuable learning from local innovation could be lost or that challenges go unaddressed as the model is scaled.

Based on our learning from delivering this pilot impact evaluation, we recommend the following approaches to strengthen the future evaluation of Staying Close and ensure it is robust and responsive to the realities of full-scale implementation.

1. Embed Quasi-Experimental Evaluation Design (QED) within a larger monitoring and evaluative framework

A rigorous impact evaluation is essential but should be situated within a wider framework that also includes systematic monitoring against clear standards and criteria. We recommend using a rubrics approach with clear, criteria-based measures tied directly to the ToC (e.g., wellbeing outcomes, accommodation stability, EET outcomes, and young people's perceptions of support received). This approach involves co-developing detailed scoring guides that define specific performance levels, such as 'beginning,' 'developing,' and 'advanced', for each outcome area, providing consistent and transparent benchmarks to assess progress objectively. These rubrics provide consistent, transparent benchmarks that help evaluators assess progress objectively, identify strengths and areas for improvement, and track changes over time, including through regular administrative monitoring data. By clarifying what success looks like at each stage, rubrics support more meaningful analysis and facilitate communication of findings to stakeholders. Co-creating these criteria and targets with LAs and young people early in the evaluation process will help ensure buy-in and maintain focus on meaningful outcomes. Overall, this approach helps to monitor changes to the programme during national rollout, where there isn't an opportunity to compare with counterfactual areas.

The QED component could use a matched difference-in-differences approach, combining survey data with linked administrative records. To achieve this:

- **Matched or balanced difference-in-differences approach:** Even with a national rollout, it's likely that not all care leavers will engage in Staying Close support and activities, or will engage to different levels. This offers an opportunity to compare young people within LAs, matching on a range of individual-level and local-level characteristics. This helps account for differences between local contexts, while adjusting for any reasons why young people will engage or disengage from the Staying Close programme. Relevant factors could include length of time in and stability within care, mental health, previous safeguarding risks, and other social-demographic characteristics (e.g. gender, ethnicity).
- **Robust baseline data collection:** Including admin data, would initially be coordinated via LAs, who would invite eligible young people to participate. Subsequently, evaluators should be empowered to follow up directly with respondents, reducing LA burden and improving response management.
- **Longitudinal survey design:** We recommend a longitudinal survey starting before young people leave care, with annual follow-ups to track changes over time. This allows for clearer tracking of pre-intervention status and outcomes, especially when compared to wider data at baseline.
- **Use of proxy indicators:** Where programme fidelity is difficult to measure directly,

administrative indicators such as PA caseload size can act as proxies. For instance, smaller caseloads of 6-7 typically associated with Staying Close, can help distinguish implementation sites.

- **Tracking intensity and duration:** It is important to capture how long young people have been receiving intervention activities. Future data collection should categorise participants based on key indicators such as the number of months engaged and access to core elements of the Staying Close offer (e.g. accommodation, EET, wellbeing support). Without this, it will be difficult to assess whether stronger impacts are associated with longer or more sustained engagement. This information can be captured through a combination of programme monitoring data and periodic updates from local authorities and PAs, ideally using a simple standardised form that can be updated quarterly.
- **Site selection:** Prioritise local authorities where Staying Close is more mature, or has been implemented at greater scale. This would improve the likelihood of detecting measurable impacts and ensure the evaluation captures more stable delivery models.

2. Employ a fully integrated mixed-methods design

Future evaluations should adopt a more coordinated mixed-methods approach, where qualitative data collection is used to interpret, enrich, and contextualise quantitative findings rather than being conducted separately. This integrated design involves aligning and planning qualitative and quantitative components throughout the evaluation, enabling systematic comparison and synthesis of data for a more comprehensive understanding of outcomes. A more integrated design would capture a broader range of experiences, improve understanding of unexpected patterns or outliers, such as from the regular monitoring data, and strengthen conclusions about young people's experiences and outcomes.

3. Adopt an 'action learning' model to enhance engagement

The success of the evaluation depends on strong engagement and sustained participation from local authorities and young people, the ultimate beneficiaries of Staying Close. Applying an 'action learning' model, built on principles of collaboration, co-production, mutual benefit, and shared learning, can help embed evaluation as a supportive process rather than a top-down assessment. By involving LAs and young people early and consistently, and valuing their insights, this 'bottom-up' approach can enhance trust, improve data quality, and ensure findings are both contextually grounded and practically useful. This could be achieved by recruiting LAs and young people to form a 'learning taskforce' and involving them in all stages of the evaluation design and delivery. For example, co-developing research tools such as surveys and topic guides, iteratively sharing emerging findings, and collaboratively testing and refining learning as it develops.

4. Focus qualitative case study selection strategically

To generate deeper insights into effective practice, qualitative case studies should prioritise LAs where Staying Close is well-established, delivered at scale, or has successfully overcome implementation barriers, particularly regarding the 'core' accommodation offer. This focus will enhance understanding of what contributes to successful outcomes and sustained delivery.

In addition, evaluators should recruit young people independently rather than relying on LA nominations, to reduce the risk of positive selection bias and ensure a more balanced representation of experiences. This could be done by asking respondents from the survey if they are willing to opt in to further research, using this as a mechanism to recruit young people for qualitative case studies. Evaluators should additionally seek to include unaccompanied asylum-seeking children (UASC), particularly given that language barriers and specific support needs were highlighted in this round of research.

5. Strengthen value for money data collection

The DfE should set up comprehensive LA cost data collection from the outset on an ongoing basis for the duration of the programme, rather than through a retrospective survey. The cost form should be as prescriptive as possible.

In addition, it is important to be mindful of when the cost forms are disseminated to LAs. This would ideally be at the end of the financial year to increase the likelihood that LAs have actual cost figures to report and are not reliant on projections. This will likely reduce the large variation in underspend figures seen in this pilot study and will ensure consistency with the data received from DfE.

6. Adopt a realistic overall timeframe

Given the complexities involved, the evaluation should be planned over several years, at least three, to allow robust assessment of outcomes. Interim analyses at key points can provide early insights and support ongoing learning and programme improvement.

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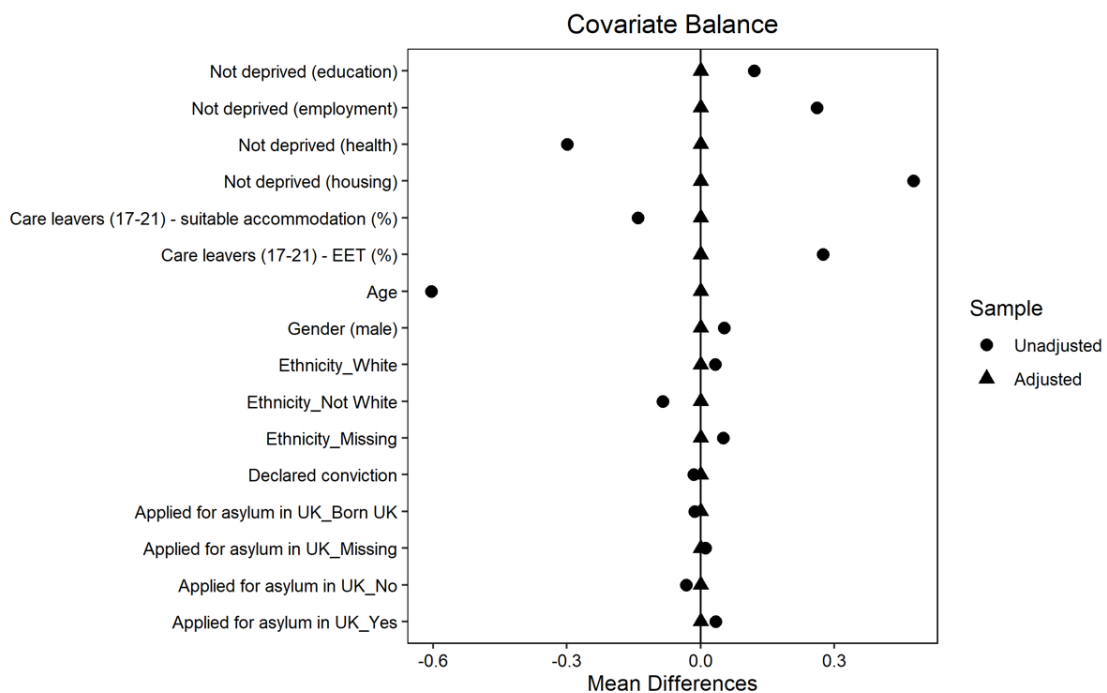
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Appendix A: Entropy balancing “Love” plots

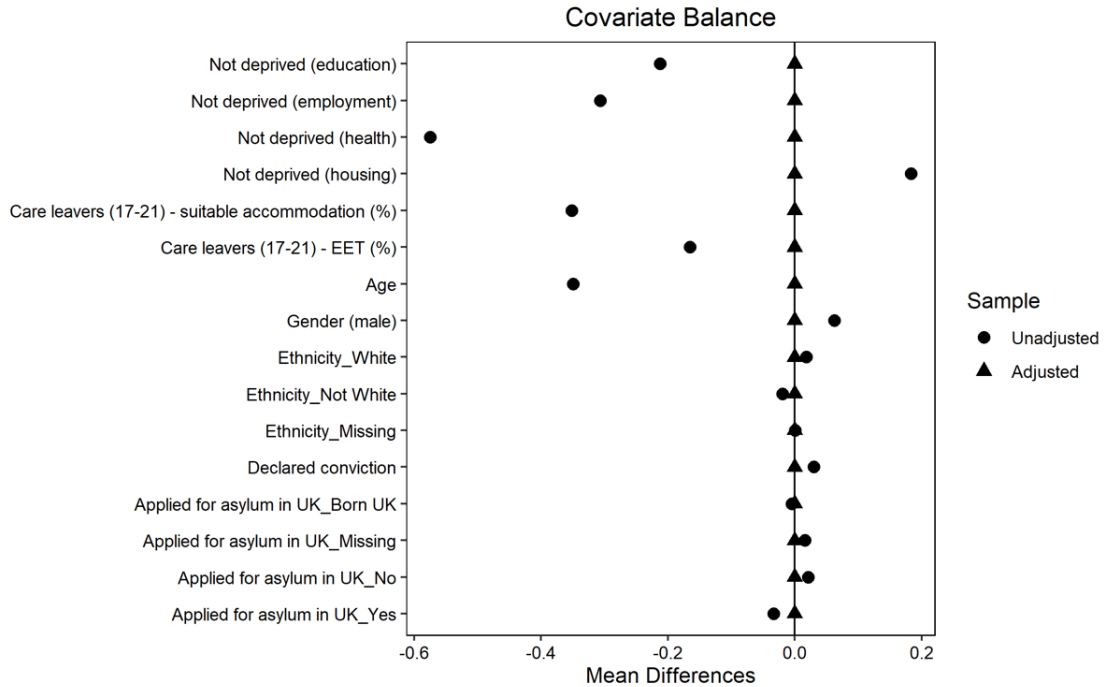
This Appendix includes “Love” plots for all entropy balancing analyses. Love plots represent covariate balance before and after entropy balancing (and other kinds of balancing and matching designs). If balancing has worked as intended, then the adjusted differences between the two groups will be near zero. For the analyses conducted, balance was close to exactly zero. This, of course, only concerns balance for covariates included in analyses and, as discussed above, unmeasured confounding is a risk in the present pilot evaluation.

Survey data

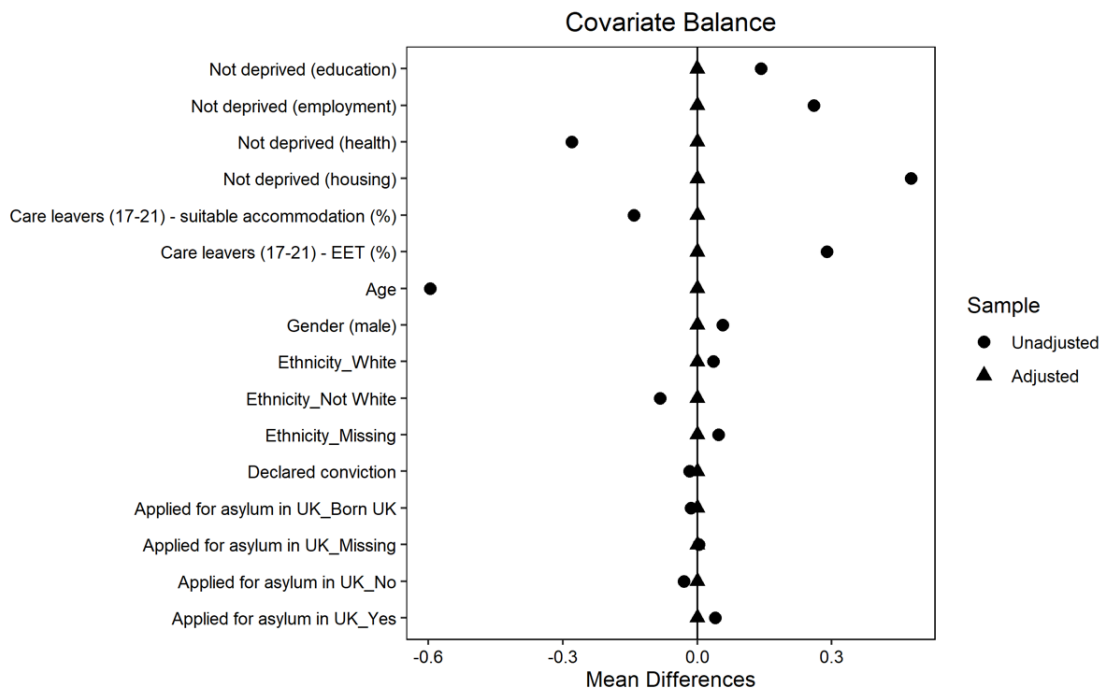
SWEMWBS (Wave 1)



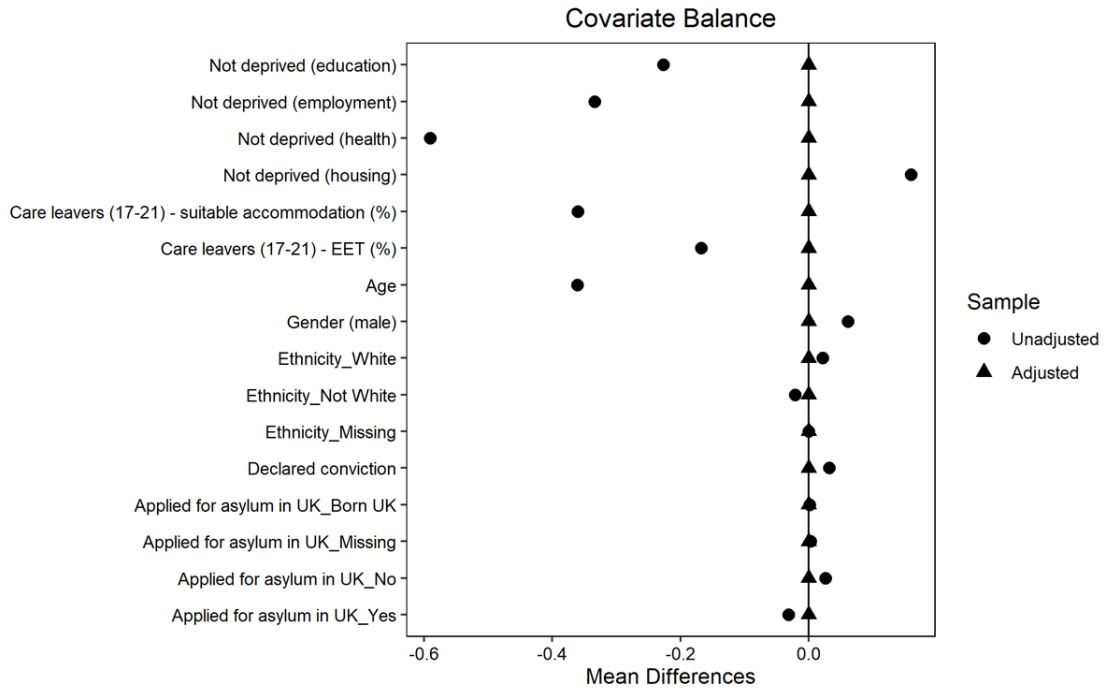
SWEMWBS (Wave 2)



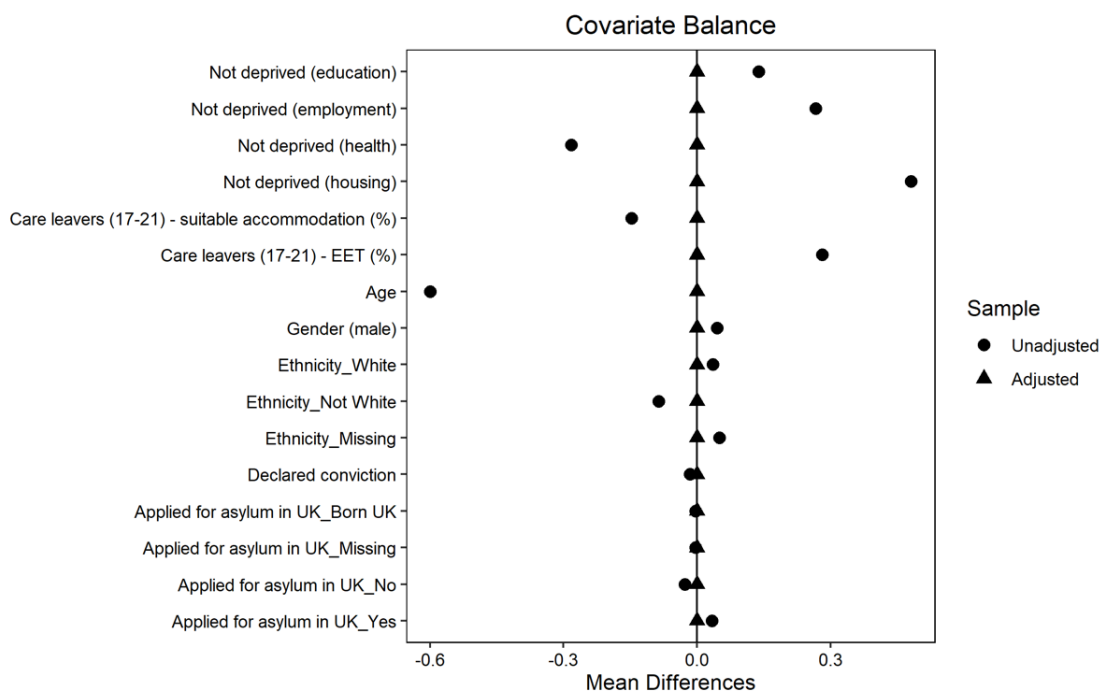
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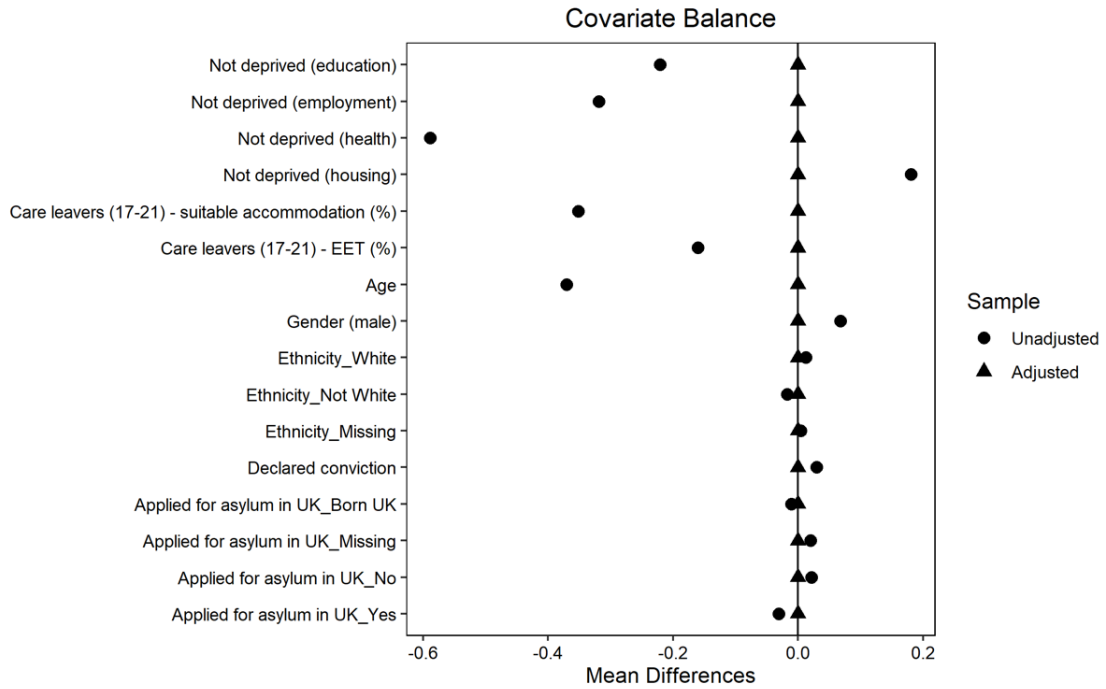
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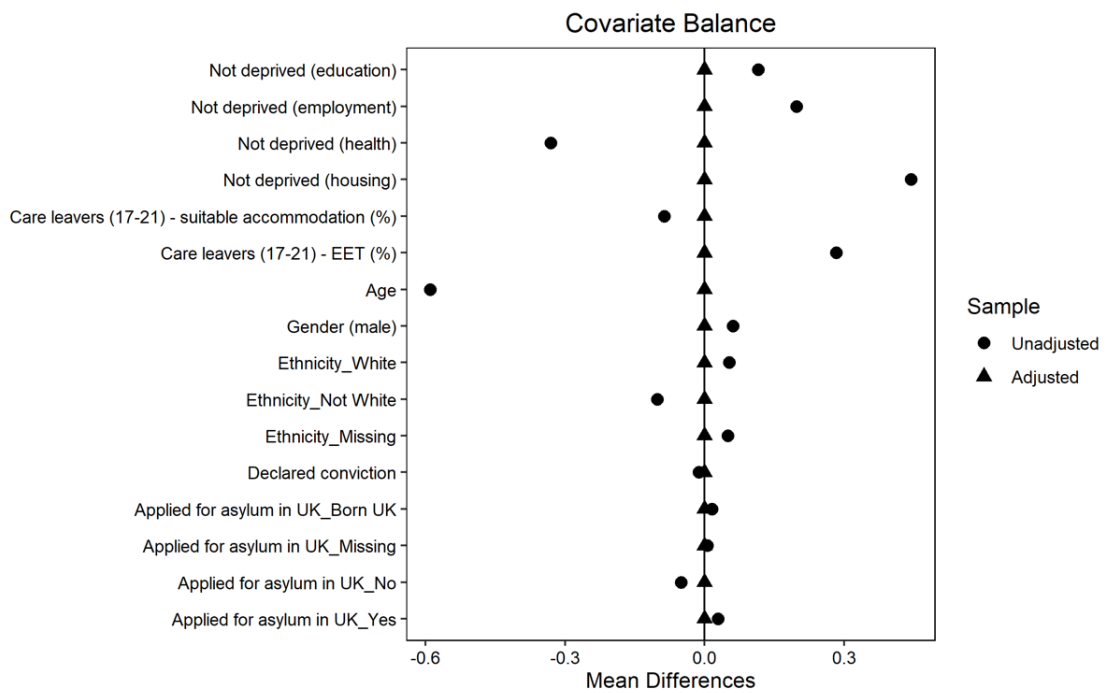
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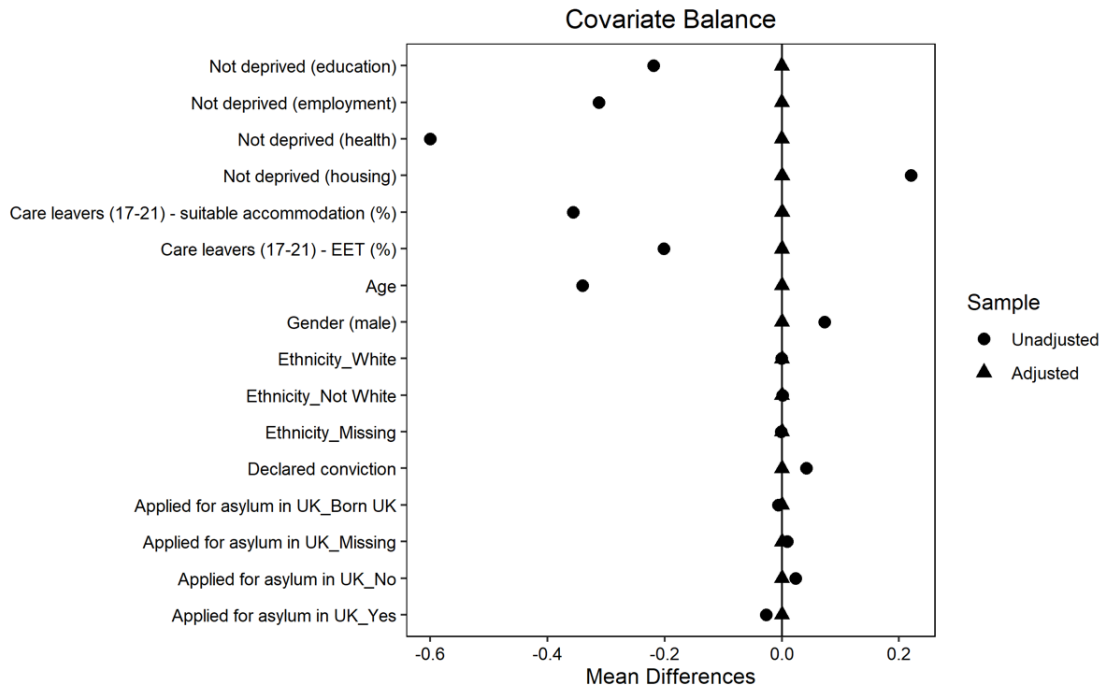
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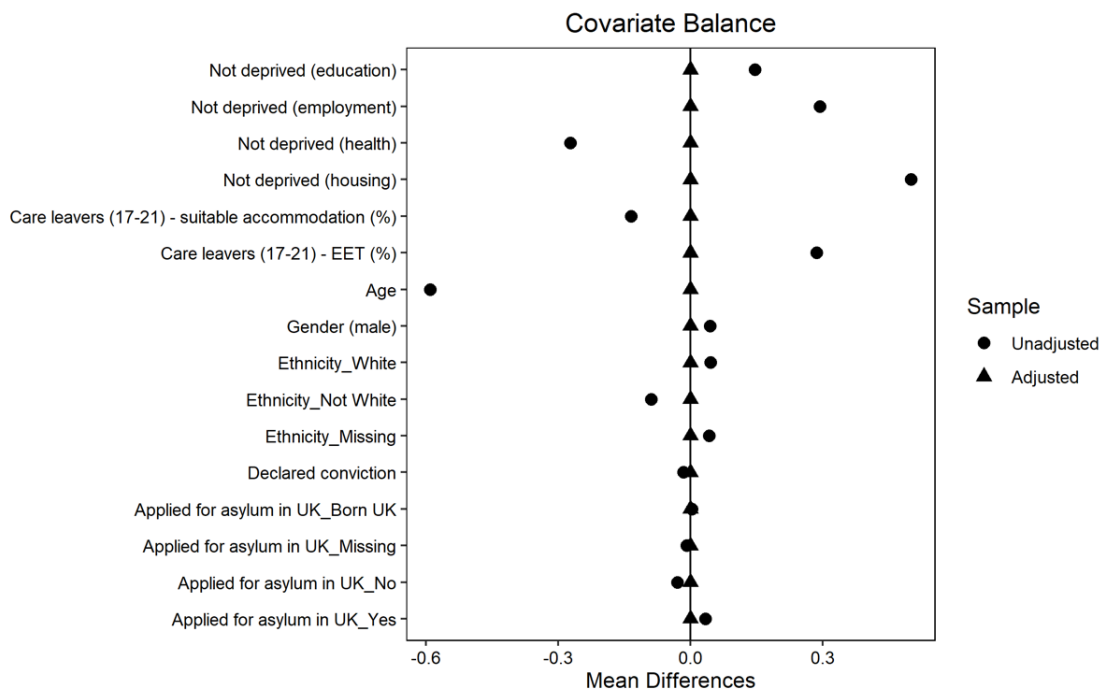
Rely (Wave 1)



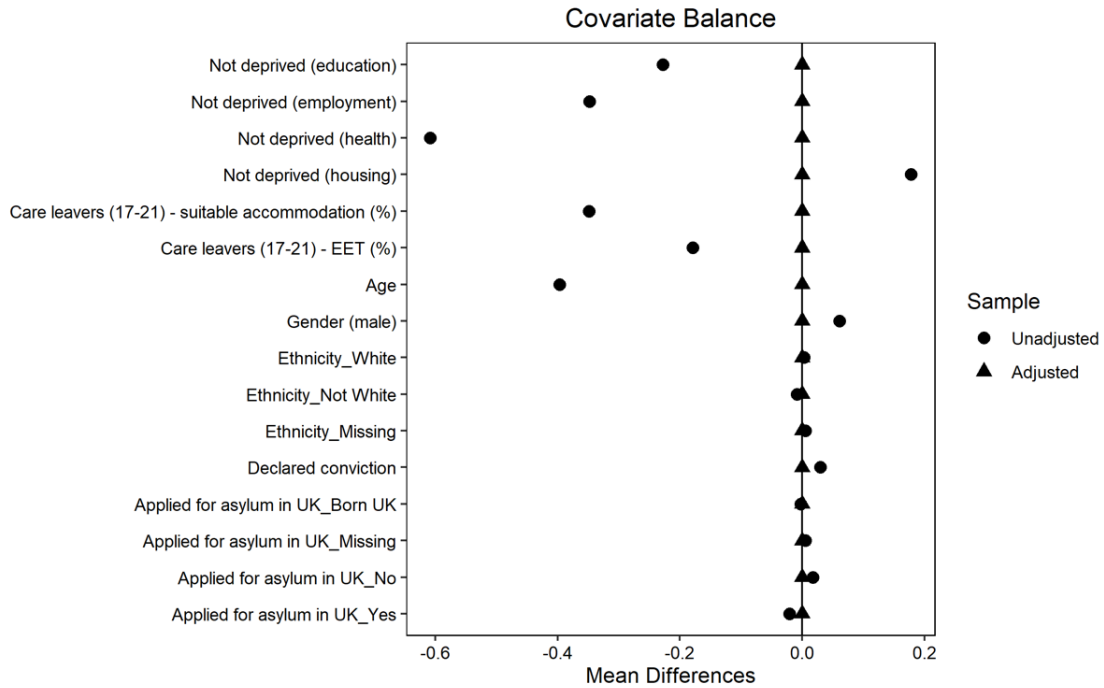
Rely (Wave 2)



Lonely (Wave 1)

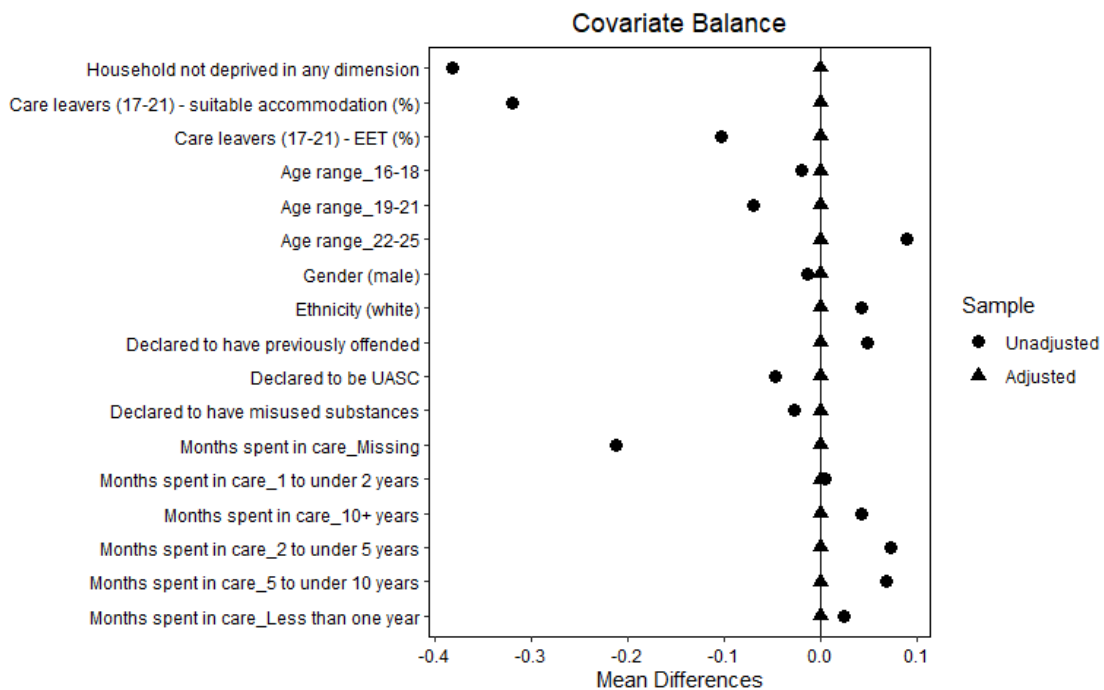


Lonely (Wave 2)

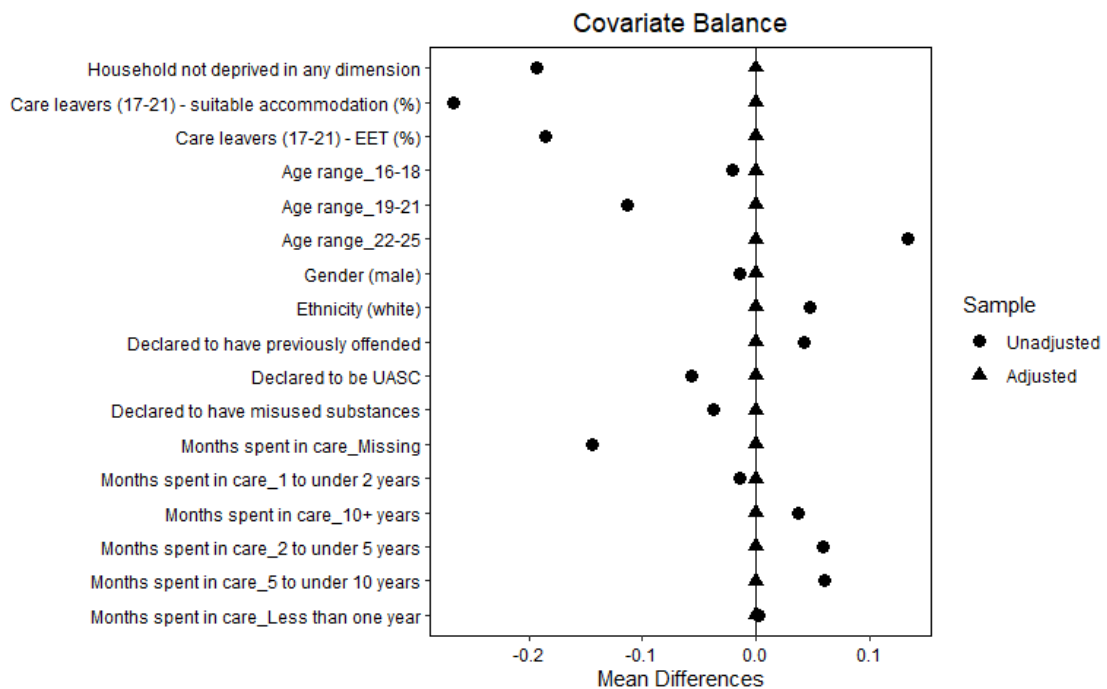
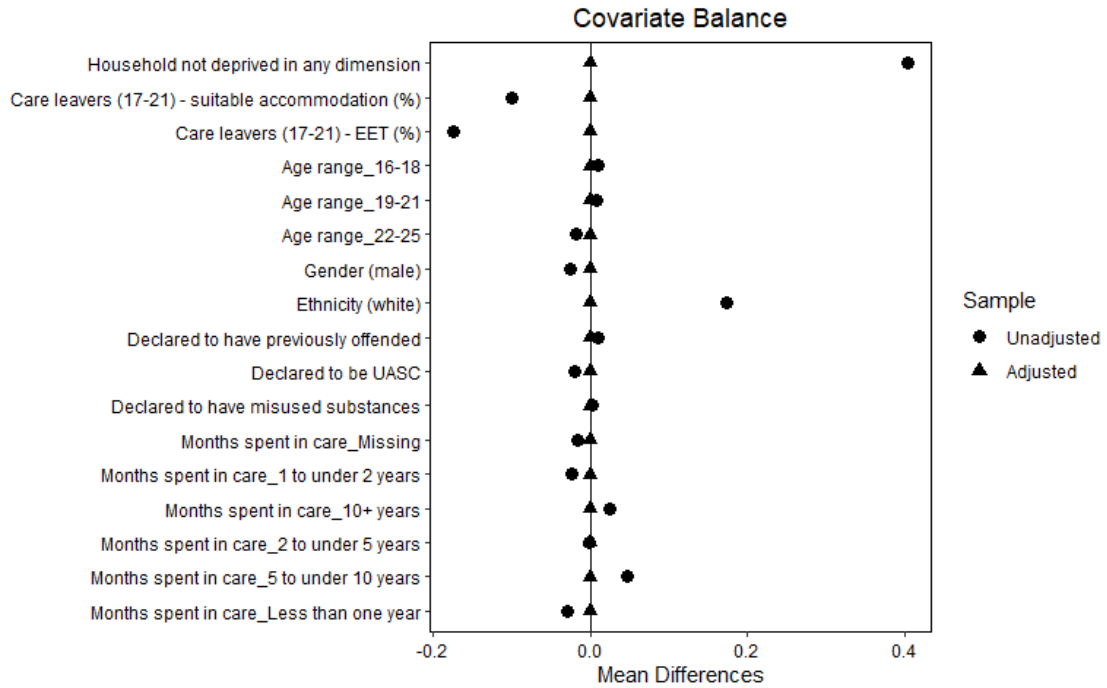


Administrative data

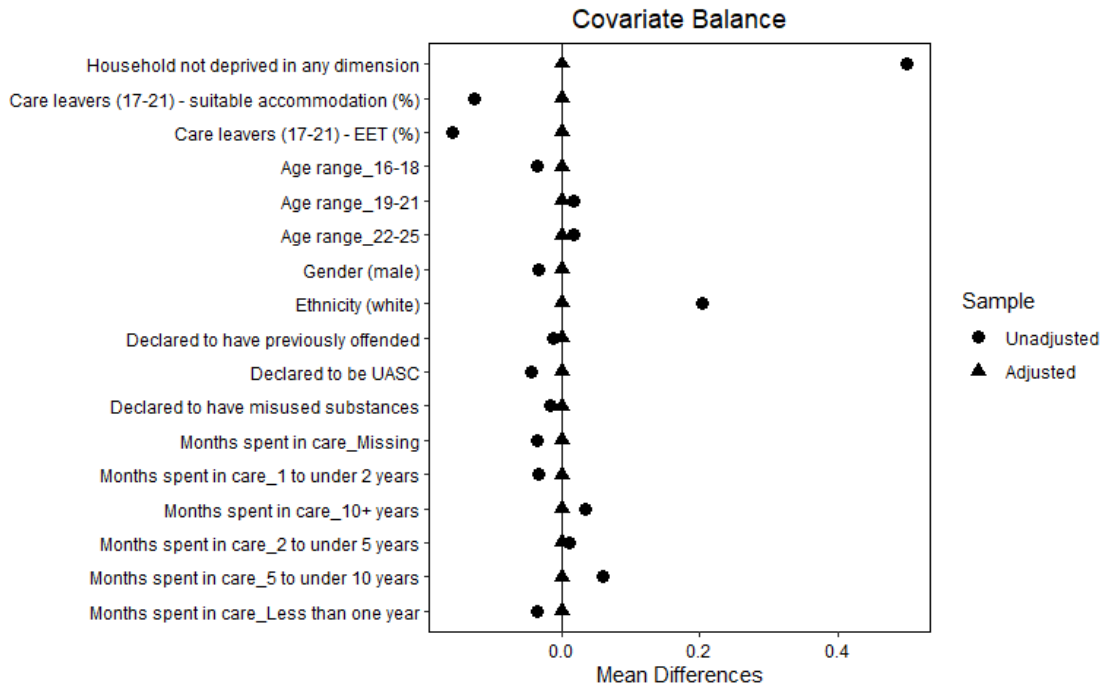
EET (Wave 1)



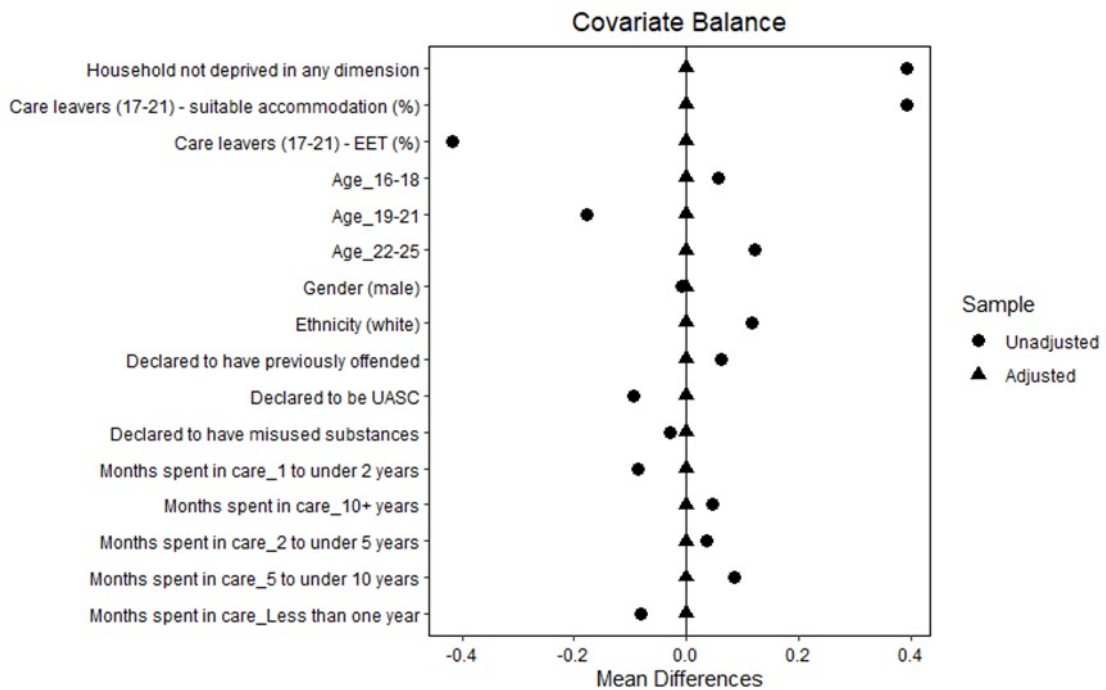
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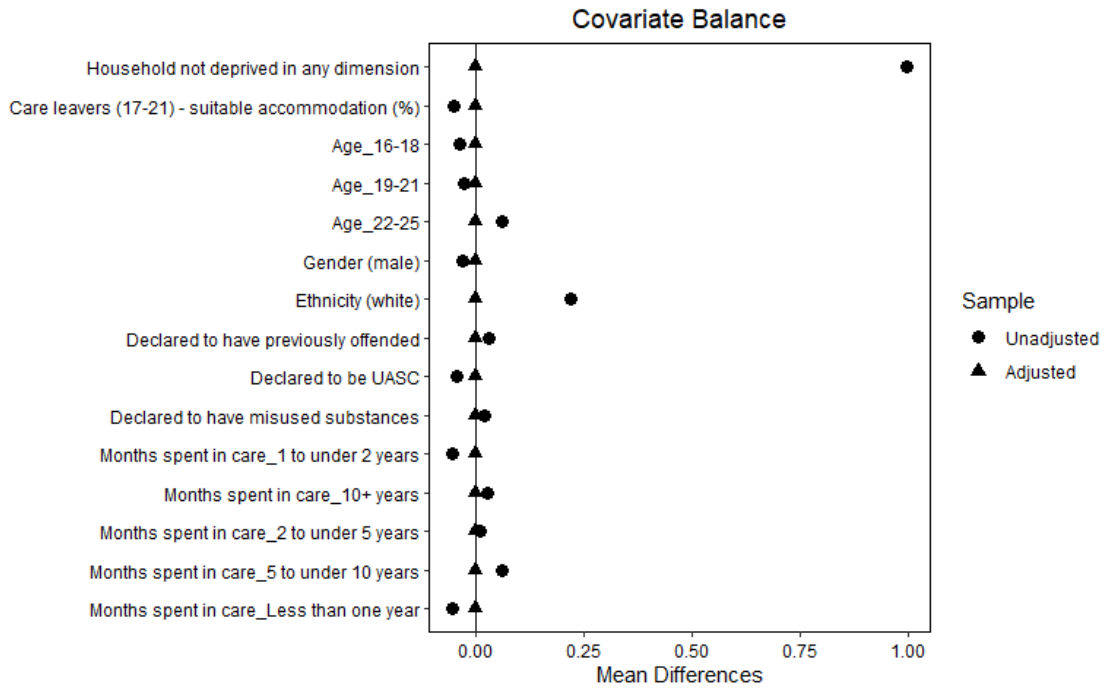
Accommodation suitability (Wave 2)



Accommodation stability (Wave 1)



Accommodation stability (Wave 2)



Appendix B: IPE young person case studies and bid reviews

Wellbeing

Wellbeing case study 1

Young Person: young male asylum seeker was suffering a mental health crisis due to deaths in his family at home.

Situation: The Staying Close PA noticed that there was a decline in his motivation and engagement - he was also losing weight.

Intervention: with the help of different teams of professionals, the Staying Close Coordinator developed a support package to assist the young person in the most appropriate way. His PA took him to a GP appointment, supported him with accessing medication, made sure he was taking the medication and referred him to talking therapy. The PA also ensured that he had enough food, that his bills were being paid and the heating/electricity in the home was functional. The Staying Close Apprentice (care experienced himself) supported the young person in his lifestyle and establishing a better routine: accompanying him to the gym, spending time with him at home and ensuring he was attending college. Wrap around support and multi-disciplinary working effectively supported the young person through a mental health crisis. The young person is now thriving, doing well at college and knows how to deal with these triggers.

Wellbeing case study 2

Young Person: 18 year old NEET trans young person with several mental health issues including ADHD, OCD, and anxiety/depression.

Situation: he had resorted to substance use (drugs and alcohol) to manage his many problems. Due to several license breaches, he had moved accommodation five times. He was estranged from his mother and had split from his partner which led to a mental health crisis. He began to self-harm and exhibit suicidal ideation.

Intervention: the Staying Close team was able to stabilise the situation with mental health support and referrals to services. He was helped to reconnect with his mother and re-establish his relationship with his partner. The Staying Close Co-production Officer built a relationship with him over time which resulted in a significant improvement in his mental health and overall wellbeing. He was encouraged to engage in the community and attend workshops/events. He took part in interview panels and helped produce posters and other materials for the Staying Close team which he distributed around supported accommodation.

Social Connectedness

Young Person: 20-year-old young person who has been in her own tenancy for 7 months. Previously she has had a negative experience within a foster placement, potentially involving trauma.

Situation: Overwhelmed and suffering from several mental health issues, she had not unpacked any boxes and settled into her home. Additionally, she dropped out of her university course as she could not cope with any more stress. She was in survival mode, living on takeaways and self-isolating with extremely low motivation. She works from home, so there is no incentive to go outside. With no links to family and no friends, she is in a worrying situation and her social worker is genuinely concerned about her physical health (she is severely overweight) and her deteriorating mental health and isolation. She is not motivated to open post or engage with bills so there is some risk to maintaining her accommodation. Her social worker referred her to Staying Close.

Intervention: Her Staying Close Mentor encouraged her to come outside for a walk (not an easy task as the young person says she “hates all humans” after what she “been through”). Chatting and ‘opening up’ is easier during an activity and not the usual sitting face-to-face conversation in an office. After they developed a rapport, the mentor kept in regular contact with the young person, taking her for meals and talking about meal planning and shopping for food. They visited the supermarket together by car and selected food items for easy, quick meals. The young person enjoyed these supermarket trips, partly as a social activity but also learned about nutrition and was able to engage in healthy eating and move away from takeaways. This had other positive effects in terms of cost savings and health benefits. As her confidence grew, the young person visited the gym with her mentor and increased her fitness and sense of wellbeing. She is now considering engaging in other social activities such as a cinema trip and shopping at the mall with her mentor and other young people. She looks forward to spending time with her mentor and relaxing, also discussing any problems from the week at work. As her mental health improved, she felt able to tackle her unopened post. Her mentor was able to help her sort out her bills, especially council tax and an incorrect rent demand. She also encouraged the young person around hygiene, both cleaning the flat and attending to self-care.

Accommodation

Young Person: an 18-year-old trans young person who was previously homeless living in a garage and has no links with family and no friends.

Situation: he is struggling with his transition to his affirmed gender while homeless and suffering with several mental health issues. He also has several physical health problems, particularly with his teeth as he has never been to the dentist. He would like to change his name by deed poll, change his name/gender at the bank and with the GP but has no idea how to go about this and feels overwhelmed. He desperately needs stable accommodation and a trusted adult to advocate for him.

Intervention: after referral to Staying Close, he is housed in shared accommodation and is relieved to have “a roof over my head” after a prolonged period of homelessness. He is so happy to be housed in a comfortable home that he refers to it as “a miracle.” He develops a trusting bond with his PA who takes him to register with a GP and access support for his mental health needs. His PA also takes him to a dentist for the first time ever and he enters a stabilisation programme, involving several extractions and treatment for gingivitis. Once his immediate needs are met, his PA then helps him with official documents involving his transition from female to male which makes him happy as he “didn’t have a clue where to start.” He also accessed EET advice via Staying Close and is considering a college course now that he has a stable base and improved mental and physical health.

Appendix C: Eligibility Criteria as Explained in Wave 1

Information should be returned for relevant and former relevant young people aged 16-25 between 1 January 2024 and 31 March 2024. This therefore covers young people whose date of birth is between 1 January 1999 and 31 March 2008).

Young people should be included if they are eligible to receive Staying Close support, even if they are not currently engaging in Staying Close activities.

Care leavers or UASC/former UASC must also have spent at least 13 weeks in residential care or care arrangements that might not be classed or registered as children's homes (i.e. semi-supported accommodation, custodial accommodation) since the age of 14.

Appendix D: Wellbeing and social connectedness survey questionnaire

Ask all / information

Introscreen

Thank you for your interest in the Care Leavers Survey. [Addition for Wave 2: You may have taken part in a similar survey a few months ago. Please continue with this survey. We are interested in how your answers may have changed since then].

This survey is being conducted by Verian, an independent research and evaluation organisation. Verian are working with the Department for Education, the Cabinet Office and the Centre for Homelessness Impact to carry out research looking at the support the government and local councils provide for care experienced young people.

This survey will help us to better understand the lives of young people who have spent time living in care and help the government to support you better. The survey will take around 5–10 minutes and you will receive a £25 shopping voucher as a thank you for taking part. You can use the shopping voucher at a range of different shops.

The questionnaire includes some questions which are of a sensitive nature. If you are not comfortable answering a question please select 'prefer not to say'. All responses and information you provide will be held confidentially by Verian and the Centre for Homelessness Impact. We will only use the details you provide today for research purposes.

By taking part, you consent to Verian using your data for this project. To find out more, and view the privacy notice, [click here](#).

If you have any queries, please contact the Verian team by emailing StayingCloseEvaluation@veriangroup.com so we can get back to you.

LocAuth [Addition to the Wave 2 survey]

Ask all / single code / Drop down list / Autofill

Which local authority are you currently living in? Please choose from the list or type your answer into the search box below.

Please choose one answer only

1. *[Drop down list of LAs]*
2. Don't know
3. Prefer not to say

General Wellbeing

SWEMWBS

Ask all / single code per statement

Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the **last 2 weeks**

1. I've been feeling optimistic about the future
2. I've been feeling useful
3. I've been feeling relaxed
4. I've been dealing with problems well
5. I've been thinking clearly
6. I've been feeling close to other people
7. I've been able to make up my own mind about things
 - a. None of the time
 - b. Rarely
 - c. Some of the time
 - d. Often
 - e. All of the time
 - f. Don't know
 - g. Prefer not to say

Lonely

Ask all / single code

How often do you feel lonely?

Please choose one answer only.

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time
6. Don't know
7. Prefer not to say

Social Connectedness

ESS11

Ask all / single code

Is there someone available who you can count on to listen to you when you need to talk?

Please choose one answer only.

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time
6. Don't know
7. Prefer not to say

ESSI2

Ask all / single code

Is there someone available to you to give you good advice about a problem?

Please choose one answer only.

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time
6. Don't know
7. Prefer not to say

ESSI3

Ask all / single code

Is there someone available to you who makes you feel valued as a person?

Please choose one answer only.

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time
6. Don't know
7. Prefer not to say

ESSI4

Ask all / single code

Is there someone available to help with any infrequent tasks you might need support with?

By this we mean someone who can advise you on what to do if a cooker breaks or you need advice on paperwork such as applying for a passport.

Please choose one answer only.

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time
6. Don't know
7. Prefer not to say

ESSI5

Ask all / single code

Thinking about times when you might want to talk to someone about an emotional issue.

Can you count on anyone to provide you with emotional support (talking over problems or helping you make a difficult decision)?

Please choose one answer only.

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time
6. Don't know
7. Prefer not to say

ESSI6

Ask all / single code

Do you have as much contact as you would like with someone you feel close to, someone you can trust and confide in?

Please choose one answer only.

1. None of the time
2. Rarely
3. Some of the time
4. Often
5. All of the time
6. Don't know
7. Prefer not to say

ESSI7

Ask all / single code

Do you share a living space and kitchen with at least one other person?

Please choose one answer only.

1. Yes
2. No
3. Prefer not to say

Ad hoc social connectedness questions

RELY

Ask all / single code

Thinking about your friends and wider support network, how much can you rely on them if you have a serious problem?

Please choose one answer only.

1. A lot
2. Somewhat
3. A little
4. Not at all
5. Don't know
6. Prefer not to say

Engagement with Staying Close

SC1

Ask all / multi code / endline only

Which, if any, of the following activities have you done or has your personal advisor supported you with?

You can choose more than one answer if you want.

1. Phone calls or text messages with your personal advisor
2. Meeting your personal advisor in person
3. Attending therapy (including music or art therapy)
4. Help developing practical skills
5. Help with college or university applications
6. Help with job applications (for example advice writing a CV or preparing for a job interview)
7. Help applying for benefits

8. Arranging contact with family members or siblings
9. Help finding a work placement or apprenticeship
10. Other (please specify) [Open]
11. Don't know

Demographics

DINTRO

Ask all / info

You are almost at the end of the survey. We would like to collect a little more information about you, such as your gender and where you live so that we can understand the experiences of young people from different backgrounds and with different circumstances. Everything you say is confidential and will be used for research purposes only. You don't have to answer individual questions if you don't want to.

Your answers won't affect the support that you get.

Gender

Ask all / single code

Which of the following best describes your gender?

Please choose one answer only

1. Female
2. Male
3. I identify in some other way (please specify in your own words) [Open]
4. Prefer not to say

DOB

Ask all / numeric response

What is your date of birth?

1. *[Enter date]*
2. Prefer not to say

AGE

Ask if prefer not to give DOB (DOB=2) / single code

How old are you?

Please select one answer only

1. 16
2. 17
3. 18
4. 19
5. 20
6. 21
7. 22
8. 23
9. 24
10. 25
11. Prefer not to say

Housing

Ask all / single code

What type of housing are you currently living in?

Please choose one answer only.

1. Children's home
2. Social rented housing (renting from the local council or a housing association)
3. Private rented housing (renting from a person or private landlord)

4. Supported housing (accommodation provided alongside support and/or supervision)
5. Sheltered accommodation (by this we mean there that you have support available all the time and a support worker may sleep on site)
6. Semi-independent housing (for example a flat or pod on the same site as a children's home)
7. Residential school
8. Living with family or friends
9. Staying with family or friends temporarily
10. Other (please specify) [Open]
11. Don't know
12. Prefer not to say

Parent

Ask all / single code

Do you have parental responsibility for any children under the age of 16 who live with you?

Please select one answer only.

1. Yes
2. No
3. Prefer not to say

EET

Ask all / multi code

Which, if any, of these have you done in the last month?

You can choose more than one answer if you want

1. Studying for a qualification
2. Employed – full time (30 hours or more a week)
3. Employed – part time (less than 30 hours a week)
4. Self-employed
5. Unemployed and looking for work
6. Unemployed and not looking for work

7. Voluntary work
8. Caring for children
9. Coping with a long-term condition or disability
10. Maternity, paternity or parental leave
11. Prefer not to say

Asylum1

Ask all / single code

Have you ever applied for asylum in the UK?

People apply for asylum if they have left their country to seek protection from persecution or serious human rights violations.

Please select one answer only.

1. Not applicable – I was born in the UK
2. No
3. Yes
4. Prefer not to say

SensCheck

Ask all / single code

The next questions are about your ethnicity, health and criminal offence information, which is classed as sensitive data. It will be used for data classification purposes only. It will remain confidential in line with our privacy policy. If answering these questions makes you uncomfortable, please feel free to choose the answer “No, I do not agree”.

Do you agree to answer these questions on this basis?

Please choose one answer only

1. Yes, I agree
2. No, I do not agree

Ethnicity

Ask if consent to sensitive questions senscheck=1 / single code

Which of the following best describes your ethnic group? Choose one option that best describes your ethnic group or background.

Please choose one answer only

1. White
2. Mixed/multiple ethnic groups
3. Asian / Asian British
4. Black / African / Caribbean / Black British
5. Other ethnic group
6. Prefer not to say

Health

Ask if consent to sensitive questions senscheck=1 / single code

Do you have any physical or mental health conditions or disabilities lasting or expected to last for 12 months or more?

Please choose one answer only

1. Yes
2. No
3. Prefer not to say

Convictions

Ask if consent to sensitive questions senscheck=1 / single code

Do you have any criminal convictions of any kind?

Please select one answer only.

1. Yes
2. No
3. Prefer not to say

PostCode

Ask all / Open

What is your home post code?

We are asking this so that we can understand the results in different areas.

1. *[Open]*
2. Don't know
3. Prefer not to say

Closing questions

HELP

ASK ALL / single code

Which of the following statements best describes how you completed this survey?

1. I completed the survey on my own
2. I had help to complete the survey
3. Prefer not to say

Recontact [Wave 1 only]

Ask all / open

We would like to invite you to take part in a follow-up survey in the next few months. The survey would include the same questions and you will be given a second shopping voucher as a thank you for your time if you take part.

It would be helpful for us to be able to link your responses to this survey to your responses to the follow-up survey.

If you consent to us linking your responses to the two surveys, please provide your full name below.

1. *[Open]*
2. I do not want my survey responses to be linked. [EXCLUSIVE]

DataLink

Ask All / open

You may have taken part in a previous survey a few months ago. If so, we would like to link your responses back to the previous survey. This would be very helpful for our research.

If you are happy for us to link your responses, please enter your full name in the box below.

If you do not want us to link your responses, please select 'I do not want my survey responses to be linked'.

If you did not take part in the previous survey, please select the 'not applicable' option

1. Full name: *[Open]*
2. I do not want my survey responses to be linked
3. Not applicable – I did not take part in the previous survey

RecontactQual

Ask all / open

We will also carry out some follow-up interviews in the next few months. The interview will take place online and last for around 30-45 minutes. You will receive another thank-you voucher worth £40 for taking part.

Participation is entirely voluntary and you can decide not to take part at any time. If you would like to be contacted about the follow-up interview, please enter your email address into the box below. Depending how many people respond, we may not be able to interview everyone.

1. Email address: *[Open]*
2. I do not wish to take part in a follow-up interview

Email

ASK ALL

This is the end of the survey, thank you for your responses.

As a thank you for taking part, we would like to send you a £25 Love2Shop voucher which we will send out in the next 2 weeks.

We will only use your contact information to send your shopping voucher.

Please enter the best name and email address to send your voucher to.

1. First Name *[Open]*
2. Last Name *[Open]*
3. Email address *[Open]*
4. Confirm email address *[Open]*
5. I would prefer not to receive a voucher – I do not want to share my contact details

Close_finalscreen

Ask all / text only

Email: stayingcloseevaluation@veriangroup.com

Some of the questions in this survey might have raised some challenging or upsetting issues for you. We're really grateful that you have taken part and want to make sure that you have access to the support and guidance you may need. Below you can find a list of support services and charities you may find useful:

The NHS: mental health services are free on the NHS. Find out about the different ways to get help with your mental health, the process, and your rights.

www.nhs.uk/mental-health/social-care-and-your-rights/how-to-access-mental-health-services/

Samaritans: confidential listening service 'a safe place for you to talk any time you like'

www.samaritans.org or you can call: 116 123

Shout: provides free, confidential text message support for anyone struggling to cope

Text 'shout' to 85258

Every mind matters: expert advice and practical tips to help you look after your mental health and wellbeing, including sleep, self-care, and dealing with change

<https://www.nhs.uk/every-mind-matters/>

Appendix E: Local authority administrative data questionnaire

la_code

Local authority geographic ID

child_id

Unique ID for each child

in_touch

Indicates whether the local authority was in touch with the individual during the past year.

1. No
2. Yes

gender

What is the individual's gender?

1. Female
2. Male
3. Other

age

Individual's age

ethnicity

Which of the following best describes the individual's ethnic group? Choose one option that best describes your ethnic group or background.

Please choose one answer only

1. White
2. Mixed/multiple ethnic groups

3. Asian / Asian British
4. Black / African / Caribbean / Black British
5. Other ethnic group
6. Prefer not to say

uasc

Indicates if individual is or has been an unaccompanied asylum-seeking child

1. No
2. Yes

adoption

Indicates whether the individual has previously been adopted.

1. No
2. Yes

convicted

Indicates whether the individual has previously offended (including current ongoing or outstanding convictions).

1. No
2. Yes

substance_use

Indicates whether individual has previously been identified as having a substance use problem.

1. No
2. Yes

sdq_score

This is a single score from the latest strengths and difficulties questionnaire (SDQ)

care_time

How many months did individual spend living in care?

E.g. if individual spent 2 years then the answer would be 24 months.

EET_status

Is the individual is engaged in higher education, education other than higher education, apprenticeship, training or employment.

1. No
2. Yes

EET_type

Is the individual engaged in the following:

Please choose one answer only, reporting their primary occupation:

1. higher education
2. education other than higher education
3. apprenticeship
4. training or employment
5. Not in education, training or employment (inc. apprenticeships)

accommodation_suitability

Whether the individual's accommodation is considered suitable (based on guidance for Children Looked After in England statistics):

1. No
2. Yes

accommodation_stability

The individual's number of accommodation moves in the past year.

temporary_accomodation

The type of accommodation status of each individual according to the following:

1. No abode
2. Temporary accommodation
3. Accommodation (not temporary)

Appendix F: List of variable details for local authority matching

Variable name	Description	Source
la_edu_not_deprived	Proportion of households not deprived in the education dimension of the household deprivation indicator	Census
la_health_not_deprived	Proportion of households not deprived in the health and disability dimension of the household deprivation indicator	Census
la_housing_not_deprived	Proportion of households not deprived in the housing dimension of the household deprivation indicator	Census
la_emp_not_deprived	Proportion of households not deprived in the employment dimension of the household deprivation indicator	Census
la_total_edu_emp_trn	Proportion of care leavers in education, employment, or training	CLA statistics
la_accom_suitable	Proportion of care leavers in accommodation considered 'suitable'	CLA statistics

Notes: CLA = Children Looked After in England. CLA data has been aggregated across the 17 to 21 age groups (i.e. 16-17 and 19-21).

Appendix G: Comparison of original and the adapted questions from ENRICHD Social Support Instrument (ESSI) social connectedness measure

Question	Original question text	Adapted question text included in survey	Response scale	Question text included in original form?
Item 1	Is there someone available whom you can count on to listen to you when you need to talk?	Is there someone available whom you can count on to listen to you when you need to talk?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time 6.Don't know 7.Prefer not to say	Yes
Item 2	Is there someone available to you to give you good advice about a problem?	Is there someone available to you to give you good advice about a problem?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time 6.Don't know 7.Prefer not to say	Yes

Question	Original question text	Adapted question text included in survey	Response scale	Question text included in original form?
Item 3	Is there someone available to you who shows you love and affection?	Is there someone available to you who makes you feel that you belong?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time 6.Don't know 7.Prefer not to say	No
Item 4	Is there someone available to help with daily chores?	Is there someone available to help with any infrequent tasks you might need support with?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time 6.Don't know 7.Prefer not to say	No
Item 5	Can you count on anyone to provide you with emotional support (talking over problems or helping you make a difficult decision)?	Can you count on anyone to provide you with emotional support (talking over problems or helping you make a difficult decision)?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time 6.Don't know 7.Prefer not to say	Yes
Item 6	Do you have as much contact as you would like with someone you feel close to, someone in whom you can trust and confide in?	Do you have as much contact as you would like with someone you feel close to, someone in whom you can trust and confide in?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time 6.Don't know 7.Prefer not to say	Yes
Item 7	Are you currently married or living with a partner?	Do you share a living space and kitchen with at least one other person?	1.Yes 2.No 3.Prefer not to say	No

Appendix H: Details of the changes to the ENRICHD Social Support Instrument (ESSI) social connectedness measure

We will consider the following changes to the ESSI measure of social connectedness. These changes aim to ensure the measure is appropriate for care leavers and young people. These suggested changes and questions will be cognitively tested with a sample of young care leavers before the questionnaire is finalised.

Item 3 helps to understand the quality of relationships that respondents have. However the language is not appropriate for young people who will have experienced trauma within their biological families. Instead, we suggest changing the phrasing to cover a sense of belonging: Is there someone available to you who makes you feel that you belong? Alternatively, this question could be simplified to: Is there someone available to you who cares about you?

Item 4 provides insight into the practical support available to residential care leavers. But the 'daily chores' example is not relevant for this audience. We suggest replacing with a question asking about support available with infrequent or more demanding tasks where young people might typically rely on family networks for help and advice: Is there someone available to help with any practical tasks you might need support with? By this we mean someone who can advise you on what to do if a cooker breaks or you need advice on paperwork such as applying for a passport etc.

Item 7 asks whether the respondent has the support of a long-term partner at home. As many residential care leavers will be under the age of 18, this question is not appropriate. We suggest asking about their living situation. Understanding whether there is anyone home at the end of the day will provide a rough indication of social interaction available at home: At home, do you share a kitchen and living space with at least one other person?

Appendix I: Comparison of response scale between SWEMWBS and original ESSi indicator

SWEMWBS response scale	Original ESSi response scale
None of the time	None of the time
Rarely	A little of the time
Some of the time	Some of the time
Often	Most of the time
All of the time	All of the time

Appendix J: Comparison of original and adapted questions from Understanding Society longitudinal survey related for Rely, Lonely and Neighbourhood

	Original question text	Original response scale	Revised question text	Revised response scale
Rely	Thinking about your friends... How much can you rely on them if you have a serious problem?	1.A lot 2.Somewhat 3.A little 4.Not at all 5.Don't know 6.Prefer not to say	Thinking about your friends and wider support network, how much can you rely on them if you have a serious problem?	1.A lot 2.Somewhat 3.A little 4.Not at all 5.Don't know 6.Prefer not to say
Lonely	How often do you feel lonely?	1.Never 2.Hardly ever 3.Occasionally 4.Some of the time 5.Often 6.Always 7.Don't know 8.Prefer not to say	How often do you feel lonely?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time 6.Don't know 7.Prefer not to say

Appendix K: Short Warwick–Edinburgh Mental Well-being Scale (SWEMWBS)

Question	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks...	Response scale
Item 1	I've been feeling optimistic about the future	1. None of the time 2. Rarely 3. Some of the time 4. Often 5. All of the time
Item 2	I've been feeling useful	1. None of the time 2. Rarely 3. Some of the time 4. Often 5. All of the time
Item 3	I've been feeling relaxed	1. None of the time 2. Rarely 3. Some of the time 4. Often 5. All of the time
Item 4	I've been dealing with problems well	1. None of the time 2. Rarely 3. Some of the time 4. Often 5. All of the time

Question	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks...	Response scale
Item 5	I've been thinking clearly	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time
Item 6	I've been feeling close to other people	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time
Item 7	I've been able to make up my own mind about things	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time

Appendix L: Adapted ESSI questions measuring care leaver's social connectedness

Question	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks...	Response scale
Item 1	Is there someone available whom you can count on to listen to you when you need to talk?	1. None of the time 2. Rarely 3. Some of the time 4. Often 5. All of the time
Item 2	Is there someone available to you to give you good advice about a problem?	1. None of the time 2. Rarely 3. Some of the time 4. Often 5. All of the time
Item 3 *	Is there someone available to you who makes you feel that you belong?	1. None of the time 2. Rarely 3. Some of the time 4. Often 5. All of the time
Item 4 *	Is there someone available to help with any infrequent tasks you might need support with?	1. None of the time 2. Rarely 3. Some of the time 4. Often 5. All of the time

Question	Below are some statements about feelings and thoughts. Please tick the box that best describes your experience of each over the last 2 weeks...	Response scale
Item 5	Can you count on anyone to provide you with emotional support (talking over problems or helping you make a difficult decision)?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time
Item 6	Do you have as much contact as you would like with someone you feel close to, someone in whom you can trust and confide in?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time
Item 7*	Do you share a living space and kitchen with at least one other person?	2.No 4. Yes

* The item is not included in its original form. It has been adapted for the purposes of this study.

Appendix M: Adapted ESSi questions measuring care leaver's social connectedness

Question	Question text	Response scale
Rely	Thinking about your friends and wider support network, how much can you rely on them if you have a serious problem?	1.A lot 2.Somewhat 3.A little 4.Not at all
Lonely	How often do you feel lonely?	1.None of the time 2.Rarely 3.Some of the time 4.Often 5.All of the time

Appendix N: Ancillary outcomes

Rely

This outcome measure was transformed from its original Likert scale. The question “Thinking about your friends and wider support network, how much can you rely on them if you have a serious problem?” had four response options: a lot, somewhat, a little, not at all. We recoded the responses into a binary measure where “a lot” equals one and everything else equals zero.

Table 28. Rely outcome summary

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
Rely (Wave 1)	195 (14)	37.4	135 (12)	46.6	34.1	-9.9 [-24.4, 4.6]
Rely (Wave 2)	370 (44)	31.9	160 (21)	42.3	39.4	-15.8 [-24.6, -6.9]

Note: n = Sample; miss = Missing; Wt n = Weighted sample size

The 95% CI for the Rely outcome straddles zero at Wave 1, and are compatible with a large negative to negligible impact. At Wave 2, Staying Close was associated with a 16 percentage point worse outcome than the comparison group (equivalent to a Cox Index of -0.40). The 95% CIS as re wave two are compatible with a small-to-large negative effect.

Lonely

This measure captures responses to the question “How often do you feel lonely?”. The outcome measure was on a five-point Likert scale, with responses ranging from “none of the time” (1) to “all of the time” (5).

Table 29. Lonely outcome summary

Outcome	Unadjusted					Entropy balanced	
	Staying Close		Comparison			Est [95% CI]	Glass's δ [95% CI]
	n (miss)	M (SD)	n (miss)	Wt n	M (SD)		
Lonely (Wave 1)	198 (11)	3.01 (1.16)	142 (5)	41.5	2.97 (1.21)	0.07 [-0.20, 0.34]	0.06 [-0.17, 0.28]
Lonely (Wave 2)	390 (24)	3.04 (1.08)	172 (9)	45.9	2.90 (1.11)	0.24 [0.03, 0.45]	0.22 [0.02, 0.41]

Note: n = Sample; miss = Missing; Wt n = Weighted sample size; M = Mean; SD = Standard deviation; Est = Simple estimate in original measure units

The 95% CI for the Lonely outcome straddles zero at Wave 1, and it is compatible with a small negative to small positive effect. At Wave 2, Staying Close was associated with a worse outcome than the comparison group (small effect, with CIs compatible with a negligible to moderate negative effect).

EET (survey)

In the survey, we asked individuals to report their primary occupation. Based on their responses, we created a binary variable: a value of 1 indicates that, at the time of data collection, the individual was studying, employed (either full- or part-time), or self-employed; a value of 0 indicates they were not engaged in any of these activities.

Table 30. EET outcome summary

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
EET (Wave 1)	206 (3)	45.6	147 (0)	45.3	46.3	-14.7 [-22.5, -6.9]
EET (Wave 2)	408 (6)	47.5	177 (4)	47.5	53.1	-7.7 [-14.1, -1.4]

Note: n = Sample; miss = Missing; Wt n = Weighted sample size

Participants in Staying Close areas were less likely to be in EET than those in comparison areas by 14.7 percentage points at Wave 1 (moderate negative effect, associated with a Cox Index of -0.36) and 7.7 percentage points at Wave 2 (small negative effect associated with a Cox Index of -0.19). The 95% CIs are compatible with a negligible-to-large negative impact.

Appendix O: Sensitivity analyses

This section contains additional analyses to help us to understand the findings above. Here we investigate sensitivity of the estimates to changes in covariates, sample composition and model specification.

Primary outcomes

Linked wave 1 and wave 2 sample primary outcome analysis

We re-ran the primary analyses for young people who responded to the survey in both waves and gave their consent to link their answers between the two time points. Initially, we planned to focus on outcomes for 16- to 18-year-olds, to investigate effects for young people who recently left care, using Wave 1 as a covariate; however, the sample size was too small for any meaningful analysis, so instead we included all ages. These analyses estimate any additional change between Wave 1 and Wave 2 for Staying Close over and above change in the comparison group. Our expectation here was that the result will be zero, since Wave 1 is not a baseline measure and follows exposure to Staying Close for many participants.

For both outcomes, confidence intervals straddle zero and are compatible with negative, zero, or positive effects of Staying Close.

Table 31. Results of SWEMWBS (Wave 2) and ESSI (Wave 2), conditioning on Wave 1 measures of the same outcome in Wave 1

Outcome	Unadjusted					Entropy balanced	
	Staying Close		Comparison			Est [95% CI]	Glass's δ [95% CI]
	n (miss)	M (SD)	n (miss)	Wt n	M (SD)		
SWEMWBS metric (Wave 2) conditioning on SWEMWBS wave 1 with covariates in outcomes model	84 (2)	21.10 (4.76)	57 (0)	33.5	21.91 (5.17)	0.47 [-0.77, 1.70]	0.09 [-0.15, 0.33]
ESSI (Wave 2) conditioning on ESSI wave 1 with covariates in outcomes model	83 (3)	25.30 (5.46)	56 (1)	31.3	26.36 (5.98)	-1.05 [-2.48, 0.39]	-0.17 [-0.42, 0.07]

Note: n = Sample; miss = Missing; Wt n = Weighted sample size; M = Mean; SD = Standard deviation; Est = Simple estimate in original measure units

Secondary outcomes

Secondary outcome analysis without covariates in the regression

To assess the robustness of our main findings to the selection of covariates, we re-ran the regressions on the secondary outcomes using entropy-balanced data, dropping all the covariates from the outcome models (i.e. regressing only on the “Staying Close” vs “comparison” indicator). Overall, our findings remain consistent with the doubly-robust estimates for EET and accommodation stability. However, the estimate for accommodation suitability at Wave 2 decreases from 14.9 to 2.4 percentage points. The inflated estimate appears to be driven by the area-level percentage of care leavers in suitable accommodation. The table below shows the results of a regression that excludes this variable. These findings suggest a small to moderate positive effect in Staying Close areas.

Table 32. Accommodation suitability outcome summary (without covariates in the regression)

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
Accommodation deemed suitable (Wave 1)	3385 (732)	95.1	1448 (206)	839.5	93.8	2.6 [0.3, 4.8]
Accommodation deemed suitable (Wave 2)	4506 (572)	94.1	2197 (134)	655.3	92.6	2.4 [-0.2, 5.0]
Accommodation deemed suitable (Wave 2) – removing only area level accommodation suitability	4506 (572)	94.1	2197 (134)	655.3	92.6	2.8 [1.5, 4.0]

Note: n = Sample size; miss = Missing; Wt n = Weighted sample size; % point diff = Percentage point difference

Linked wave 1 and wave 2 sample secondary outcome analysis

As a sensitivity analysis, we subset the admin data to:

- Care leavers aged 16 to 18, as they would more likely belong to the cohort of young people leaving care between January and March 2024.
- Care leavers with data in both waves of data collection (i.e. linked sample), so we can account for their “baseline” outcome.

In addition, we explored the effect on EET status in Wave 2 using the same model specifications as the secondary analysis plus an “extended” specification that conditions the estimate on the EET status in Wave 1.

Table 33. Results EET Wave 2 with linked sample, conditioning on EET in Wave 1

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
EET status (Wave 2) linked sample	482 (2422)	55.0	197 (282)	44.5	68.5	-4.2 [-11.3, 2.9]
EET status (Wave 2) linked sample conditioning on EET Wave 1	482 (2422)	55.0	197 (282)	44.3	68.5	10.0 [1.2, 18.9]

Note: n = Sample; miss = Missing; Wt n = Weighted sample size

When constraining the sample to 16 to 18 year olds with admin data in both waves, our findings were compatible with a null effect on EET (Cox Index -0.1).. However, when controlling for EET status in Wave 1, the estimate swings from negative to positive, and the 95% CI is compatible with a small to moderate positive effect in the proportion of care leavers in EET within Staying Close areas (Cox Index 0.24)..

Table 34. Results accommodation suitability Wave 2 with linked sample, conditioning on accommodation suitability in Wave 1

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
Accommodation suitability (Wave 2) linked sample	618 (2286)	95.3	203 (276)	43.5	95.6	2.6 [-1.5, 6.7]
Accommodation suitability (Wave 2) linked sample conditioning on acc. suitability wave 1	618 (2286)	95.3	203 (276)	42.4	95.6	0.9 [-0.8, 2.6]

The 95% CIs on accommodation suitability with the linked sample cross zero in both waves, and are compatible with a small negative effect to a moderate positive effect. The Cox Index of the estimates are 0.28 and 0.11, respectively. The linked sample available for analysing accommodation stability is relatively small, and after balancing, the effective sample size for the comparison group was reduced to just 15 care leavers. Given this limitation, we chose not to run the sensitivity analysis with the linked sample on number of moves.

Individual deprivation measures

For the main analysis we have used a composite measure of household deprivation that is the proportion of households in the LA that are deprived in at least one of the four dimensions, namely employment, education, health and housing. Although the protocol stated that we would use the four deprivation measures independently, we found that entropy balancing was unable to converge.

Table 35. Results of accommodation stability with individual deprivation measures

Outcome	Unadjusted					Entropy balanced	
	Staying Close		Comparison			Est [95% CI]	Glass's δ [95% CI]
	n (miss)	M (SD)	n (miss)	Wt n	M (SD)		
Number of moves (wave 1) with individual deprivation measures	2104 (2013)	0.81 (1.25)	1230 (424)	27 9.4	0.64 (1.10)	-12.00 [-15.30, -8.69]	-10.88 [-13.88, -7.88]
Number of moves (wave 2) with individual deprivation measures	2404 (2674)	0.96 (1.35)	1472 (859)	48 9.9	0.84 (1.07)	-35.28 [-70.24, -0.33]	-32.95 [-65.59, -0.31]

Note: miss = Missing; Wt n = Weighted sample size; Est = Simple estimate in original measure units; M = Mean; SD = Standard deviation

Furthermore, when the four individual measures were included in the outcomes model it produced extreme and unreliable estimates. Therefore, we decided against using separate deprivation measures in the admin data analysis. Table 35 shows the results of the “accommodation stability” models, replacing the composite deprivation measure with four separate covariates in the outcomes model.

Total Difficulties Score from the Strengths and Difficulties Questionnaire (SDQ) as proxy for baseline measure

The administrative data provided by local authorities for this pilot evaluation includes an SDQ score that, in principle, reflects the period when the young person was still in care, and therefore could serve as a pre-intervention baseline measure. Local authorities are required to submit the Social Services Department Annual return 903 (SSDA903) on every child who had been in care at any time during the 31st March each financial year. The purpose of the SSDA903 is to capture individual-level longitudinal data on looked-after children to provide the government with the means to evaluate the outcome of policy initiatives and to monitor objectives of children in care and on reaching adulthood. As part of this data return, a strengths and difficulties questionnaire (SDQ) must be completed for all children and young people who have been looked-after continuously for at least 12 months as of 31st March, and who were aged between 4 years old and 16 years old (inclusive) on the date of the last assessment.⁹

To determine if the SDQ scores reflect an assessment of one point in time when the young person was still in care (i.e. pre-intervention), we compared the scores for young people who had administrative data returns in both waves of data collection. Reassuringly, we found that 97.5% of cases had consistent SDQ scores in both waves. Therefore, for this sensitivity analysis, we included all cases with SDQ information in either wave.

Table 36. SDQ sample descriptives

Variable	Wave	Staying Close			Comparison			Mean diff	Glass's δ
		M	SD	Valid n	M	SD	Valid n		
SDQ	1	13.94	7.87	2,038	14.89	8.97	770	-0.94	-0.11
	2	14.20	7.83	2,250	13.50	7.95	972	0.71	0.09

The sensitivity analysis on EET includes all covariates used in the secondary analysis plus the SDQ score. For the entropy balancing we dropped percentage of care leavers in EET and percentage of care leavers in suitable accommodation (Wave 2)- due to the weights not converging with all variables.

Table 37. Results EET conditioning on SDQ

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
EET status (Wave 1) conditioning on SDQ	1539 (2578)	52.1	696 (958)	296.7	47.4	8.2 [0.7, 15.6]
EET status (Wave 2) conditioning on SDQ	1599 (3479)	37.0	922 (1409)	550.7	45.1	-13.0 [-20.8, -5.1]

Our results indicate that, among young people with similar Total Difficulties scores, those in Staying Close areas were more likely to be in EET at wave 1, but less likely to be in EET at wave 2, compared to their peers in the comparison areas. The 95% CIs are compatible with a small-to-moderate positive effect in wave 1 (Cox Index 0.19), and with a moderate-to-large negative effect in wave 2 (Cox Index -0.32).

Table 38. Results accommodation suitability conditioning on SDQ

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
Accommodation deemed suitable (wave 1) conditioning on SDQ	1628 (2489)	95.9	704 (950)	314.8	92.9	9.5 [1.8, 17.1]
Accommodation deemed suitable (wave 2) conditioning on SDQ	1986 (3092)	94.6	931 (1400)	267.8	94.0	30.6 [23.5, 37.8]

For accommodation suitability, we included all the covariates from the secondary analysis plus the SDQ score. For the entropy balancing we dropped the percentage of care leavers in suitable accommodation. The results suggest that, in both waves, care leavers in Staying Close areas were more likely to be in accommodation deemed suitable by the local authority. Both estimates indicate a large positive effect (Cox Index 0.79 and 1.4 respectively). These findings are consistent in sign with those from the secondary analysis, though the effect sizes are larger.

Table 39. Results accommodation stability conditioning on SDQ

Outcome	Unadjusted					Entropy balanced	
	Staying Close		Comparison			Est [95% CI]	Glass's δ [95% CI]
	n (miss)	M (SD)	n (miss)	Wt n	M (SD)		
Number of accommodation moves (Wave 1) conditioning on SDQ	1056 (3061)	0.90 (1.38)	723 (931)	35 9.4	0.67 (1.14)	-0.02 [-0.26, 0.22]	-0.02 [-0.23, 0.19]
Number of accommodation moves (Wave 2) conditioning on SDQ	1191 (3887)	1.11 (1.46)	774 (1557)	40 2.7	0.79 (1.10)	0.13 [-0.03, 0.29]	0.12 [-0.03, 0.27]

The models for accommodation stability include all the covariates from the secondary analysis along with the SDQ score. However, to run the entropy balancing we had to exclude percentage of care leavers in EET (area-level), percentage of care leavers in suitable accommodation (area-level) and months spent in care (individual-level). Consistent with the secondary analysis, the results indicate that there is no difference in the number of accommodation moves between care leavers in Staying Close areas and those in the comparison areas. The wide 95% CIs suggest that the true effect could range from a small-to-moderate positive to a small-to-moderate negative effect, indicating substantial uncertainty.

Excluding areas that spent less than 50% of the funding

Informed by the cost templates from the economic evaluation, we limited our treatment sample to the areas that, to the best of our knowledge, allocated at least 50% of their Staying Close funding. These are: Bristol, Cheshire East, Darlington, Doncaster, Dorset, Enfield, Gloucestershire, Hartlepool, Leicester, Lincolnshire, Manchester, Northamptonshire, Sheffield, Stockport and Wolverhampton. All except Enfield and Manchester are included in the following analysis of the admin data (13 areas). The twelve comparison areas remained unchanged.

Table 40. Results EET with sample subset

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
EET status (Wave 1)	1445 (420)	50.1	1546 (108)	388.3	50.4	-9.9 [-15.8, -4.0]
EET status (Wave 2)	2078 (190)	40.6	2161 (170)	1,075.8	53.8	-13.0 [-22.6, -3.4]

Our findings indicate a small to moderate negative effect on EET (Cox Index -0.24 and -0.32, respectively). After excluding 17 of the 30 Staying Close areas based on cost data, care leavers in the remaining Staying Close areas are between 3.4 and 22.6percentage points less likely to be in Education, Employment, or Training compared to those in the comparison areas.

Table 41. Results accommodation suitability with sample subset

Outcome	Unadjusted					Entropy balanced
	Staying Close		Comparison			
	n (miss)	%	n (miss)	Wt n	%	% point diff [95% CI]
Accommodation deemed suitable (Wave 1)	1513 (352)	95.5	1448 (206)	468.5	93.8	4.2 [2.1, 6.3]
Accommodation deemed suitable (Wave 2)	2067 (201)	93.9	2197 (134)	1,082.0	92.6	0.8 [-0.7, 2.3]

Regarding accommodation outcomes, the findings indicate a moderate-to-large positive effect in Wave 1, meaning that care leavers in the thirteen areas that reported spending at least 50% of their Staying Close funding are more likely to be in accommodation deemed suitable by the local authority. The findings on accommodation stability are compatible with a moderate-to-large positive effect in Wave 1, nevertheless the 95% CI narrowly includes zero. Both results are consistent with the findings from the secondary analysis.

Table 42. Results accommodation stability with sample subset

Outcome	Unadjusted					Entropy balanced	
	Staying Close		Comparison			Est [95% CI]	Glass's δ [95% CI]
	n (miss)	M (SD)	n (miss)	Wt n	M (SD)		
Number of accommodation moves (Wave 1)	1785 (2332)	0.79 (1.28)	1230 (424)	430.8	0.67 (1.14)	-0.36 [-0.73, 0.01]	-0.32 [-0.66, 0.01]
Number of accommodation moves (Wave 2)	1639 (3439)	0.83 (1.26)	1472 (859)	465.4	0.79 (1.10)	-0.12 [-0.36, 0.12]	-0.11 [-0.34, 0.11]

Hurdle count model to account for zero inflation

Given the zero-inflated nature of the measure of “number of accommodation moves”, we decided to do a further sensitivity analysis using a Hurdle model specification. This approach accounts for excess zeros by modelling two separate processes: a binary model distinguishing between zero and non-zero outcomes, and a truncated Poisson model for positive counts only. Standard errors are estimated separately for each component, so are less affected by the excess of zeroes. The estimates from these models are consistent in sign with those from the secondary analysis, albeit smaller, with confidence intervals crossing zero. The 95% CIs are compatible with a moderate positive to a small negative impact.

Table 43. Results of accommodation stability with Hurdle specification

Outcome	Unadjusted					Entropy balanced	
	Staying Close		Comparison			Est [95% CI]	Glass's δ [95% CI]
	n (miss)	M (SD)	n (miss)	Wt n	M (SD)		
Number of accommodation moves (Wave 1) Hurdle model	2104 (2013)	0.81 (1.25)	1230 (424)	279.4	0.64 (1.10)	-0.14 [-0.34, 0.05]	-0.13 [-0.30, 0.04]
Number of accommodation moves (Wave 2) Hurdle model	2404 (2674)	0.96 (1.35)	1472 (859)	489.9	0.84 (1.07)	-0.03 [-0.26, 0.20]	-0.03 [-0.25, 0.18]

Endnotes

1. Variation reduces to between 35% and 126% when focusing only on the 8 LA cost forms deemed of good data quality.
2. Department for Education, Staying Close 2023-25 Application Guide for Local Authorities (January 2023). Available at: https://assets.publishing.service.gov.uk/media/63d2956f8fa8f53dff6a4c9/Staying_Close_2023_to_2025_-_application_guide_for_local_authorities.pdf
3. Census data: <https://www.ons.gov.uk/datasets/TS011/editions/2021/versions/6>
CLA = Children Looked After in England. CLA data has been aggregated across the 17 to 21 age groups (i.e. 16-17 and 19-21): <https://explore-education-statistics.service.gov.uk/find-statistics/children-looked-after-in-england-including-adoptions/2022>
4. The protocol originally specified Hedges' g , which uses the pooled intervention and comparison standard deviations in the denominator. We have changed this to Glass's δ , which uses only the comparison SD, to align with CHI guidance.
5. We also added 'Prefer not to say' and 'Don't know' responses as some of these statements may be distressing for young people that have experienced trauma within their biological families and it would not be ethical to require an answer.
6. A 'prefer not to say' and 'don't know' option was also added to allow respondents an opportunity to opt out of individual items.
7. Although we know the declared working status of Staying Close participants, given that the productivity element of the benefit values is small, representing less than 5% of the overall value, it was not deemed proportionate to adjust the calculations to specifically reflect these findings.
8. 2024/25 Grant Determination Letter can be accessed here: https://assets.publishing.service.gov.uk/media/6616abf85a583be6bb093244/Staying_Close_LA_current_providers_-_Section_31_LA_Determination_Letter_24-25.pdf
9. Children looked-after by local authorities in England Guide to the SSDA903 collection 1 April 2023 to 31 March 2024 – Version 1.0 (October 2022): https://dera.ioe.ac.uk/id/eprint/39490/1/CLA_SSDA903_2023-24_Guide_Version_1.0.pdf