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An Inter-Disciplinary Perspective on Evaluation of Innovation to Support Care Leavers' Transition

Abstract

Purpose: Young people who are looked after by the state face challenges as they make the transition from care to adulthood, with variation in support available. In the last decade, funding has been directed towards organisations to pilot innovations to support transition, with accompanying evaluations often conducted with a single disciplinary focus, in a context of short timescales and small budgets. Recognising the value and weight of the challenge involved in evaluation of innovations that aim to support the transitions of young people leaving care, this paper provides a review of evaluation approaches and suggestions regarding how these might be developed.

Approach: As part of a wider research programme to improve understanding of the innovation process for young people leaving care, we conducted a scoping review of grey literature (publications which are not peer reviewed) focusing on evaluation of innovations in the UK over the last ten years. We critiqued the evaluation approaches in each of the 22 reports we identified with an inter-disciplinary perspective, representing social care, public health and organisation science.

Findings: We identified challenges and opportunities for the development of evaluation approaches in three areas. First, informed by social care, we suggest increased priority should be granted to participatory approaches to evaluation, within which involvement of young people leaving care should be central. Second, drawing on public health, there is potential for developing a common outcomes' framework, including methods of data collection, analysis and reporting, which aid comparative analysis. Third, application of theoretical frameworks from organisation science regarding the process of innovation can drive transferable lessons from local innovations to aid its spread.

Originality: By adopting the unique perspective of our multiple positions, our goal is to contribute to the development of evaluation approaches. Further, we hope to help identify innovations that work, enhance their spread, leverage resources and influence policy to support care leavers in their transitions to adulthood.

An Inter-Disciplinary Perspective on Evaluation of Innovation to Support Care Leavers' Transition

Introduction

In the United Kingdom (UK), care leavers experience an 'accelerated and compressed' journey to adulthood compared with their non-looked after peers for whom transition is more gradual and ongoing support from key adult figures in their lives is more likely to be available (Jones, 2019; Mendes and Rogers, 2020; Stein, 2006, 2012). Many young people leaving care are likely to experience multiple and bewildering transitions that evoke feelings of instability, powerlessness, unpreparedness, abandonment and mistrust (Butterworth et al, 2017; Stein, 2012). Overall, relative to their peers, care leavers are more likely to have a conviction (Viner and Taylor, 2005; Schofield et al., 2014), become a young parent (Roberts, 2017; Mezey et al., 2017), experience social exclusion (Stein, 2006) and mental ill health (Viner and Taylor, 2005). They are less likely to achieve academically in school (O'Higgins et al., 2015; Mannay et al., 2017), attend higher education (Sebba et al., 2015), or to be in employment (Viner and Taylor, 2005; Wade and Dixon, 2006) than their non-looked after peers. These poor outcomes are not the destiny of all young people who leave care (Mendes and Rogers, 2020; Munro, 2019; Munro et al, 2016; Stein, 2012). Variabilities in support needs, care and transition experiences are associated with differences in how young people are able to move on from care and their later pathways (ibid; Day, 2017; Evans et al., 2017; Gibson and Edwards, 2016; Roberts et al., 2016; Wade and Dixon, 2006).

Projects and programmes at a policy and local level across the UK have been implemented to support care leavers' transitions and improve outcomes. Investment in innovation aiming to support care leavers' transition into adulthood and improve outcomes is exemplified by the 'Children's Social Care Innovation Programme' launched by the Department for Education (DfE) in 2014 (FitzSimmons and McCracken, 2020). The programme included funding for innovations specifically designed to support care leavers' transitions to adulthood, with accompanying evaluations (ibid). We conceptualise innovation as processual, encompassing an 'innovation journey' through which new practices, processes, and structures are diffused by a range of actors (Van de Ven et al., 2008).

Evaluating innovations that support care leavers' transition into adulthood is complex due to multiple causalities around any effect of a local innovation upon the transition of care leavers into adulthood, the multiple domains of transition and the long term nature of outcomes relating to post-transition pathways. There are also challenges in demonstrating effectiveness linked to the small numbers of care leavers who may be involved with an innovation at a local level (FitzSimmons and McCracken, 2020). Further, there has been limited research that focuses on the processes of innovation (Campie et al, 2015; Fitzpatrick and Williams, 2007). Evaluation of the 'innovation journey' is crucial to guide those seeking to implement and spread innovation and requires a multi-level approach capable of identifying drivers of diffusion of innovation across national, regional and organisational contexts, and experiences and adaption of innovations.

The EXploring Innovation in Transition (EXIT) study emerged to address this knowledge gap and aims to examine innovations which support transition of care leavers into adulthood and how they have been, developed, implemented, sustained and diffused. The EXIT study team is inter-disciplinary, comprising organisation science (Warwick Business School, University of Warwick), social work and social care (Tilda Goldberg Centre for Social Work and Social Care, University of Bedfordshire), and public health (Newcastle University) funded by the Economic and Social Research Council (ESRC) (<https://warwick.ac.uk/fac/soc/wbs/research/exit-study/>).

This paper reports on a literature review we conducted as part of our scoping activities. We reviewed evaluation reports of UK-based innovations aiming to improve outcomes for care leavers in their transition to adulthood. We offer a critique of evaluation approaches from an inter-disciplinary perspective and aim to generate learning for how evaluation approaches of innovation that support care leavers transitioning into adulthood could be developed.

Review Method

We undertook a scoping review (Munn et al., 2019) of grey literature reporting upon innovation for young people leaving care including sources from the websites of

charities and government departments (Kepes et al., 2012; Adams et al., 2017). We anticipated that a review of grey literature would be the most likely to provide timely identification of innovative practice in the UK (Paez, 2017). We conducted the review in three stages: 1) identifying sources, 2) searching and initial review, 3) review of included reports.

1) *Identifying sources*

Informed by guidance (Freeman, 2019) we identified the grey literature sources in four steps: i) define terms; ii) establish temporal and spatial bracketing; iii) decide inclusion/exclusion criteria; iv) identify possible sources.

i) Define terms

Considering multiple meanings of “care leaver” at an organisation and policy level, including between countries in the UK (e.g. Children and Young People (Scotland) Act 2014, The Children (Leaving Care) Act, 2000, The Children (Leaving Care) Act (Northern Ireland), 2002) and “innovation” (Baregheh et al., 2009), we applied the following definitions to guide our study:

Care leaver as “any young person resident in foster or residential care from the age of 16 and is about to, is currently, or has undergone transition to semi/independent living up until 25-26 years and who may or may not be in employment, education, training, or custody”

Innovation as “the process by which new practices, organisational arrangements, technologies and service initiatives or interventions are intentionally created and/or introduced to improve organisational performance and service user outcomes”.

ii) Temporal and spatial bracketing

Our review focused on a ten-year window (2010-2020). This time frame reflected greater policy-focus on care leavers since 2010 (through: Care Leavers (England) Regulations (2010); Care Leaver Strategy (2013), Children and Social Work Act (2017), alongside initiatives such as DfE’s Children’s Social Care Innovation programme (2014-2020) and Social Impact Bonds (SIB), first launched in the UK in 2010. Reflecting the focus on the wider study, we limited inclusion to innovation in the United Kingdom.

iii) Inclusion criteria

To be included in the review, sources needed to meet the following six criteria:

1. originate from the United Kingdom from 2010 onward;
2. publicly retrievable;
3. not feature in a peer-reviewed publication (subject of separate review);
4. include young people who meet our definition of care leaver;
5. refer to an innovation as outlined in our definition of innovation;
6. evaluate an innovation.

iv) Identification of possible sources

Following initial piloting and consideration of where grey material may be represented (see Adams et al., 2017), the following online sources were identified as search targets: Government department web pages from England, Wales, Northern Ireland and Scotland; The Children's Commissioner; NHS; charitable organisations for care leavers (e.g. Barnardo's, Coram, Become); housing associations; Office for Standards in Education, Children's Services and Skills (OFSTED); ADOLEC (database on adolescence produced by the Pan American Health Organization/WHO); search engines (Google Scholar, Google web, Bing); BBC News and UK newspapers.

2) Search strategy and initial review process

We conducted a search across the identified grey sources. Many of the sites accessed had limited search capabilities and the functionality determined the search terms used. Each of the searches included the term "Care Leaver" and most included "Innovation". There was variability between the websites in the level and nature of content relating to care leaver innovation. Where content was limited, we followed external links to explore further sites and pages to access a deeper level of information. Some searches resulted in a large numbers of hits and we stopped after ten pages of non-relevant hits to manage the quantity of information.

In total, several thousand web pages and documents were sifted. In the initial stages we applied only points 1-5 of our inclusion/exclusion criteria to ensure we did not screen too rigorously and to mitigate against excluding relevant sources. We selected

221 sources for potential inclusion and further review. Our review of the 221 sources resulted in inclusion of 91 examples of innovation across the UK and 11 sources that focused on evaluating innovation. In November 2020, the DfE published a further 11 leaving care innovation evaluation reports from round two of the Children’s Social Care Innovation Programme which met our inclusion criteria. These were added to the 11 reports identified in the initial review, generating a total of 22 evaluation reports for the next stage of review (Table 1).

Table 1 Evaluation Reports Included in Review

Report Title, Author and Location	Methodological Approach
Boom+: Working Successfully with Care Leavers – Final Evaluation Report, (Martikke et al., 2015), Greater Manchester.	Mixed-method, including interviews, observations, questionnaires with standardised outcome measures at two time points
Calderdale GOAL Project Evaluation (Care Leavers Association, 2017)	Monitoring and evaluation forms including outcomes tool
Evaluation of Staying Put: 18+ Family Placement Programme: Final report, (Munro et al., 2012), 11 LAs in England.	Mixed methods approach in two phases, including participatory approach, interviews, focus groups, analysis of management data, case study in 6 LAs
Evaluation of University of Kent consortium to explore how technology can support YP in care (Fu and Clay, 2017).	Qualitative including mini-groups, observations and interviews
Examining Clear Approach: An intervention for Care Leavers on an intensive Alternative to Custody Order (IAC), (Fitzpatrick and Williams, 2014) Manchester.	Mixed-method, qualitative interviews plus data profiling
Fair Start Scotland Evaluation Report 2: Overview of Year 1 (Scottish Government, 2019)	Mixed methods including telephone survey, case study in 9 localities, interviews and analysis of management data
From Care to Independence: Princes Trust Fairbridge Programme (Gibb and Edwards, 2017)	Mixed methods including surveys, forms, session logs, interviews at 3 time points, case study approach in 6 sites
Localised Approaches to Supporting Care leavers, (Robey et al., 2017)	Narrative case study presentations of 4 local-level partnerships
DfE Innovation Programme - round one	
Making a House a Home (Dixon and Ward, 2017), Stoke on Trent.	Mixed methods, longitudinal design – over 4 periods, including participatory approach, interviews and surveys
New Belongings: An Evaluation (Dixon and Baker, 2016). 28 LAs in England.	Mixed-methods, including surveys, interviews, development of self-assessment framework, case-study in 5 LAs

Report Title, Author and Location	Methodological Approach
Evaluation of the No Wrong Door Innovation Programme (Lushey et al., 2017), North Yorkshire.	Mixed-method, including interviews, standardised outcome measures, analysis of management and project data, costing analysis
DfE Innovation Programme - round two	
Care Leavers Partnership: Southwark Council and Catch22 Evaluation Report (Mollidor et al., 2020a). Southwark.	Mixed-methods, including participatory approach, workshops, interviews, surveys at two time-points.
Evaluation of the Derby Local Area Coordination Approach (Mollidor et al., 2020b). Derby.	Mixed methods including interviews, surveys
The House Project for young people leaving care Evaluation report (Dixon et al., 2020a)	Mixed methods including participatory approach, focus groups, interviews, surveys, costing analysis
Staying Close North Tyneside (Pilot), Evaluation Report (Szifris et al., 2020). North Tyneside.	Mixed methods including participatory approach, interviews, surveys
The Portsmouth Aspiration Staying Close Project Evaluation Report (Neagu and Dixon, 2020a). Portsmouth.	Participatory, qualitative approach including interviews, costing analysis
St Christopher's Staying Close Pilot Evaluation Report (Heves et al., 2020). Ealing and Hounslow.	Mixed methods including participatory approach, interviews, surveys
Bristol City Council Staying Close Pilot Evaluation Report (Allen et al., 2020) Bristol.	Mixed methods including participatory approach, interviews, surveys
North East Lincolnshire Staying Close Pilot Evaluation report (O'Leary et al., 2020). North East Lincolnshire.	Mixed methods including participatory approach, interviews, surveys
The Break Staying Close, Staying Connected Project Evaluation report (Dixon et al., 2020b) Norfolk and East Cambridgeshire	Mixed methods including participatory approach, focus groups, interviews, surveys, costing analysis
Staying Close Suffolk Evaluation report (Mitchell-Smith et al., 2020). Suffolk.	Mixed methods including participatory approach, focus groups, workshops, interviews, surveys
The Fair Ways Staying Close Project Evaluation report (Neagu and Dixon, 2020b). Hampshire.	Mixed methods including participatory approach, focus groups, interviews, surveys, costing analysis

The evaluation reports were published between 2011 and 2020. Twenty-one of the 22 evaluations reported on innovations in England and one was located in Scotland. Fourteen of the innovations and accompanying evaluations were funded by the DfE Innovation Programme, three in round one, published in 2016 and 2017, and 11 in round two, published in 2020. Eight of the round two reports evaluated regional implementation of 'Staying Close' pilots. 'The House Project' was evaluated in both round one and round two (Dixon and Ward, 2017; Dixon et al., 2020a).

Review of Evaluation Reports

The EXIT team divided into our respective disciplinary groups to review the reports. Each group, comprising between two and four researchers, reviewed all 22 reports with a focus on the methods adopted. Each group recorded strengths and limitations of each evaluation's methodological approach using a data extraction template and reviewed the completed template to identify emergent themes relating to design, methods and reporting.

Findings

Our review highlighted a number of strengths of and challenges and opportunities for evaluation of care leaver innovations in a context of relatively limited funding, timescales and sample sizes. We present three thematic findings, one from each of our respective disciplinary groups: (1) strengths of inclusion of young people's participation (social care perspective); (2) challenges relating to complexity, adoption of quantitative approaches and outcomes measures (public health perspective); (3) opportunity for increased focus on innovation processes (organisation science perspective).

Young people's participation (Social Care)

From a social care perspective, our review of the evaluations highlighted a key strength as the participation of young people, aligned with the principle of young people's right to participate in decision-making as stated in Article 12.1 of the United Nations Convention on the Rights of the Child (United Nations, 1989). We identified a range of levels of participation (Lushey and Munro, 2015; Shier, 2001, 2006). At a lower level of participation, young people were included as a participant group, demonstrating opportunities for them to be listened to and supported in giving their views (ibid). At a higher level, young people were included as peer researchers with a role in co-producing research. A co-production role has the potential to provide opportunities for young people to be involved in decision-making processes and share power (ibid). The potential benefits of involving young people in a research capacity are related to their personal and professional development, and to the quality of data due to the inclusion of an 'insider position' (Kelly et al, 2016, 2020; Lushey and Munro, 2015). However, investment is required in training and practical and emotional support to enable their meaningful participation (ibid).

The evaluations that included young people as a participant group involved focus groups and one-to-one interviews. Seven of the evaluations conducted focus groups including the House Project (Dixon and Ward., 2017; Dixon et al., 2020a), Staying Put (Munro et al., 2012), New Belongings (Dixon and Baker., 2016) and three of the eight Staying Close evaluations (Dixon et al., 2020b; Neagu and Dixon, 2020a, b). Eighteen of the evaluations included one-to-one interviews with young people (Allen et al., 2020; Cox et al., 2015; Dixon et al., 2020a, b; Dixon and Ward, 2017; Scottish Government, 2019; Fitzpatrick and Williams, 2014; Gibb and Edwards, 2017; Heyes et al., 2020; Lushey et al., 2017; Mitchell-Smith et al., 2020; Mollidor et al., 2020a, b; Munro, et al., 2012; Neagu and Dixon, 2020a, b; O'Leary et al., 2020; Szifris et al., 2020). In the No Wrong Door evaluation, Lushey et al (2017) adopted a longitudinal design and conducted a series of two qualitative interviews with young people. The initial interview explored their experiences and the follow-up interview explored outcomes relating to accommodation stability.

A number of the projects were targeted at specific groups of care leavers and the accompanying evaluations included the views and experiences of young people who are considered more vulnerable or who may have a greater level of need. For example, the evaluation report 'Examining Clear Approach: An intervention for Care Leavers on an intensive Alternative to Custody Order (IAC)' included in-depth interviews with six young men to explore their experiences and perceptions of the approach (Fitzpatrick and Williams, 2014). All six participants were considered at risk of a short custodial sentence; a group rarely heard by professionals and decision makers. Other evaluations included participants who were unaccompanied asylum seeking young people. For example, in the Portsmouth Aspiration Staying Close Project, seven of the fourteen young people involved in the programme were unaccompanied asylum seeking young people (Neagu and Dixon, 2020a). Additionally, a number of the evaluations reflected on the mental health needs of young people who participated. For example, in their study of local area co-ordination approach in Derby, Mollidor et al., (2020b) reported that nine of the care leavers involved in the project were receiving support for a mental ill health condition and noted that during interviews young people reported having a mental health issue that significantly affected their wellbeing.

In many of the evaluations the participation of young people extended to the adoption of a 'participatory peer researcher methodology', where care leavers were involved as

co-researchers or 'peer researchers' to co-produce the evaluation (Kelly et al, 2016, 2020; Kilpatrick et al., 2007; Lushey and Munro, 2015). A participatory peer researcher methodology was adopted in around half of the reports, including in 10 of the 11 evaluations in the second round of the Innovation Programme. Co-production with young people was incorporated into the evaluations to align with the values and aims of the innovations, for example in the House Project 'to empower young people to take a central role in all HP activities' (Dixon et al., 2020a, p. 16). The value of young people's input was acknowledged in the evaluation reports (e.g. Szifris et al, 2020). Care leavers fulfilled the role of peer researchers and were involved in all aspects of the research process, from design to dissemination (Allen et al., 2020; Dixon et al., 2020a; Dixon et al., 2020b; Dixon and Ward, 2017; Fu and Clay, 2017. Heyes et al., 2020; Mollidor et al., 2020a; Mitchell-Smith et al., 2020; Munro et al., 2012; Neagu and Dixon, 2020a, b; O'Leary et al., 2020; Szifris et al., 2020). In the evaluation of 'Making a House a Home' (Dixon and Ward, 2017), young people who were part of the House Project as 'service users' and contributed their views as research participants, were also involved as peer researchers in other aspects of the research process. Their involvement ranged from the design stage to interpreting findings and dissemination. Young people's participation in the design stage included identifying evaluation questions to reflect their views on what success of the House Project would look like and agreeing methods of data collection. Their role in interpreting findings was facilitated by a residential research workshop at the University of York to explore themes and develop a key-messages presentation. Four of the young people contributed to developing and delivering two presentations, including co-presenting at an international child welfare conference. A similar approach was used in the second evaluation of the House Project (Dixon et al., 2020a) where co-production methods were applied and young people played a central role in key activities.

Young people leaving care were also involved as peer researchers throughout the evaluation of Staying Put (Munro et al., 2012). The peer researchers participated in research training provided by the National Care Advisory Service (NCAS) and Centre for Child and Family Research (CCFR) at Loughborough University. They contributed to the development of information sheets and research tools, interviewed young people, coded these interview transcripts during a residential analysis workshop and co-produced a peer research report (NCAS, 2012). A participatory approach was

included in the common research design of the eight evaluations of regional Staying Close projects (Allen et al., 2020; Dixon et al., 2020b; Heyes et al., 2020; Mitchell-Smith et al., 2020; Neagu and Dixon, 2020a, b; O’Leary et al., 2020; Szifris et al., 2020). This included young people training as peer researchers and interviewing young people and participating in co-production workshops. A co-production workshop was also included in the evaluation of Catch-22 and Southwark’s care leaving project (Mollidor et al., 2020).

Although young people leaving care were not involved as peer researchers in Fu and Clay’s (2017) evaluation, its strength related to examination of young people’s participation in the project in its core aims. Firstly, the evaluation aimed to investigate how far the designs reflected the views and priorities of the young people who had participated. Secondly, the evaluation aimed to explore the effectiveness of the process of engaging young people, and the impact of participation on those involved in the project.

Finally, as noted above, we recognised limitations of evaluations in part linked to scale, funding and timeframes. First, sample sizes were limited; a problem inherent to evaluations of projects that involve providing a service to a small number of care leavers (FitzSimons and McCracken, 2020). For example, the participation of 11 care leavers in the House Project (Dixon and Ward, 2017) represented 100% participation. Second, limited timeframes impacted on the evaluations’ ability to assess the sustainability and long-term outcomes of the projects. This was reported as a limitation across the evaluations generally. For example, in the Staying Close evaluations in which funding for the pilots were extended but the evaluations were not (Allen et al., 2020; Dixon et al., 2020b; Heyes et al., 2020; Mitchell-Smith et al., 2020; Neagu and Dixon, 2020a, b; O’Leary et al., 2020; Szifris et al., 2020). A further challenge imposed by the evaluation timeframes for projects that adopted a participatory design was the limited time available to recruit and train peer researchers to work on the evaluations. Third, difficulties recruiting young people to participate in the research resulted in evaluators making changes to their research design (Neagu and Dixon, 2020b); and experiencing low response rates to surveys and high levels of attrition in projects with a longitudinal design. For example, the evaluation of the North East Lincolnshire Staying Close pilot included five survey responses; three at midpoint and two in the

final survey (O'Leary et al., 2020). There was an attrition rate of 46 per cent of research participants in the evaluation of No Wrong Door, with only 32 of the 60 young people who took part in an initial interview also participating in a follow-up interview (Lushey et al., 2017).

Complexity of innovations and challenges for quantitative approaches and outcomes measures (Public Health)

From a public health perspective, innovations for young people leaving care can be considered 'complex interventions', presenting methodological challenges for their evaluation (Medical Research Council, 2006). Complexity lies in their multi-faceted nature and the needs of the young people for whom the innovations were designed. The majority of evaluation reports intended to adopt a mixed methods approach involving qualitative data generated by interviews and focus groups; and quantitative data generated by surveys and questionnaires. A mixed methods design signals an understanding of the values of both quantitative and qualitative methods to evaluating complexity and attempts to overcome some of the contextual challenges associated with limited sample sizes inherent in evaluation of small-scale innovations for young people leaving care.

Whilst the use of both methods to evaluate complexity is advisable, the authors often reported challenges in securing the appropriate quantitative data. All evaluations included qualitative methods such as interviews and focus groups with young people and practitioners which provided deep contextual data. Challenges in securing the appropriate quantitative data meant that qualitative data often acted as a substitute. For example, in their evaluation of Boom+ Martikke et al (2015) reported that quantitative tools did not appear to work and they adapted the design to focus more on interviews.

Challenges in securing the appropriate or intended quantitative data were associated with problems with sample size and collecting enough data to make analysis viable. Insufficient sample size prevented the success of an experimental design and the use of control groups (Munro et al., 2012, Fitzpatrick et al., 2014, Martikke et al., 2015) and limited the success of cost-, benefit-, or value- analyses (Munro et al., 2012, Dixon and Ward, 2017, Mollidor et al., 2020a, b; Szifris et al., 2020) and the use of validated tools. Although six studies explicitly reported using validated tools

such as the Short Warwick Edinburgh Mental Wellbeing Scale ((S)WEMWBS) (Lushey et al., 2017, Martikke et al., 2015, Neagu and Dixon, 2020a, b), Good Childhood Index (Dixon et al., 2017; Dixon et al., 2020b, Neagu and Dixon, 2020a, b) and the Strengths and Difficulties Questionnaire (SDQ), (Lushey et al., 2017), the small sample sizes restricted comparability and resulting value to the evaluation. For example, in their evaluation of North Yorkshire's 'No Wrong Door' innovation, Lushey et al. (2017) reported that although they had collected data from young people using the (S)WEMWBS, the sample size was too small to undertake meaningful analysis, as there were under 50 respondents. Poor access to data prevented the majority of evaluations that sought to conduct a cost-, benefit-, value- analysis from being successful. The success of the small number of projects that were able to conduct cost-saving analyses (Lushey et al., 2017, Dixon et al., 2020a, Dixon et al., 2020b; Neagu and Dixon, 2020a, b) related to access to data provided to them directly by project staff. These limitations around quantitative data demonstrate the challenges for the evaluation of innovations for care leavers around generalisability, comparability and validity of the findings beyond each individual innovation.

The issue of comparability was addressed in the evaluations of innovations funded in round two of the Innovation Programme. All 11 evaluations adopted a common approach, including use of a theory of change model with measurable indicators of success, methods and outcomes. This presented an opportunity to collate the data from across these 11 evaluations to generate learning to inform the national picture. This presented a particularly valuable opportunity for the evaluations of the eight regional implementations of 'Staying Close'. As yet, this work has not been conducted and the individual reports suggest that local challenges identified by evaluators would need to be appropriately contextualised. Further, Neagu and Dixon (2020a, p.19) report that 'there are no longer plans to conduct a thematic analysis of all eight pilot projects, as was initially proposed'. Challenges around outcomes were associated with short time-frames and the nature of expected outcomes. The timeframes for delivering the projects were overwhelmingly short, with evaluations being concluded in some cases before the project ended. This created barriers to embedding the intervention, allowing reports to only show indicators of progress with insufficient time to capture more than emerging evidence of early outcomes (Dixon and Baker, 2016; Dixon and Ward, 2017; Fu and Clay, 2017, Lushey et al., 2017). Many reports identified the short-

term nature of the evaluation period as a limitation and suggested further work was required to explore longer-term outcomes. For example, in the evaluation of the House Project in the first round of the innovation programme, Dixon and Ward (2017) reported that the maximum time young people had lived in their new houses was two months. This meant that outcomes were limited to exploring experiences of setting up and participating in the House Project, and it was not possible to assess impact on self-confidence, wellbeing and employment, education and training, accommodation stability or experiences of independent living. Additionally, final reports were generated prior to the end of the innovation period, leaving no possibility for findings to influence implementation or delivery of the innovations being evaluated, impacting the potential for diffusion and scale up. Further, in some cases, decisions to extend funding were made before the evaluation report was published, such as in the 'Staying Close' innovation in the second round of the Innovation Programme. In this case, the pilot ran for a year longer than the evaluation, limiting the extent to which the evaluation team could consider outcomes or issues of sustainability (Allen et al., 2020). Directly linked to the short time scales for the project was the issue of short-term contracts which led to uncertainty regarding the continuation of projects and impacted upon staff recruitment and retention (Dixon and Baker, 2016; Lushey et al., 2017; Mollidor et al., 2020a). Some evaluations failed to successfully deliver all of the expected outcomes (Dixon and Ward, 2017; Mollidor et al., 2020a), highlighting the importance of funders such as Government departments having realistic expectations of what can successfully be achieved in health and social care settings given the variation in research experience and knowledge.

Focus on innovation processes (Organisation Science)

From an organisation science perspective, evaluation of organisational processes surrounding innovation is paramount. A focus on the process of innovation paves the way for improved understanding of how such processes can be strategically improved to support sustainability and scale up beyond innovation piloting. Overall, the relative focus on innovation process in our review of the evaluation reports was low comparative to practice and outcomes. This may have reflected priorities of commissioners to generate evidence about which innovations have impact and upon which outcomes, with less priority placed on understanding organisational processes of implementation within the scope of funding and timeframes. The absence of focus

on implementation in evaluation prevents important lessons being shared; for example, variability of implementation of Staying Put at a local level has been associated with differing level of successful uptake and positive experiences of young people (Mendes and Rogers, 2020).

In total, 16 of the 22 evaluations included the process of innovation, with differing degrees of focus. Of the 11 evaluations published prior to 2020, two included a dedicated “process” stream (Dixon and Ward, 2017; Lushey et al., 2017), two considered how the innovation worked in practice (Dixon and Baker, 2016; Gibb and Edwards, 2017), and one discussed organisational implications (Munro et al., 2012). Fu and Clay (2017) aimed to include process in the evaluation design but were restricted by the commissioning agency from doing so. The remainder prioritised evaluating outcomes and demonstrating benefits for care leavers and sometimes practitioners, without explicitly exploring processes. All 11 evaluations from the 2020 cohort of DfE evaluations included a dedicated process stream, suggesting policy makers and commissioners increasingly recognise that understanding organisational processes of innovation add value to evaluation practices.

The reports that included process evaluation highlighted a number of organisational issues. Evaluations of the House Project (Dixon and Ward, 2017; Dixon et al., 2020a), revealed a number of barriers and facilitators to implementation of the innovation. Among barriers identified in the first pilot (ibid, 2017) were disruption to existing systems in the way housing allocation for care leavers was managed, and perceived risks in allowing the innovation project team a high degree of control over local authority assets. Other examples of organisationally relevant factors included the enabling or constraining effects of organisational reputation, with some organisations benefiting from their progressive reputation, and others seen as moribund in a way that hindered innovation (Dixon and Baker, 2016; Dixon et al., 2020a; Neagu and Dixon, 2020b); leadership (Dixon and Baker, 2016; Lushey et al., 2017; Dixon et al., 2020a,b) and engagement with senior leaders and parallel support services (Fitzpatrick et al., 2014; Dixon and Baker, 2016; Neagu and Dixon, 2020a, b; Dixon et al., 2020a; Mollidor et al., 2020a).

A common theme across evaluation reports that recorded organisationally relevant barriers and facilitators was a notable absence of wider exploration or explanation of

the issues. For example, organisational findings related to leadership might be limited to indicating that leadership was important for successful innovation implementation. The evaluations did not extend discussion to situate findings in wider theory such as exploring leadership styles as transformational, transactional and distributed (Currie and Lockett, 2011) or closing and opening leadership behaviours (Rosing et al., 2011). In another example, the House Project evaluation (Dixon and Ward, 2017) included findings related to concerns over the innovation team having control. This elicited notions of power, reflecting how implementation of an innovation may challenge the status quo and thus generate resistance. Yet deeper exploration of power relations between different professional groups was not evident in the report and could only be interpreted from the descriptive findings.

The reduced importance evaluations placed on the innovation process was further demonstrated by a stronger emphasis given to demonstrating the impact of a given innovation on outcomes for care leavers. For example, the evaluation of No Wrong Door (Lushey et al., 2017) included only four pages related to process findings, compared with 15 pages related to outcomes, with similar patterns seen throughout most of the reports. This does not suggest a lack of consideration for process by researchers, but more likely reflects the planned scope and objectives of evaluations to focus upon outcomes.

The inclusion of Theory of Change (ToC) models in 12 of the 22 reports demonstrated the availability to evaluation teams of a useful evaluation process tool. Through logic mapping, ToC models 'describe how a programme brings about specific long-term outcomes through a logical sequence of intermediate outcomes' (Breur et al., 2016: 2). A ToC model was included in one of the 11 reports prior to 2020 (Dixon and Ward, 2017) and in all of the 11 DfE round two reports, reflecting the funding requirement. However, the use of ToC models in the evaluations was limited to consideration of how practices could be related to outcomes; findings from process evaluations were not linked with ToC modelling, the impact of innovation process upon practices or outcomes were not explored and evaluations did not include complementary organisational literature. Notably, all ToC models were located in appendices; comparative to practice and outcomes, organisational processes of innovation were overlooked.

One clue to why outcomes have been prioritised over process, may be derived from Fu and Clay (2017), who were prevented from looking at process by the agency funding the pilot and its associated evaluation. In a context whereby an innovation pilot is in receipt of funding and an evaluation report requested by funders, evaluations are often restricted by commissioners' interests. For example, in evaluating the BOOM+ volunteering project in Greater Manchester, the approach reflected the concerns of the UK Cabinet Office who were interested in the impact of the innovation on care leavers' social capital (Martikke et al., 2015). Similarly, evaluators of New Belongings (Dixon and Baker, 2016) were also restricted in what data could be collected, since the DfE limited the evaluation of process to a "light touch". Finally, Mollidor et al., (2020a) did not include deep exploration of factors associated with the innovation not being implemented, when this may have revealed more than maintaining continued focus on outcome reporting. Overall, we suggest evaluation practices do not exist in a vacuum and are shaped by the socio-political and economic priorities in which innovation is enacted, namely to improve care leaver outcomes in a context of economic austerity. The impact of which, appears to direct the scope of evaluation commissioned by funding agencies towards a primary focus on capturing the contribution of a given innovation to improved outcomes.

Discussion

An interdisciplinary approach to evaluation of innovation for care leavers holds considerable promise to strengthen the nascent but growing evidence base that is developing through evaluation practices, so that evidence-based innovation is implemented, sustains and spreads (Currie et al., 2012). From the vantage point of social care, the inclusion of care leavers' participation in all of the evaluations, which extended to peer researcher and co-production approaches in many, reflects a commitment to the rights of young people to participate in research which is about them. This mirrors the impact of the international children's rights agenda (United Nations, 1989) and a shift towards participatory research methods with children and young people that has developed in the UK over the last thirty years (Dixon et al., 2018). Gallacher and Gallegher (2008) argue that this approach of engaging participants into the research process and as researchers themselves can help to provide a diverse data set that would otherwise be missed or not acknowledged.

The range of approaches identified in our review reflected a spectrum of participation with all studies including young people as participants, some as consultants and others as peer researchers and co-producers of the research (Prout, 2002, Ergler, 2017, Dixon et al., 2018). The strengths of the approaches at the upper end of the participatory spectrum, incorporating peer researchers and co-production, are related to implicit values such as empowerment and inclusion, the contribution of 'insider' knowledge to increase the validity of the research and minimising power imbalances between the researcher and participants (Eder and Corsaro, 1999, Kelly et al, 2016, 2020; Kilpatrick et al., 2007; Lushey and Munro, 2015; Prout., 2002, Punch, 2002, Smith et al., 2002). It is important to acknowledge that successful adoption of evaluations encompassing such high participation requires commitment from the academic research team and increased resources, with many potential pitfalls, and benefits not easy to realise (Kelly et al, 2016, 2020; Kilpatrick et al., 2007; Lushey and Munro, 2015; Dixon et al., 2018). Central to the success of this methodology is commitment to a higher level of participation (Hart, 1992; Shier, 2001, 2006) that offers peer researchers more than an 'empty ritual' or tokenistic level of involvement (Arnstein, 1969: p2 in Kilpatrick et al., 2007; Dixon et al., 2018; Lushey and Munro, 2015). This deeper level of participation extends beyond collecting data for qualified and experienced academics to analyse (Dixon et al., 2018; Lushey and Munro, 2015) and provides care leavers with meaningful and supported opportunities to share power and influence decisions (Shier, 2001, 2006). Further, successful adoption of participatory peer researcher and co-production approaches require careful attention to the role of, and support provided to young people throughout the research process, including in recruitment, training, ethics, data collection, analysis and dissemination (Ergler 2017; Kelly et al, 2016, 2020; Lushey and Munro, 2015, Prout 2002,).

Many of the evaluations we reviewed demonstrated a commitment to capture young people's perspectives in their own words. However, a key challenge lies in capturing the views of young people who are the most marginalised or disengaged, for example, care leavers who experience mental health issues or who identify as LGBTQ+ (Dixon et al., 2018). A number of the innovations were targeted at specific groups of care leavers, however the number of young people involved tended to be small. For example, in the evaluation of the Clear Approach programme which was designed to support young men at risk of custodial sentences, six of the young men referred to the

programme also participated in the research (Fitzpatrick and Williams, 2014). Additionally, a number of innovations included restrictions in their reach. For example, four of the six LAs included in the in-depth case studies of the Staying Put evaluation, required young people to be in or “actively demonstrating a commitment to being in education, employment or training” which was raised as a concern by some interviewees (Munro et al., 2012, p. 7). The reduced inclusivity at project or programme level excludes young people, arguably with the greatest level of need, having their voices heard which creates a paradox in participation.

The relative value of qualitative methods to facilitate inclusion of the voice of care leavers was echoed in our public health perspective, which focused on the appropriateness of a mixed-methods design to evaluate complex innovations and the opportunity to develop a shared outcomes framework. Control-group experiments were included in the intended design of evaluations of innovations in the second round of the Innovation Programme, but in practice proved unfeasible. Alderson et al., (2020) suggest that the unfeasibility of control-group designs for care leaver innovations is related to the lack of a developed infrastructure, compared with public health and medical research domains, and limitations in funding and sample size. The use of mixed methods approaches in the design of a majority of studies in this review reflects an appreciation of the value of each methodological contribution and the insights that are provided when both methods are robustly integrated.

Challenges include the evaluation and reporting of effects such as organisational context and the outcome measures used (Datta and Petticrew, 2013). Improving clarity and consistency in planning, collection and reporting could enable the provision of small but valid samples, creating a critical mass. These could be pooled and compared across innovations for meta-analysis where outcomes are measured using the same tools, a common approach in public health and health services research (Hughes et al., 2017; Zhu et al., 2019). Pooling samples or comparing at the study level, presents an opportunity to see patterns in the effects of similar innovations across different populations or contexts (though not without limitations), and opportunity also provided by intervention component analysis (ICA) (Sutcliffe et al., 2015).

These approaches to evaluating complex interventions could provide a reasonable start point from which to scaffold the development of a shared outcomes framework

(Rychetnik, 2002; Craig et al., 2019; Jagosh et al., 2015) for innovations supporting the transition of young people leaving care. The Leaving Well Framework (Social Finance, 2017) suggests that the development and use of an agreed outcomes framework for young people leaving care innovation is a realistic and achievable goal. The Leaving Well Framework is focused on individual level outcomes and is clear, comprehensive and considers a range of perspectives on care-leaving. A public health perspective can build on this outcomes framework by considering how measuring individual-level outcomes must be incorporated into other areas which impact on effectiveness of an intervention overall. Evaluation frameworks popularised in public health domains provide useful structure and minimise study design and evaluation development time. For example, the RE-AIM Framework (Reach, Effectiveness, Adoption, Implementation, Maintenance), is an evaluation planning and implementation tool which supports the consideration of key areas for consideration in evaluation and accounts for contextual factors, particularly important in social care programme implementation (Glasgow et al., 1999; Glasgow et al., 2019). More recently, theory driven approaches to the problems associated with complex interventions continue to innovate beyond realistic evaluation (Pawson and Tilley, 1997), one such example is from Greenhalgh's study of nonadoption, abandonment, and scale-up challenges (Greenhalgh et al., 2017). The development of a comprehensive framework that builds on and extends the Leaving Well Framework might incorporate individual level outcomes, and extend further to the wider context and mechanisms in which the outcomes occur, are implemented, and scaled up.

In public health, the NIHR fund Applied Research Collaborations (ARCs) and from 2020, Public Health Intervention Responsive Studies Teams (PHIRST), have been designed to build working partnerships between local authorities and universities (Currie et al., 2013; Lockett et al., 2014; Walters, 2020). An approach in social care, similar to these in public health, might establish not only the academic infrastructure to undertake evaluations but diffuse key aspects of research and evaluation knowledge into local authorities more broadly and longer term.

Organisational science theories and innovation process models such as Theory of Change (ToC) present opportunities to inform the development of a shared evaluation approach. First, evaluation reporting could be further strengthened by linking empirical

findings to existing knowledge from organisational science towards theoretical or analytical generalisation (Yin, 2013). Across many of the reports, researchers empirically described a number of organisational factors relevant to the implementation of innovation at various practice sites. However, it was common for such findings to not be explored beyond base description. Whilst we recognise for many evaluations it was not appropriate to collect more empirical data about organisational process, findings could have been enhanced by drawing down knowledge of innovation processes in other public service contexts. The benefit of this would be for social care to contribute toward building generalisability of findings surfaced in other research domains, while simultaneously leveraging extant knowledge from organisation science and management to build understanding of innovation in the context of care leavers' transitions to adulthood.

Second, for evaluations incorporating a specific process stream, including a process model would help to map the organisational processes relevant to the innovation and where any barriers or facilitators may be encountered. Many reports included a ToC model that encompassed consideration of process, yet this was underutilised and limited to a practice-outcomes dynamic. However, such models offer a valuable device on which the authors may have also anchored their process findings to specifically highlight the location of any barriers and facilitators and note their potential impact on downstream processes, practices or outcomes. From these annotated models, greater insights for future implementation efforts may have been generated, thereby supporting policy makers' efforts towards any potential scale-up or diffusion of innovation beyond piloting sites.

Third, without exception, evaluation reports focused on describing and demonstrating that a given innovation works in practice to positively impact upon the lives, experiences and outcomes of care leavers. Although important to show an innovation has intended or desired effects, it is also important to give equal weight to understanding how an innovation is facilitated and enabled by different organisational processes and practices. For example, leadership was highlighted as important to overcome barriers that may arise during innovation implementation, but what leadership approaches are more or less useful in this context (Currie and Lockett, 2012)? Intergroup communication and collaboration across different professional groups, or local authority departments were also highlighted as enabling or

constraining successful implementation, but what organisational practices and strategies support or hinder this? Specifically, how can the diversity of different stakeholders be best managed (Huxham and Vangen, 2005)? Given the centrality of knowledge, often held by different agencies or professionals to innovation, then how might such knowledge be mobilised for benefit of care leavers (Currie et al., 2019)? Attempting to answer such questions promises greater strategic understanding of innovation enabling transfer of learning from pilot phases of innovation and evaluation, towards developing sustainability and diffusion of innovation more widely across leaving care services.

Conclusion

We have aimed to provide insight into how evaluations of innovation to support care leavers transitioning into adulthood could be developed. Drawing our review together, we offer recommendations to enhance evaluations in three main ways: credibility, generalisability, theoretical focus.

Credibility of evaluation would be enhanced through recognising the value of young peoples' participation. Evaluators should consider the opportunity and value of including higher-level participatory approaches through involving peer researchers as co-producers (Kelly et al, 2020; Lushey and Munro, 2015; Schier, 2001, 2006). Drawing on learning from the practices of participatory approaches in the evaluations in our review would inform the development of a participatory framework to guide a shared approach in future evaluations, including options across the participation spectrum (Shier, 2001, 2006). Where participation at the upper end of the spectrum is not possible due to funding or timing constraints which limit recruitment, training and support opportunities to meaningfully enable co-production (Lushey and Munro, 2015; Kelly et al, 2020), methods should prioritise the inclusion of young people's perspectives. Opportunities for participation should extend to groups of care experienced young people who are seldom-heard. Evaluators should also consider the methods adopted to promote young people's participation. For example, in some studies in our review, one-to-one qualitative interviews with young people were reported to be more accessible, inclusive and effective than focus groups or surveys (Lushey et al., 2017; Martikke et al., 2015).

Generalisability of evaluation findings would be enhanced through development and application of a shared care leavers outcomes framework that allows for comparative analysis of innovations. A comprehensive framework should be developed in co-production with care leavers that builds on and extends the Leaving Well Framework (Social Finance, 2017). This could incorporate individual level outcomes, innovation processes and the wider context of the implementation and diffusion of an innovation.

Alongside credibility, and also contributing to generalisability, evaluation should extend beyond assessing outcomes to consider innovation process more theoretically. We highlighted how more recent evaluations have included theory to link innovation with improved outcomes, and recommend that this approach should be applied to process aspects of evaluation to move beyond description of the innovation process. Attempting to understand process beyond surface description of implementation extends the value of evaluation. Innovation is a social process, enabled or constrained by organisational issues such as leadership, collaboration, and knowledge mobilisation. Understanding these processes helps support development of innovation from an idea, through to scale up and widespread diffusion.

Finally, we recognise that for evaluation teams to enact these recommendations in full may be limited by policy and funding contexts, including specifications regarding the design, methods, format, focus and measures used. Collaborations between researchers from a number of academic fields in the evaluation of innovation suggest new avenues to deepen and extend emergent knowledge about the nature and extent of organisational processes that may support innovation and its spread. An interdisciplinary evaluation approach may provide an opportunity for evaluation of innovations that aim to support young people leaving care in their transition to adulthood to wield greater power in shaping future policy and practice. In recommending a tripartite focus on the participation of young people, application of an outcomes framework and drawing on theoretical understanding of implementation processes in evaluating innovation for care leavers, we hope to ultimately contribute to care leavers' positive transitions to and pathways within adulthood.

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