

**To:** UC Programme Board Members

**From:** Della McVay  
**Sponsor:** Pauline Crellin  
**Author:** Della McVay

**Date:** 12/11/19

### Help to Claim progress update

**Issue:** This paper sets out an update on the progress of the Citizens Advice Help to Claim service following the mid-point review of the pilot.

**Recommendations:** That the Programme Board notes the progress to date of the Help to Claim service and endorses the suggested 2020/21 provision approach.

### Introduction

1. From 1 April 2019 DWP formed a new partnership with Citizens Advice (CA) and Citizens Advice Scotland (CAS) to design and deliver a new service to replace the previous Universal Support offer. The CA/CAS service is known as “Help to Claim” (HtC).
2. The service is currently delivered through a 12-month pilot funded by direct grant agreement. The service went live in all Jobcentres and Service Centres in England, Wales and Scotland from 1 April 2019, and is funded for £39m in 2019/20.
3. The HtC service has had some baselined principles during this first year of operation: it provides support that is tailored to the claimant need, uses multiple channels of web chat, telephony and face to face interactions, and is available consistently and nationwide. In addition, there is a ‘no wrong door’ policy – claimants can access the service through any channel and can self-refer, or be signposted / referred by DWP or other support agencies. CA/CAS initially triage to assess the individual needs to make sure that claimants get the right level of support in the most effective way.
4. Support is provided to get online and start a UC claim by establishing entitlement, getting the right evidence, help to set up an email address or a bank account, through to support with working through the claim To-Dos, preparing for the practicalities of a monthly payment and applying for additional financial support or easements (Advance payments etc). CA/CAS support the claimant throughout the journey to receiving their first payment.
5. Sometimes claimants have other, wider issues and need support that extends beyond the scope of HtC. This additional support is provided by CA/CAS through their separate core funded advisory service. Further support generally falls in to two categories: benefits and financial support not directly related to UC and wider ongoing issues which impact claimants’

ability to receive and successfully manage future payments. CA/CAS also signpost to a variety of other support and advice services according to the claimant need: for example, if a claimant need specialist debt or money advice referrals are made in partnership with the Money and Pensions Service.

6. Throughout this first 6 months of delivery we have worked together with CA/CAS to learn as the service develops, not just to ensure that effective delivery takes place now but to inform the next steps for the pilot, and determine whether and how we need the service to evolve according to the claimants we are seeing present for the HtC offer.

### **Demand in the first 6 months**

7. Since 1 April 2019, the number of claimants accessing the service has increased each month, showing that the service is growing steadily as we might expect. The volume of claimants reported as accessing the service from the first evaluation period of 1 April – 31 July 2019 was **74,928** which is approximately 12% of new claims to Universal Credit for the same period. This validated data has a time lag, but interim data (not validated) on the number of claimants who have received support from the service from 1 April 2019 up to 22 October 2019 was **130,853**. Claimants often require more than one session of support, therefore there is a similar trend to overall volumes in the number of 'contacts' – at an average of 1.75 per person. Annex 1 provides further details
8. The volumes planning assumption from CA/CAS (using DWP national new claims volume forecast from 2018) was based on their existing Universal Credit core advisory support and assumed that 20% of all UC new claims would need HtC support. Due to the uncertainty around what the uptake of the new service might be, and around the volume assumptions, there was a large margin of tolerance built in to ensure that the conditions of the agreement would hold and not be subject to renegotiation within +or- 50% of forecasts: we will use the full year volume data to inform real volume data for year two of the service. As we know, the volumes naturally migrating to UC have been lower overall than our assumptions stated, so this variance is expected.

### **Who is using the service?**

9. The first wave of evaluation took place from 1<sup>st</sup> April to 31<sup>st</sup> July 2019, whilst the service was still relatively nascent. The validated CA/CAS data for this period showed that of the 74,928 claimants who accessed the service: 43% in England/Wales and 46% in Scotland had a disability or health condition which is consistent with the percentage of overall UC claimants who report a health condition; 21% of claimants in England and Wales and 11% in Scotland were from a BAME background (as the UC system does not mandate claimants to report their ethnicity it is not possible to provide a comparison). There was an equal split of unemployed (32%) and employed (32%) claimants compared to 67% of the overall UC caseload unemployed with 33% employed.
10. The age profile for claimants accessing HtC is significantly higher than that for UC claimants overall. In England and Wales 60% of HtC clients are over 40 compared to 35% of UC claimants overall, and in Scotland 50% are over 40 compared to 25% overall. The gender breakdown is similar to the overall UC claimant population.

11. It is still too early to make any firm conclusions whilst the service is still relatively immature but this early data does appear to show that those who are accessing the most support from CA/CAS to make their claim to UC are more likely to be older and more likely to have health conditions or disabilities. This would appear to show that the approach of targeting support at the most vulnerable and those who need it most is working, although we will continue to evaluate this during the second half of the first delivery year. Annex 2 provides a further breakdown of the characteristics of claimants accessing HtC.

### **Emerging evidence on access channels**

12. Just over 50% of those accessing the service have done so in person, but a significant number of claimants are using the telephony channel (just under 40%) with a smaller number (5%) using the web chat channel.

13. Just under half of claimants self-refer from on-line signposting via gov.uk, CA/CAS websites or through the local marketing of the service by CA/CAS. CA/CAS have initially adopted a 'light touch' approach to marketing of the service. This suggests that the CA/CAS trusted brand may be a factor in people seeking being aware of and seeking the support available. CA/CAS will continue to develop the local marketing strategies in line with demand forecasts, and are currently undertaking work with partners to increase cross-referrals between agencies.

14. A significant proportion of claimants are signposted or referred from the Jobcentre/Service Centre via the on line referral tool. Annex 3 provides further detail.

### **Most common issues encountered so far**

15. Around 70% of those accessing the service are simply not sure if they are eligible for UC. 30% need help understanding payments and how they are made, and around 20% of those accessing the service need support with IT/digital issues. CA/CAS are working to better understand these barriers in more detail to determine whether there is adjustment needed to the provision, or whether there is something that DWP can do differently, for example, to better communicate eligibility. Annex 4 provides further detail.

### **Key performance indicators**

16. Despite the early stage of delivery, on current validated data CAS are exceeding all of the KPIs set in the grant agreement. CA are exceeding all KPIs with the exception of the client outcome element of the quality of advice KPI. This is worth exploring in more detail as we do not believe it reflects a failure of the service but is instead a learning point about how the service should evolve.

17. The KPI/Quality Assessment Framework requests that all of the service and offers are explained to each claimant. If this action is incomplete, the KPI will show a failure. This has shown itself to be an ineffective measure – for example, if an individual makes contact via telephony or web chat, asks a question about eligibility, gets the answer and closes the dialogue box (which is common) because the operator did not describe in full the services or support available in full this would manifest as a failure.

18. This quality of advice issue is limited to telephony and web chat. CA have set an ambitious and sector-first aim of delivering the same service via all channels. Quality of advice is assessed against the same standards regardless of channel or how the claimant accessed the service: this is a good example of where we will want to use the learning from this pilot year to inform the next phase of delivery.
19. During the first six months, we have also seen evidence that both CA/CAS advisers and Work Coaches might tend to refer claimants to face to face support before fully testing whether their support needs could be met over the phone or web chat. This reflects the overall UC digital channel journey and is not an issue of concern but we will want to further explore how we can encourage that change. Annex 6 provides more details of the assessment process and the KPI improvement plan.

### **The full-year evaluation approach**

20. DWP, CA and CAS are undertaking a shared evaluation to assess the effectiveness of the first year of delivery and impact of HtC – although it is important to remember that part of the purpose of the first year pilot has been to test the effectiveness of different approaches and design the service more fully as we go, in the same way that the overall UC service is designed and delivered.
21. The evaluation will aim to provide a robust assessment of the added value that the support has provided to UC claimants in its early stages, and to generate learning on what is working well and where in delivery that will shape the future of the service. The methodology to date combines the following strands;
- Analysis of CA and CAS claimant management information;
  - CA/CAS;
  - Qualitative research with Local CA offices, led by CA/CAS;
  - Primary research with claimants, led by a contractor; and
  - Primary research with JCP staff, led by DWP.
22. We are currently developing the scope and methodology for the final evaluation report. The intention is to commission an independent research company to undertake a comprehensive review of the service in order to help inform future service design, with findings to be provided in Spring 2020, (the estimated cost will be up to <sup>s43</sup> from existing Programme funding). We intend to increase the quantitative and qualitative research with claimants in order to understand their issues, experiences and support needs, informing the requirements for support going forwards.

### **Learning and Improvement Activity**

23. The project team and CA/CAS have already identified and implemented a range of improvements including developing an online referral tool, extending Wi-Fi coverage to ensure more coverage in remote and rural areas, and further developing delivery models by extending the reach of the service to new locations in local areas, including working with local authorities and GP surgeries. These improvements are being implemented as we find them.

24. CA are also undertaking research to better inform development of the service, using specialist staff in place as nominated Best Practice Leads to explore areas including: client Journey Mapping for different client groups; non-digital claims to determine whether in the context of HtC the available options provide sufficient assistance to those who need them; identity verification where verification issues arise which may hinder progress to payment – much of this sort of learning will also be relevant for the wider UC service; mapping claimant support needs beyond the service they receive from HtC service – to understand more about claimants' wider support needs and which agencies they go to for this support, which could in turn inform our wider UC partnership offer.
25. Using data from the first wave of evaluation and the research set out above, we are now working with CA/CAS to identify and agree further ways to improve the service, including getting underneath the type of issues and support needs people are presenting with, understanding wider support needs better, interactions of this service with other agencies, what the characteristics of claimants needing support tell us about how we can target the support more specifically (e.g. those with mental health and disability conditions) and understanding more about the demand and channel usage aligned with claimant characteristics and support needs.
26. The learning and improvement activity we are undertaking is not only being used to inform the future of the support provided by CA/CAS but we are also using the collaboration with CA/CAS to inform and shape our wider approach to further stakeholder and partnership working. Much of the learning from the pilot can also inform our approach to delivery of UC more widely: the issues presented are rarely new or unique but this work provides an opportunity for greater understanding of how these barriers might be removed.

### **Next steps – service provision in 2020/21**

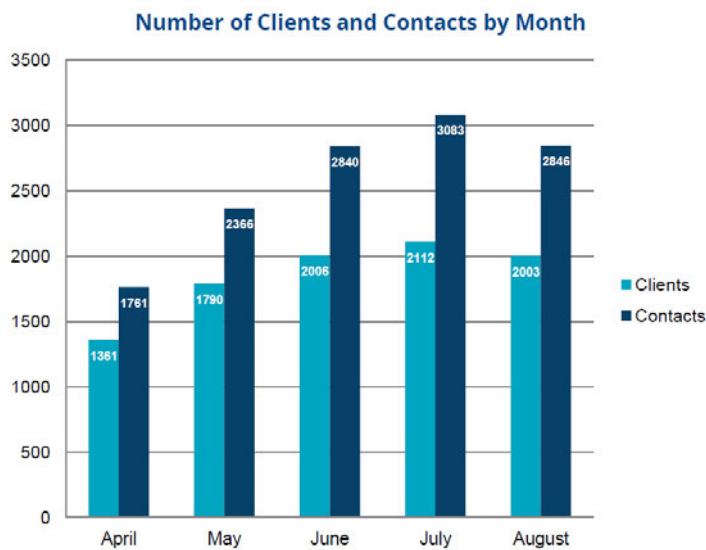
27. The pilot is showing encouraging progress, and we have learned a great deal together about who is using the service, what their needs are, and what channels work best – but we are only 7 months in. Given that the first quarter was focused on mobilisation and we currently only have 4 months' worth of validated data, we are continuing the review activity to develop our proposal for service delivery in 2020/21.
28. It is difficult to see that we will have learned enough about the service, given the richness of the information and provision coming through to date, to have definitely informed a model for delivery by the time a competitive exercise would need to be conducted – the detailed service specification would need to be in place by Autumn 2019 for the process to begin, and we are just getting started on really understanding what works best.
29. We therefore propose to extend the pilot period through 2020/21 in order to continue to gather the necessary learning and evaluation. At the end of this period a definitive decision would need to be taken on a more permanent future for the service, which may include a competitive exercise, or could include bringing some elements of the current service in-house enabling a stronger focus on the groups needing the most support and help. From April 2020 we will also be operating a £10m outreach fund to enable local partnership which might reduce or change the demand on the CA service so it makes sense to test these approaches alongside each other.

30. We are seeking Programme Board’s comments on progress to date, and endorsement in principle of a continuation of the learning pilot approach for a second year, before a decision on the future service is made. Ministers would of course also need to agree to this approach and with Programme Board’s endorsement we will seek to present the six-month review point data and findings, with a proposal for 2020/21 to them at the earliest opportunity.

**Annex 1**

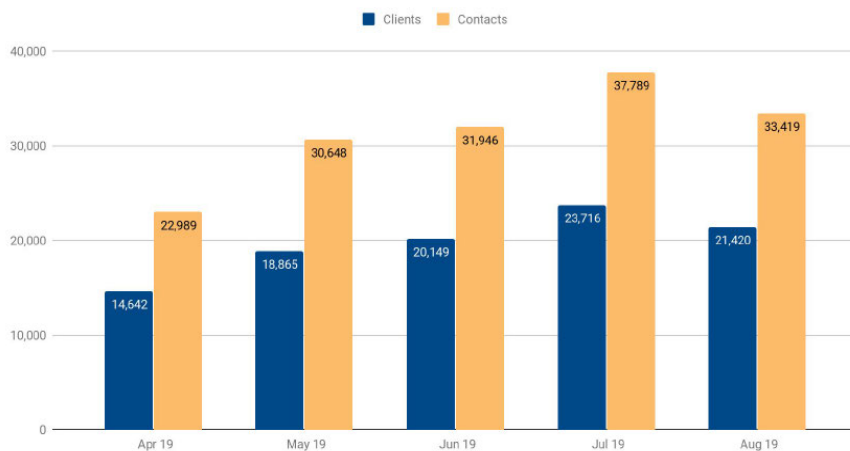
**Demand - charts 1 and 2**

*England and Wales*



*Scotland*

**Number of clients and contacts by month**



**Demand v planning assumptions – chart 3**

	<b>April 19</b>	<b>May 19</b>	<b>June 19</b>	<b>July 19</b>
<b>20% Assumption</b>	35,682	36,897	34,850	43,015
<b>HTC Actual</b>	16,003	20,655	22,155	25,828
<b>% of 20% assumption</b>	45%*	56%	64%	60%

\*April reflects the joint (DWP/CA/CAS) agreed approach for applying a controlled start to HtC with light touch marketing

## Annex 2

### Claimant profiles - chart 4

	England and Wales	Scotland
Female	52%	54%
Disabled or have long term health conditions	43%	46%
BAME	21%	11%
40 and over	60%	50%
Unemployed seeking employment	32%	30%
Employed or self employed	32%	27%

## Annex 3

### Access to the service - Charts 5 and 6

<b>Access</b>	England and Wales	Scotland
In person	52%	54%
Phone	39%	38%
Web chat	5%	4%
Other	5%	4%

<b>Referral Route</b>	England and Wales	Scotland
DWP referral	42%	47%
Local Authority	4%	5%
Other support agency	9%	4%
Self refer or drop in	45%	44%

## Annex 4



Supported needs - Charts 7 and 8

England and Wales	Percentage of clients with issues
Universal Credit eligibility	70
Understanding UC payments	30
Advance payment	25
Access to internet/digital literacy	18
Initial wait for payment	18

Scotland	Percentage of clients advised
Claiming process	79
Entitlement (benefit check)	49
Advance payment	30
Online access issues	21
Payment	21

**Annex 5**

Key Performance Indicators - Chart 8

<b>Claimant satisfaction (80%) – up to July 19</b>	<b>England and Wales</b>	<b>Scotland</b>
rated their overall experience as good or very good	93%	88%
would recommend the service to a friend or family member	93%	90%
rated accessing the service as easy or very easy	86%	88%
<b>Quality of advice (80%) – up to July 19</b>		
Client outcome	72%*	89%
Case administration	85%	88%

\*The data set is not complete due to the time lag with cases being assessed. Last quarter the confirmed score increased by 5 percentage points from the interim score.

**Annex 6**

Approach to Key Performance Indicators

CA take a robust approach to assessing quality of advice. 200 cases are selected from across all channels every month. Each case is then assessed for the two quality indicators, against over 30 criteria. Phone and chat cases are quality assessed separately by the national HtC quality assessor team. Face-to-face cases are reviewed by local reviewers, as part of the CA’s existing rigorous approach to quality. These assessments are then randomly selected and reviewed



centrally. Quality of advice is assessed against the same standards regardless of channel or how the claimant accessed the service.

### Improvement plan

- We are working with CA to support them with a plan of priority activities to assess the quality assurance process and the training available to advisers to support the aim of delivering the full service across all channels.
- The issues are not throughout the whole network, and a group of 43 offices have been targeted for further support across telephony and web chat.
- There are early signs these interventions are working: of the 10 offices that have been recently reassessed, 9 are now delivering to the required standard.
- We have increased the reporting frequency from quarterly to monthly on this KPI.

### Web chat

- Web chat will be used to address claimants' quick queries for an interim period, with claimants requiring full advice handed over to phone advice (or face to face if needed).
- The quality of advice framework to be adapted to ensure that the advice being delivered during this period is appropriately assessed and the appropriateness of the framework to be considered overall.
- Development of materials and training to support advisers to deliver advice by web chat and development of an assurance test for all advisers to take to ensure they can deliver advice by web chat.

### Telephone

- Additional quality checks introduced within Local CA with improved direct immediate feedback loops to advisers.
- Development of enhanced assurance check for all telephone advisers.
- Research into adviser training needs and claimant expectations of channels.
- Additional quality resources developed for advisers, including checklists, expert advice materials to support complex cases, and e-learning modules.
- Additional provision by the CA Expert Advice Team to support HtC advisers with complex issues, two additional members of staff to provide additional training on the areas identified for improvement.

## Annex 7

### **CA staff feedback**

31. CA/CAS staff feedback showed that working relationships are generally seen as good by CA/CAS staff. (*“Jobcentre relationships are great. They were really keen to have us in there. There is a spirit of working together and it is working very well.”* – CA/CAS staff)
32. Co-location where available is particularly appreciated as it is far easier to have a warm handover in a Jobcentre.

33. CA/CAS staff found the referral routes onto HtC provided by their local Jobcentres to be working well.

### **DWP staff feedback**

34. The DWP staff questioned saw a number of areas in which having CA/CAS provide HtC could be seen as advantageous.

35. As CA/CAS are independent there is a perception that they are “more on the side” of the claimant. This is seen as making it easier for CA/CAS staff to assist claimants who may have a negative view of UC and DWP.

36. DWP staff recognised that CA/CAS can provide wider support beyond HtC that is not available from DWP (the CA/CAS research has shown that their advisers can identify wider problems during HtC appointments and are able to provide additional support through their core funding advisory service).

37. CA/CAS provides an additional resource when there is pressure on time in Jobcentres, especially if CA/CAS are co-located or on close proximity.

38. DWP staff also mainly thought the relationship was good and reported being less wary of CA/CAS staff since HtC has been introduced (*“The relationship is very good. We have changed from the past [pre HtC] of being cautious of ringing Citizens Advice. Now there is a good sharing relationship of us going to them and them coming to us.”*)

39. DWP researchers have not yet interviewed claimants who have accessed HtC. However, Jobcentre staff report very few complaints from claimants which would be common if there were issues with the service (*“The most telling thing is we don’t get any complaints, they would spread like wildfire but we haven’t had any.”*)

### **Case study**

Fiona\* 34 needed to leave the family home a few months ago due to domestic violence. She is now living with her parents and young son. Fiona was recently made redundant and is now only working part-time. She considers herself to be under-employed. She had never been on benefits before. Due to her change in circumstances, Fiona needed financial assistance in order to be able to support herself and her son. Fiona wasn't sure whether she was eligible for Universal Credit due to the fact that she was working part-time and she co-owned a home.

- Fiona first approached Women’s Aid, who signposted her to Help to Claim. She wasn't sure what to expect as she didn't know what could be offered and didn't understand how the benefits system worked.
- Fiona searched how to get in touch with Citizens Advice and initially used web chat to talk to an adviser. She liked this channel initially as she was embarrassed that she needed help and the anonymity of web chat helped with this. An appointment was then made to see an adviser in person. Her main priority was to check her eligibility for benefits and find out how to apply for them as she wanted to get herself financially stable.
- ‘I wasn't in a good place and I had a wobble there, which I wasn't expecting. (The adviser) was really understanding and made me feel at ease. Very calming and reassuring.’

- An adviser explained how Universal Credit works and supported her to start a Universal Credit claim. Fiona believes that she may not have known she was eligible for Universal Credit or applied had it not been for Citizens Advice intervention.
- ‘They were a life saver, it could have been horrendous. It would have been overwhelming, I would have just sat there staring at the screen.’
- She is now also receiving advice and support on legal issues related to divorcing her husband and getting the financial settlement sorted.
- Fiona has already recommended Help to Claim, and Citizens Advice, to others.  
\*Pseudonym used to protect client’s identity