

# HMCTS Digital Support Service: Implementation Review

September 2020



Good Things  
Foundation



HM Courts &  
Tribunals Service

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## Summary

### An introduction to the Digital Support service

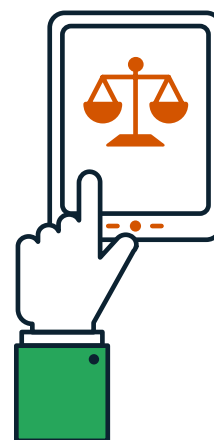
Her Majesty's Courts and Tribunals Service (HMCTS) is undergoing a £1bn reform programme and is redesigning the way courts and tribunals services are provided. The reform programme aims to 'bring new technology and modern ways of working to the way justice is administered'<sup>1</sup>.

A large part of this programme is moving services online. However, HMCTS recognises that not everyone who needs to use the courts and tribunals will want to access digital services, and that others may need some help and support to do so. To support people in this position, HMCTS is improving its non-digital channels and piloting a Digital Support (DS) service.

The HMCTS DS service is available over the phone and face-to-face. The telephone DS service is being piloted by HMCTS and is delivered through Courts and Tribunals Service Centre (CTSC). Good Things Foundation has been commissioned to co-design<sup>2</sup> and pilot the face-to-face DS service. The focus of this report is to describe the findings of an implementation review of the face-to-face DS service (between September 2017 and August 2020).

### What this report contains:

- **The Introduction** provides context for the pilot.
- **Chapter 1** explains what we have learned about who is using the face-to-face DS service, and the reasons they require support to access HMCTS services online.
- **Chapter 2** describes how centres have implemented the face-to-face DS service, and the enablers and barriers to delivering the service; it also provides an overview of the appointment data and explains what we can learn from it.
- **Chapter 3** provides an evaluation of the DS user journey, detailing what is working well and what is working less well at each stage.
- **Chapter 4** provides an overview of the impact of Covid-19 on delivery.
- **Chapter 5** sets out the next steps for the extension of the pilot.
- **Chapter 6** summarises what has been learned during the pilot.



<sup>1</sup> For more information on the HMCTS Reform Programme, see the guidance available at: <https://www.gov.uk/guidance/the-hmcts-reform-programme#our-reform-programme> (Accessed 11.09.20)

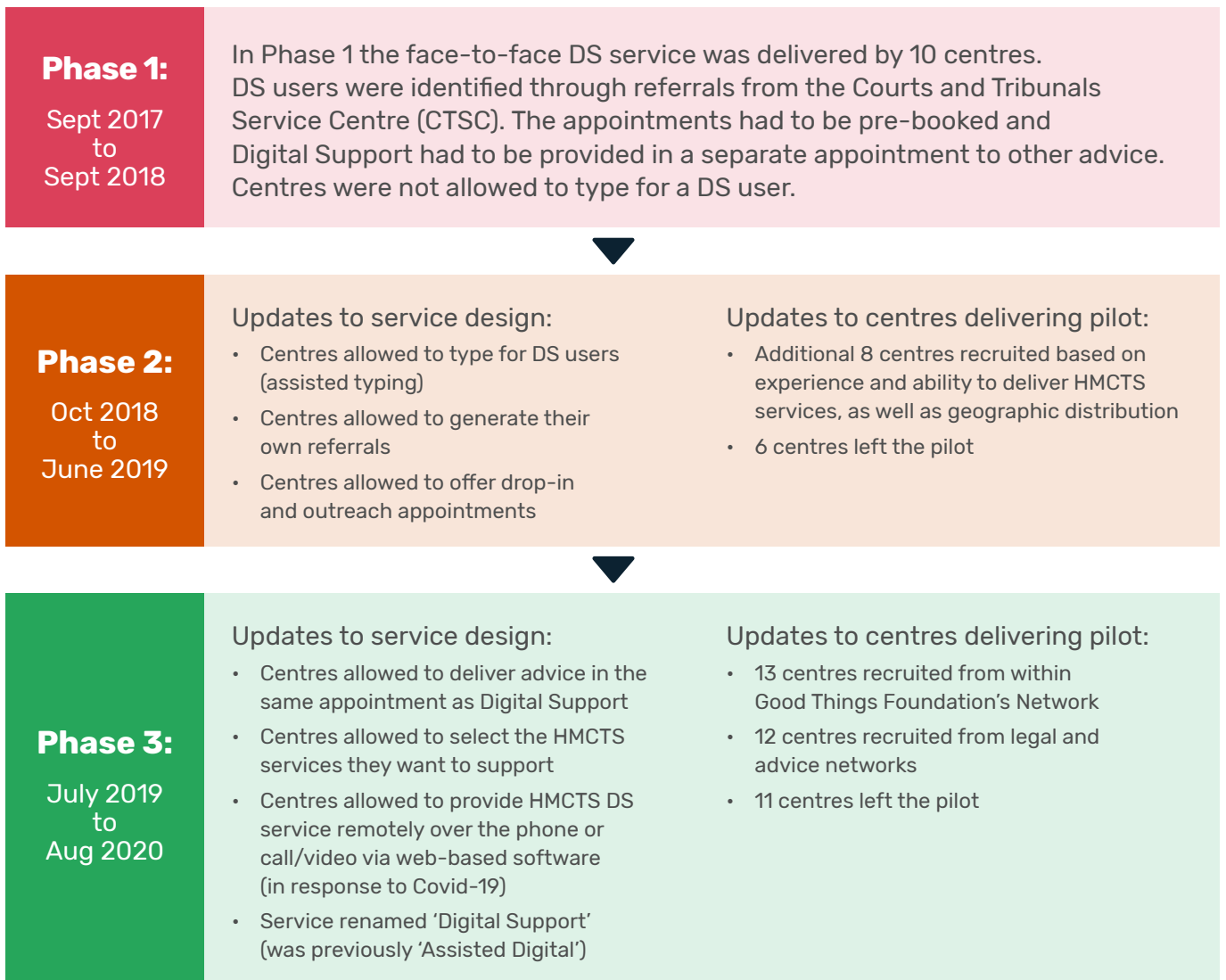
<sup>2</sup> HMCTS and Good Things Foundation have worked collaboratively and iteratively to design the face-to-face DS service, evaluate how well the service is meeting user needs, and update the service design to provide a better experience for users.

## Overview of the Pilot

The HMCTS services supported through the pilot are:



To date, the face-to-face DS pilot has been delivered in three phases:



A total of **782 DS appointments** have been attended since the start of the pilot

**4**

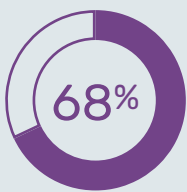
appointments were delivered in **Phase 1**

**78**

appointments were delivered in **Phase 2**

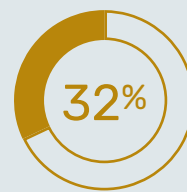
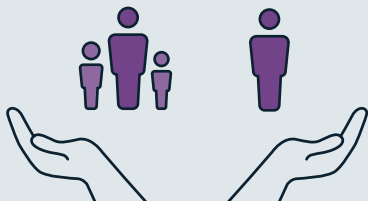
**700**

appointments were delivered in **Phase 3**



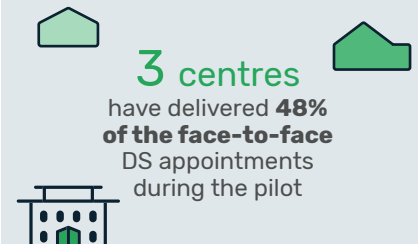
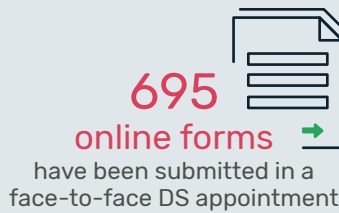
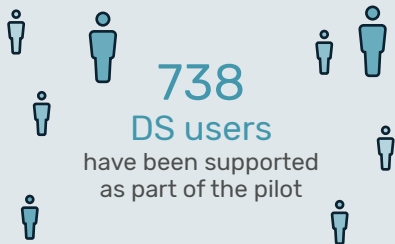
68% of the appointments delivered through the DS pilot have been Social Security and Child Support benefit (SSCS) appeals:

**379** PIP appointments  
**86** Universal Credit appointments  
**66** ESA appointments



32% of the appointments delivered through the DS pilot have provided support for non-SSCS services:

**106** Help With Fees appointments  
**35** Civil Money Claims appointments  
**61** Divorce appointments  
**45** Single Justice System appointments  
**4** Probate appointments



Non- HMCTS referrals were the key route into the face-to-face DS service

**749**

DS appointments were the result of a non-HMCTS referral

(where DS user is identified and engaged directly by a centre or through a referral from within a centre's network)



**33**

DS appointments were the result of a HMCTS referral

(via an email referral from CTSC or the courts)



The **average length** of a face-to-face DS appointment was **56 minutes**



On average, users of the face-to-face DS service **rated their experience...**

**9.5 / 10**

(feedback scores were collected for 724 out of 782 appointments)

## Key Findings

The face-to-face DS service is highly valued by DS users and addresses a clear set of barriers, supporting users who lack the skills, access, confidence, or ability to complete a form online.

Many of the barriers that DS users face would be present whether they were accessing HMCTS service online or via paper, and in many instances it is the organisation supporting a DS user which suggests that they access HMCTS services online. However, the face-to-face Digital Support service provides value in that it provides both an effective and efficient way of providing access to justice: effective in that it helps address DS users' needs, and efficient in that it does this via digital channels.

### **What needs to be in place to meet users' Digital Support and wider needs?**

On the whole, the key priority for DS users is to receive support for, or to resolve, their issue; most are unlikely to have firm expectations about how this aim is achieved.

DS users can face multiple barriers to accessing HMCTS services online, and this means that they are likely to require a wider package of support than just Digital Support (including emotional, procedural - and sometimes legal - support).

Although additional support is not within the remit of the funded face-to-face DS service, where needed, it cannot be separated from Digital Support. The additional support provided by centres is often crucial to the success of a face-to-face DS appointment, and in some instances not having this support would be a barrier to accessing HMCTS services online.

Going forward, there needs to be a clear view of end-to-end service journey and potential Digital Support requirements outside of the application stage. As HMCTS service development has followed an agile approach, different elements of the online journey have been built in stages. As they mature it will be important to understand the end-to-end journey and DS users' Digital Support touchpoints.



**What needs to be in place to enable community-based and/or support organisations to deliver?**

Community-based/support organisations are an effective channel through which to provide face-to-face Digital Support. DS users appreciate being able to visit a local organisation that they know and trust, and the support that centres deliver receives very high levels of satisfaction.

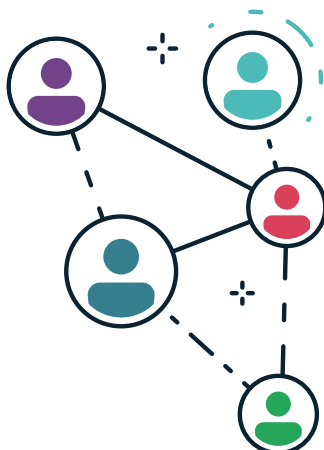
Central provision needs to enable community-based/support organisations to best serve their users, in their local context. The face-to-face DS service design guidelines need to be flexible enough to enable a diverse range of centres to integrate the face-to-face DS service within their existing delivery models (in a straightforward way).

The intention of the pilot was to ‘test and learn’ how the face-to-face DS service can be successfully implemented across a range of organisations. The diversity of organisations delivering the face-to-face DS service has been an asset, allowing us to better understand the enablers and barriers to implementation in a variety of contexts.

The research has uncovered a number of organisational and contextual factors that facilitate community-based/support organisations to implement the face-to-face DS service. These include:

- Good relationships with relevant local organisations (that include those that come into frequent contact with users eligible for the service e.g. welfare and benefits advice centres).
- Effective triaging, where all staff and volunteers have the understanding to identify people suitable for the service.
- Existing case management processes to enable centres to track DS user progress more easily and identify potential DS users.
- Expertise in supporting HMCTS services.
- Experience using digital forms.
- Staff and volunteers who are willing to use, able to use, and see the benefits of, digital services (and can sell-in the benefit of the service internally).

Support from HMCTS is also crucial to training staff/volunteers about how to use, and support, people to access HMCTS digital services. Reflecting the diversity of community-based/support organisations within the pilot, any onboarding training needs to be tailored to the expertise of the organisation.



## Introduction

Her Majesty's Courts and Tribunals Service (HMCTS) is undergoing a £1bn reform programme and is redesigning the way courts and tribunals services are provided. The reform programme aims to *'bring new technology and modern ways of working to the way justice is administered'*<sup>3</sup>.

A key way in which HMCTS is implementing new ways of working is through moving services online. Moving services online allows people to engage with the courts via a range of channels (i.e. telephone, paper and online), as well as enabling people to access HMCTS systems anytime and anywhere (provided they have access to the internet and a digital device). Online services tend to be quicker, more accurate and easier to track than paper forms, which brings benefits to people and organisations interacting with, or working within, the HMCTS system (including litigants, legal professionals and judges).

Although online services bring benefits for many, there are some people who will prefer not to use a digital service, or who will need support to access HMCTS services online. In the UK there are 11.7 million people, who are without the digital skills needed for everyday life. Of these, 9 million are unable to use the internet and their devices by themselves. An additional 2.7 million are able to access the internet but lack the ability to use it to its full advantage.<sup>4</sup>

Many of the groups who are more likely to interact with HMCTS services, are also more likely to be without the digital skills needed for everyday life. Socially excluded groups tend to be the heaviest users of many government services, yet they are also less likely to be able to use online channels; 40% of benefit claimants have 'very low digital engagement' (as measured by the Lloyds Bank UK Consumer Digital Index).<sup>5</sup>

To ensure that those who do not wish to use the digital service can continue to access justice, the option to submit a paper form will remain (and HMCTS is making improvements to this paper process). HMCTS is also piloting a Digital Support (DS) service to provide assistance for people who would be unable to submit a digital form independently.

The HMCTS DS service is available over the phone and face-to-face. The telephone DS service is being piloted by HMCTS and is delivered through Courts and Tribunals Service Centre (CTSC). HMCTS staff at CTSC are trained to be able to identify users who would be unable to submit an online form independently and these users are either assisted over the phone or referred on to the face-to-face DS service. The face-to-face DS service is being piloted by HMCTS in collaboration with Good Things Foundation.

HMCTS commissioned Good Things Foundation to pilot the face-to-face DS service in 2017. Good Things Foundation is the UK's leading digital social inclusion charity. The face-to-face DS service is being delivered by community centres within Good Things Foundation's Network, alongside additional centres identified through HMCTS's relationship with the Litigant in Person Engagement Group (LiPEG).

<sup>3</sup> For more information on the HMCTS Reform Programme, see the guidance available at: <https://www.gov.uk/guidance/the-hmcts-reform-programme#our-reform-programme> (Accessed 11.09.20)

<sup>4</sup> Lloyds Bank, UK Consumer Digital Index, 2020, Page 7. Available at: [https://www.lloydsbank.com/assets/media/pdfs/banking\\_with\\_us/whats-happening/lb-consumer-digital-index-2020-report.pdf](https://www.lloydsbank.com/assets/media/pdfs/banking_with_us/whats-happening/lb-consumer-digital-index-2020-report.pdf) (Accessed 11.09.20)

<sup>5</sup> Lloyds Bank, UK Consumer Digital Index, 2020, Page 13. Available at: [https://www.lloydsbank.com/assets/media/pdfs/banking\\_with\\_us/whats-happening/lb-consumer-digital-index-2020-report.pdf](https://www.lloydsbank.com/assets/media/pdfs/banking_with_us/whats-happening/lb-consumer-digital-index-2020-report.pdf) (Accessed 11.09.20)



The face-to-face DS pilot has taken a 'test and learn' approach. HMCTS and Good Things Foundation have worked collaboratively, and iteratively, to design the face-to-face DS service, evaluate how well the service is meeting user needs, and update the service design to provide a better experience for users. The focus of this report is to summarise the findings from an implementation review of the face-to-face DS service.

The following online HMCTS services are (now) supported through the pilot:

- Civil Money Claims
- Divorce
- Help with Fees
- Probate
- Single Justice System
- Social Security and Child Support (Personal Independence Payment appeals, Employment Support Allowance appeals, Universal Credit appeals)

The Digital Support provided through the face-to-face DS service includes helping DS users to:

- Understand the HMCTS service and what it is there for
- Get ready to fill in the HMCTS online form
- Understand the content of the HMCTS online form
- Fill in the HMCTS online form (either by supporting the DS user to fill it in themselves or by typing for the DS user)

Additional support such as emotional, procedural or legal support is not within the remit of the funded DS service, but can be provided within a face-to-face DS appointment (legal support can only be provided by organisations certified to do so).

The face-to-face DS service was initially designed to support:

- People who do not have the digital skills or confidence to complete online forms themselves e.g. can't navigate websites, use keyboards or upload documents.
- People who do not have the capability to complete online forms themselves e.g. people with physical or mental health problems, learning difficulties or language barriers.
- People who do not have access to a suitable digital device or internet connection.

From the outset, the pilot has sought to answer two core questions:

- What needs to be in place to meet DS users' Digital Support and wider needs?
- What needs to be in place to enable community-based and/or support organisations to deliver?

The HMCTS face-to-face DS service falls within the definition of 'Assisted Digital Support'<sup>6</sup>, and the service is one of several Assisted Digital programmes that have been commissioned by the UK government. As a result, the findings of this report are of interest beyond HMCTS.

This report brings together the findings from the pilot between September 2017 - August 2020. The findings are based on the data from 782 appointments, 33 interviews with centres delivering the face-to-face DS service, 32 interviews with DS users, a design session at Birmingham Courts and Tribunals Service Centre and a virtual workshop with centres.<sup>7</sup>

On 23rd March 2020, the government introduced social distancing measures in response to the Covid-19 pandemic, which had a significant impact on the ability of centres to deliver a face-to-face DS service. This report focuses on the learnings from the face-to-face support delivered up to this point. That said, the impact of Covid-19 has had significant implications on the design of the face-to-face DS service, and how the pilot will move forward. This is discussed in Chapter 4 and Chapter 5 of this report.

<sup>6</sup> Gov.uk, Designing assisted digital support. Available at: <https://www.gov.uk/service-manual/helping-people-to-use-your-service/designing-assisted-digital> (Accessed 11.09.20)

<sup>7</sup> A full methodological statement can be found in Annex 1.

## Glossary of key terms

**Vulnerable Users:** users with ongoing challenges and support needs or life events which have an impact on their ability to participate in society or use services.<sup>8</sup>

**Co-design:** HMCTS and Good Things Foundation worked collaboratively, and iteratively, to design how the face-to-face DS service is delivered to users, evaluate how well the service is meeting user needs, and update the service design to provide a better experience for users.

**Assisted Typing:** typing for a user.

**Emotional Support:** providing space, empathy and support which is needed to enable someone to complete their digital journey.

**Procedural Support:** information around the processes and practical support in the context of Digital Support. A user may need procedural or practical help about a range of issues; these may impact on how they interact but do not always directly link to the current reason for contact. This could be about the court process and the next steps or supporting a user practically with a reasonable adjustment.

**Legal Support:** in the context of Digital Support, this is advice which may be required throughout a case and informs a user with various options, explaining the consequences of each so that the user can make an informed choice. A user may need legal support on a range of issues, not just the reason for their current contact.

**ESOL:** English for Speakers of Other Languages.

**Single Justice System (SJS):** where a person has been charged with a minor criminal offence and their case is decided by a magistrate without going to court.

**Civil Money Claims (CMC):** where someone makes a money claim if a person or organisation owes them money and will not pay them back.

**Divorce:** process of ending a marriage if the relationship has permanently broken down, after being legally married for over a year.

**Probate:** applying for the legal right to deal with someone's property, money and possessions (their 'estate') when they die.

**Personal Independence Payment (PIP):** A benefit which can help with some of the extra living costs if a person has a long term ill-health condition or disability.

**Employment Support Allowance (ESA):** A benefit for a person who has a disability or health condition that affects how much they can work. ESA provides a person with money to help with living costs if unable to work and support to a person to get back into work when able to.

**Help with Fees (HWF):** a person might get money off their court or tribunal fees if they have little or no savings, are on certain benefits or have a low income.

**Universal Credit:** a payment to help with living costs, paid monthly, if a person is on a low income, out of work, or unable to work.

**Social Security and Child Support (SSCS):** in the context of this report, this relates to PIP, ESA, Universal Credit. This is the impartial tribunal service that is independent of the government and will listen to both sides before making a decision.

**Social Security and Child Support (SSCS) appeal:** in the context of this report, this relates to appealing a benefits decision in relation to PIP, ESA, Universal Credit, if a person thinks that the decision in the mandatory reconsideration notice is wrong.

**Mandatory Reconsideration:** where a person disagrees with a decision about benefits, tax credits or child maintenance and asks for the decision to be looked at again.

**CaptureIT:** Good Things Foundation's customer relationship management system which was used to record and store information relating to the Digital Support appointments delivered.

<sup>8</sup> Ofcom, Consumer Vulnerability. Available at: <https://www.ofcom.org.uk/about-ofcom/what-is-ofcom/consumer-vulnerability> (Accessed 11.09.20)



## Chapter 1

# Understanding the DS User

### 1.1 Who is using the face-to-face DS service?

As mentioned in the Introduction, the face-to-face DS service was designed to support:

- People who do not have the digital skills or confidence to complete online forms themselves e.g. can't navigate websites, use keyboards or upload documents.
- People who do not have the capability to complete online forms themselves e.g. people with physical or mental health problems, learning difficulties or language barriers.
- People who do not have access to a suitable digital device or internet connection.

Research interviews conducted with 32 DS service users confirmed that the service was reaching people within these target groups. For example, researchers spoke to: a DS user who could not send an email without support, a DS user who could not type for themselves due to a physical impairment, and a DS user who had no digital device or internet connection at home.

However, the research interviews also highlighted that the face-to-face DS service was supporting DS users who fall outside the original target groups. On the surface, some DS users appeared to have the digital access, digital skills, digital confidence and capability to access an HMCTS service online independently. However, the research revealed that they needed support for other reasons such as: the context and perceived stakes involved in accessing HMCTS services, previous experiences with government services, or their personal circumstances.

The research has highlighted that the design of the face-to-face DS needs to be able to support a wider range of DS users than initially anticipated. Section 1.2 sets out the main reasons that DS users require support, providing context about the full range of DS user needs that the face-to-face DS service needs to address.

The majority of users supported through the face-to-face DS service during the pilot were Social Security and Child Support ('SSCS') appellants, and most of the DS user research interviews conducted were also with SSCS appellants. As a result, the data and insights used in this report largely rely on the feedback of these SSCS DS users – who were primarily Personal Independence Payment ('PIP') appellants. However, the research interviews conducted with 5 non-SSCS DS users suggested a high degree of cross-over in the needs and experiences of SSCS and non-SSCS DS users, and for this reason, this report focuses on describing DS users as a whole, rather than segmenting them by HMCTS Service.



## 1.2 Why do DS users require support to access HMCTS services online?

The reasons that DS users need to use the face-to-face DS service fall into five groups:

1. Low digital skills, limited internet access or low digital confidence
2. Low confidence completing, or difficulty understanding, HMCTS forms
3. English for Speakers of Other Languages (ESOL)
4. Stress caused by a life transition or negative experiences with government services
5. Multiple and complex support needs

These barriers are not mutually exclusive, and frequently overlap. However, it may also be the case that a DS user has high need in one area, but not in another.

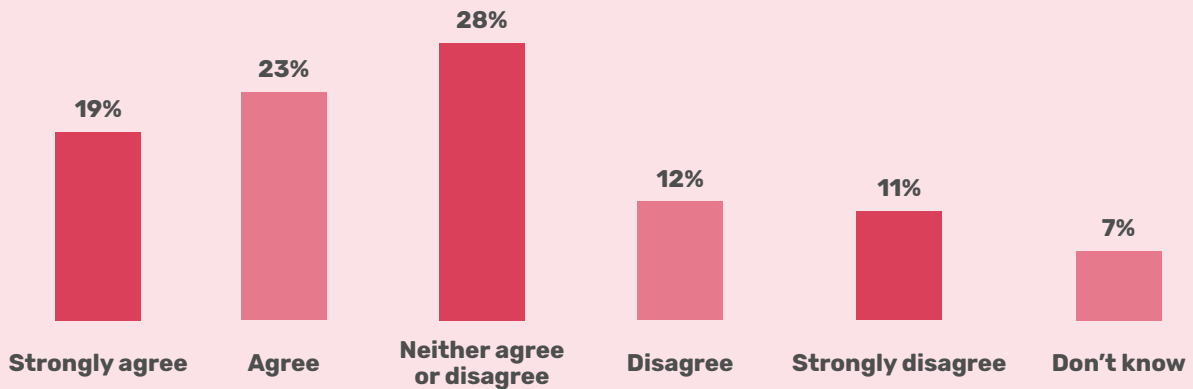
### Low digital skills, limited internet access or low digital confidence

Limited access to the internet or digital devices prevents some DS users from being able to complete an HMCTS form online, simply because they do not have the means to do so.

Beyond access, low digital skills and/or low digital confidence may also be a barrier. From March 2019, DS users were asked to what extent they agreed 'the internet is for people like me'; only 42% of those asked agreed with this statement.

### 'The internet is for people like me'

(Agreement among DS users who attended an appointment)



Base: Data collected from March 2019, results based on 637 users of the face-to-face DS service

The digital skills/confidence barriers experienced by DS users fall into two tiers:

- 1. Those without the digital skills or confidence to complete any online interactions:** some DS users do not have the skills or confidence to complete even basic tasks online without support, and would not be able to complete an online form, in any context.

*"I can't do emails. I don't know what I'm doing, so I don't tend to do it. You press one button and it all goes wrong."*

DS User 31

- 2. Those without the digital skills or confidence to access HMCTS services online:** some DS users have the confidence to complete some tasks online (such as using social media, using online banking, or shopping online), but need support to use HMCTS digital services due to the perceived complexity of the task.

HMCTS continues to provide the option to complete forms on paper. However, when the benefits of completing an online service are explained to a DS user, they are happy being supported to do it online. The face-to-face DS service allows people facing digital barriers to access the online service by providing help to complete HMCTS digital forms, or through offering an 'assisted typing service' (where staff/volunteers type for the DS user).

**Service Design Iteration:** Initially, the face-to-face DS service guidelines did not allow centres to type on the DS user's behalf as there was a risk it would be considered legal advice. Research identified that this ran the risk of denying access to HMCTS digital services for a significant portion of people who cannot type on their own. Legal advice was sought from HMCTS which resulted in the guidelines being updated to include assisted typing support. A new process was implemented alongside this to gather user consent for the assisted typing support.



## User A: Profiling a DS user with limited digital skills<sup>9</sup>

User A used the face-to-face DS service delivered by Centre A (a non-specialist support centre) to make an application for divorce.

User A is an ongoing user of the support that Centre A provides. She visits Centre A to use its childcare facilities and has also been on an employability skills course there. She became aware of the face-to-face DS service through a poster at the centre.

User A was worried about the cost of using a lawyer, so was pleased to find free support. She does not have access to the internet at home and finds using computers very stressful, so she would not have been able to complete the form herself.

During her appointment at Centre A the adviser talked her through the process of putting in an application, explained how long it might take, and what the outcomes might be. The adviser also provided an assisted typing service for User A. User A was unable to submit the form during the appointment because she did not have her partner's address. She has yet to submit the form.

### **Low confidence completing, or difficulty understanding, HMCTS forms**

Some DS users do not feel confident using HMCTS digital services and need reassurance that they are completing the form in the 'right way'. Some of the common concerns cited by DS users include: difficulty understanding the procedural and/or legal language used in the online forms, uncertainty about how to communicate their case effectively and anxiety about understanding and completing all the required steps.

*"I've always booked in with somebody in case I make a mistake. I feel more confident about speaking to somebody because I know it's right."*

DS User 8

HMCTS digital forms are not just another online form; the outcome of the process is high stakes for the DS user. Some DS users explained they found HMCTS services more stressful than other online applications and require reassurance and support to feel confident about using HMCTS services. This is support they are likely to have required even if they were filling out a paper form.

<sup>9</sup> Please note this case study is created using composite information from a number of research interviews and does not relate to an individual person.

## User B: Profiling DS user with low confidence completing a form<sup>10</sup>

User B lives with his partner and is not currently working. He has a high level of digital skills and feels comfortable performing a variety of tasks online. He has claimed Universal Credit and has been able to fill in his online journal independently.

User B visited Centre B (a centre that offers accredited legal advice) to access support in lodging a PIP appeal. User B has never used Centre B before and was signposted to the centre by a local charity which has been supporting him in relation to his mental health.

User B visited Centre B primarily to get the reassurance that he was filling out the PIP appeal form 'the right way'. He had filled in the Mandatory Reconsideration himself and was worried about making a mistake with the appeal form.

He visited Centre B and they gave him an initial drop-in consultation to discuss his situation. He was then booked in to a Digital Support appointment a few days later. During the appointment the adviser typed for User B, though he could have completed the form himself. The adviser asked User B about his personal circumstances, gave advice about the information he should include and also gave an explanation of the appeals process.

User B has not had contact with Centre B since the appointment but has the centre's contact details if he requires any additional support.

### English for Speakers of Other Languages

Some centres are supporting DS users with English for Speakers of Other Languages (ESOL). Data has been collected on the number of DS users requiring ESOL support since 31st March 2020. Of the 165 appointments that have been delivered since then, 23 have been indicated as being with DS users with ESOL needs (14% of appointments, where data was available).

DS users with ESOL needs may have difficulty understanding what the HMCTS online forms are asking them (particularly given the procedural and/or legal language used in the online forms), and they may also struggle to communicate their case in English. In this context, a DS user may use the face-to-face DS service to access interpretation services (which may be delivered through a formalised interpretation service, or through staff/volunteers at the centre who have a shared language with the DS user). Alternatively, DS users may bring a friend/family member to interpret for them, so they can access the wider range of support that centres deliver in a face-to-face DS appointment (such as the digital, emotional, procedural and legal support described in Chapter 3).

*"We do have quite a few people where English isn't their first language, they tend to bring people with them such as a friend, cousin or sister who can help translate. We also have quite a few different language speakers across the organisation."*

*Centre staff*

The HMCTS Digital Support pilot covers both England and Wales. For centres delivering in Wales, language support may be required for Welsh speakers. The three centres currently delivering in Wales report that they are able to provide this support if required. Where Welsh speakers have used the face-to-face DS service, the appointment has been conducted in Welsh, with the forms completed in English.

<sup>10</sup> Please note this case study is created using composite information from a number of research interviews and does not relate to an individual person.



## Bromley by Bow Centre (Good Things Foundation's Network): supporting DS users with ESOL needs

Bromley by Bow Centre is a charity that combines a neighbourhood hub, medical practice and community research project. It is based in Tower Hamlets and has been delivering services for 35 years. Bromley by Bow Centre delivers support for families, young people and adults in a range of areas including health, employment, social welfare, money and housing.

Bromley by Bow Centre is well established in its local community, which means it has engaged a significant portion of its DS users through word of mouth. In some instances, the support provided may also be part of a wider journey of support provided on a particular issue. Bromley by Bow Centre has expertise in delivering welfare and benefits support, and has used its case management system to identify and reach out to potential DS users at the point of appeal.

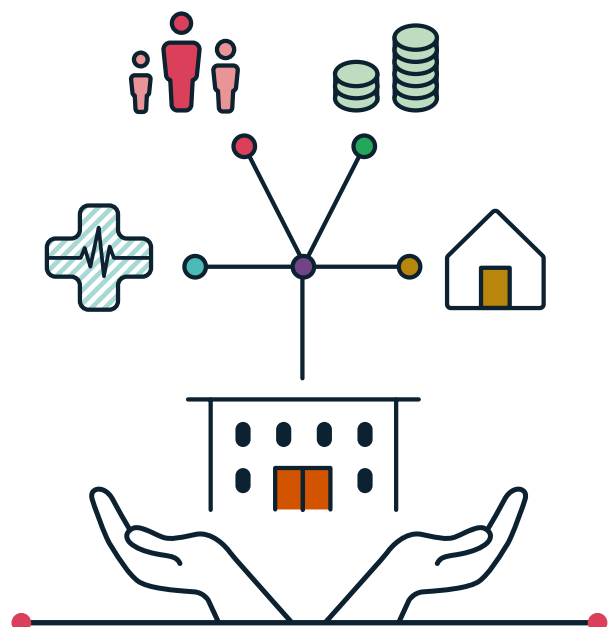
The majority of DS users Bromley by Bow Centre has supported as part of the pilot have been lodging PIP or ESA appeals – which reflects Bromley by Bow Centre's expertise in health and welfare and benefits support.

Some of the key groups of people that Bromley by Bow Centre supports include people from the Bangladeshi community, people with language barriers and people who have no access to the internet or low digital skills. As a result, many of those using the Digital Support service require assistance to help understand the form and are often unable to type for themselves.

*"The language barrier, and lack of experience in using computers. People, especially in this community, are heavily reliant on their children and advice centres. There is a lot of fear factor, they think if they do this and it goes wrong, they may be trapped."*

Where possible, Bromley by Bow Centre sign-posts DS users on to further Digital Support, though not all users have an appetite to access this support.

*"We do encourage them to use our digital inclusion session, we say everything is going to go online and so it'd be good to gain basic knowledge and skills...I must say though, most clients aren't interested in attending these sessions and we can't force them."*



### Stress caused by a life transition or negative experiences with government services

The experience of needing to interact with HMCTS can bring considerable stress into a DS user's life, and this stress can mean they feel less equipped to access HMCTS services independently.

For DS users who are using HMCTS services to make a divorce application or apply for probate, the process of submitting an online form means acknowledging a change in their personal circumstances. These DS users are likely to be under considerable emotional strain and may need the reassurance of face-to-face support to help them through the process.

*"Someone going through a divorce, they have to think back to all the things they've done in their marriage and think about why they're getting divorced, and why their marriage is ending. It's really, really difficult for people."*

Centre staff

Other DS users may find the prospect of using HMCTS services daunting due to previous negative experiences of using government services. For example, for SSCS appellants, the face-to-face DS appointment is part of a wider, and often stressful journey, and it is important to frame their support needs within this context.

*"They've already been turned down, say for a PIP application, they've had an assessment where they think it went well, they've been turned down, they've filled in their Mandatory Reconsideration, they've been turned down again, you know it automatically makes them think that it's their fault that they haven't filled it in right. So, by the time they come to fill in an appeal they're out of pocket, even with PIP they might have lost their cars, their own motability car, so they're out of pocket, they're stressed."*

Centre staff



## User C: Profiling a DS user experiencing stress<sup>11</sup>

User C lives with his partner and two children and works full time. He has a high level of digital skills and uses the internet every day in his job. User C used the face-to-face DS service delivered by Centre C to respond to a Single Justice procedure notice in relation to a Transport for London fine.

User C had not had any experience interacting with government services like HMCTS and felt stressed about the next steps. On receiving the Single Justice procedure notice he called the HMCTS phone line listed on the letter to check what he needed to do next. He prefers face-to-face support for dealing with stressful situations like this so he was happy that the HMCTS call centre referred him on to Centre C (a non-specialist support centre). He had not previously used Centre C.

Centre C supported User C to fill in the online form himself, providing reassurance that he was supplying the information required, and offering emotional support to allay his high levels of stress.

User C has not had any contact with Centre C since the appointment, but would return if he needed further support.

### Multiple and complex support needs

Some users have multiple and complex support needs due to personal or environmental 'vulnerabilities'. User vulnerability can relate to ongoing challenges and support needs (such as disability, low income, long-term health conditions and poor mental health), as well as life events which have an impact on a user's ability to participate in society or use services (such as bereavement, illness or losing a job).<sup>12</sup>

The personal and environmental 'vulnerabilities' experienced by DS users may overlap with their interaction with the HMCTS system in two key ways. Firstly, the stress and challenge of accessing HMCTS services may compound the strain that DS users are already experiencing in their lives. Secondly, some of the 'vulnerabilities'

that DS users experience, may also affect their ability to interact with HMCTS services. For example, they may be unable to advocate for themselves, they may be unable to open their post, or they may be unable to retain information about HMCTS processes and their obligations within this.

*"I couldn't do it on my own. Because of my dyslexia and learning difficulties, I have trouble understanding and trying to get my point across ... it's mind boggling for me."*

**DS User 17**

For DS users with multiple and complex support needs, the face-to-face DS service is another layer of support provided by centres with which they have an ongoing relationship.

**Service Design Iteration:** Initially, the service guidelines stated that Digital Support could not be provided in the same appointment as additional support (for example a centre that offered accredited legal advice could not provide tailored advice in relation to a user's case). In Phase 3, the guidelines were updated to allow centres to provide their usual advice offer alongside Digital Support. This was based on the hypothesis that reducing the restrictions on the types of support that could be provided would allow centres to deliver a more effective service, and improve the experience for the user.

<sup>11</sup> Please note this case study is created using composite information from a number of research interviews and does not relate to an individual person.

<sup>12</sup> Ofcom, Consumer Vulnerability. Available at: <https://www.ofcom.org.uk/about-ofcom/what-is-ofcom/consumer-vulnerability> (Accessed 11.09.20)

## User D: Profiling a DS user with multiple and complex needs<sup>13</sup>

User D lives alone and has three adult children. She has access to the internet but doesn't feel comfortable using digital devices. She spends a lot of time alone in her house because she finds it difficult to get around. She also experiences depression.

User D visited Centre D (a centre that offers specialist welfare and benefit advice) for support with her PIP appeal. The experience of being rejected for PIP multiple times had knocked her confidence and she felt extremely stressed about her financial situation. She visited Centre D because she trusted them to be able to help with her situation. She attended the appointment with one of her children to make sure she understood everything that was being discussed.

Given her limited digital skills she was provided with an assisted typing service (where the centre typed for her) during the appointment. The adviser talked her through the form, explaining what the questions meant and what information was required. The adviser also provided emotional support as User D was in considerable distress. Centre D will represent User D at a tribunal and the adviser also sign-posted User D onto further services to provide support for her physical and mental health.

### 1.3 Implications

The understanding that has been gained about the types of people that are using the face-to-face DS service - and their reasons for doing so - has implications for the design and evaluation of the face-to-face DS service going forwards:

- The variation in DS users' digital access, digital skills, digital confidence and capability highlights that the design of the face-to-face DS needs to be able to support a wider range of DS users than initially anticipated.
- DS users face multiple barriers to accessing HMCTS services online and this means that they are likely to require a wider package of support than just Digital Support.



<sup>13</sup> Please note this case study is created using composite information from a number of research interviews and does not relate to an individual person.



## Chapter 2

# Developing a Digital Support offer for DS users

### 2.1 Centres delivering the face-to-face DS service

A total of 43 centres have been involved in the face-to-face DS pilot since 2017<sup>14</sup>, and 26 centres were delivering the pilot at the end of Phase 3. 17 centres left the pilot between September 2017 and August 2020; the factors that contributed to these centres leaving the pilot can be found in section 2.8 (which describes barriers to implementation).

The face-to-face DS service is being delivered by community support centres within Good Things Foundation's Network<sup>15</sup>, alongside additional centres identified through HMCTS's relationship with the Litigant in Person Engagement Group (LiPEG).

Good Things Foundation's Network is a highly diverse network of independent community support organisations across the UK. The centres identified through HMCTS's relationship with LiPEG offer legal or certified advice in areas that are relevant to HMCTS, and were recruited based on the assumption that they would be well placed to identify and engage users who could benefit from the face-to-face DS service.

The centres delivering the DS pilot can be grouped into three broad categories according to the type of support they provide.



<sup>14</sup> A full list of the participating centres can be found in Annex 3.

<sup>15</sup> For information about Good Things Foundation's network of community centres see: [www.onlinecentresnetwork.org](http://www.onlinecentresnetwork.org)

Centres that offer accredited legal advice	Centres that offer specialist welfare and benefit advice	Non-specialist support centres
<p><b>How support is delivered:</b></p> <ul style="list-style-type: none"> <li>• Staff/volunteers are more familiar with HMCTS services.</li> <li>• Staff/volunteers likely to have legal training (e.g. solicitors/paralegals).</li> <li>• Tend to have more staff/volunteers delivering the service.</li> <li>• Support likely to be delivered in a more structured format.</li> </ul>	<p><b>How support is delivered:</b></p> <ul style="list-style-type: none"> <li>• Staff/volunteers are likely to be familiar with, and have expertise in, some HMCTS services.</li> <li>• Support can be structured or unstructured.</li> </ul>	<p><b>How support is delivered:</b></p> <ul style="list-style-type: none"> <li>• Staff/volunteers are less familiar with HMCTS services and legal processes.</li> <li>• Support likely to be delivered in a less structured format.</li> </ul>
<p><b>Advice/support provided:</b></p> <ul style="list-style-type: none"> <li>• In-depth procedural advice in areas of specialism.</li> <li>• Legal Advice (e.g. in relation to making the best case for appeal).</li> <li>• May support DS users from end-to-end (including representation).</li> </ul>	<p><b>Advice/support provided:</b></p> <ul style="list-style-type: none"> <li>• In-depth advice related to HMCTS services and its processes, as well as Department for Work and Pensions (DWP) processes.</li> <li>• Support SSCS appellants across their interaction with DWP and HMCTS.</li> </ul>	<p><b>Advice/support provided:</b></p> <ul style="list-style-type: none"> <li>• Holistic package of support which addresses a range of DS user needs.</li> </ul>

These categories may not reflect how centres describe themselves (and some centres may fall into more than one category). However, grouping the centres in this way provides useful context for understanding the centre delivery models outlined later in Chapter 2, and the DS user journeys outlined in Chapter 3.



## 2.2 Onboarding participating centres

As part of the onboarding process, most centres had training either face-to-face or via a live webinar, run by Good Things Foundation. The information in the training session was supported by a face-to-face DS Handbook covering all delivery elements of the pilot.

The information provided to centres covered three key areas:

- **Service delivery guidelines:** information was provided in relation to the support that centres were and were not allowed to provide as part of the pilot.
- **Context on each online HMCTS service:** videos were developed by the HMCTS service team to provide procedural information about each online HMCTS service.
- **Administrative requirements:** all centres were briefed on the data collection requirements entailed in taking part in the pilot. All participating centres are required to collect and record data in relation to each DS user they support. Centres are also required to capture user consent to: store a user's personal information, provide an assisted typing service (if required) and take part in user research. All of this data is recorded through CaptureIT (Good Things Foundation's customer relationship management system).

Feedback from centres suggests that the training needs to be better tailored to the expertise of the centres. For example, for non-specialist support centres the key training objective should be to help staff and volunteers to understand the pilot and HMCTS systems. For centres that offer accredited legal advice (and are not part of Good Things Foundation's Network), the key training objective needs to be upskilling staff and volunteers in how to use CaptureIT.

*"Working out how to get to the CaptureIT screen is time-consuming...I showed it to my colleagues and they said "I'm never going to remember that"*

Centre staff





## 2.3 Delivery models

Given the wide range of centres involved in the pilot, it is unsurprising that there is also a diversity of delivery models. The ways in which the face-to-face DS service is being implemented by centres can be grouped into 3 key clusters:

1. **The face-to-face DS service is part of an ongoing package of support:** this is where the centre is supporting the DS user across a range of issues. A centre may have provided support in another area of a DS user's life prior to the face-to-face DS appointment, and may continue to support them afterwards.
2. **The face-to-face DS service is part of an ongoing resolution of a legal issue:** the face-to-face DS appointment fits within a longer legal journey through which the DS user has been supported. For example, a centre may have helped a DS user in their interactions with DWP prior to submitting an SSCS appeal.
3. **The face-to-face DS service is a one-off support transaction:** the DS user comes to a centre for support with accessing HMCTS digital services only.

### Cyngor ar Bopeth Gwynedd Citizens Advice (Good Things Foundation Network): Digital Support as part of a package of support

Cyngor ar Bopeth Gwynedd Citizens Advice is a community advice charity operating 4 offices in a large rural county in Wales.

The advisers at Cyngor ar Bopeth Gwynedd Citizens Advice have an understanding of all the support areas that are offered at the centre. This approach enables Cyngor ar Bopeth Gwynedd Citizens Advice to provide a multi-layered support package to its DS users (many of whom have multiple and complex needs).

*"We integrate different projects into what we are already doing. The important thing is what the client needs, not how we are organised."*

Due to the personal and environmental challenges facing its DS users, the face-to-face Digital Support appointments frequently entail offering emotional support and reassurance, alongside Digital Support.

*"When they come say for an appeal, it's a very stressful situation and they're afraid of doing something wrong so even though they're typing it themselves they still need that guidance or just confirmation that they're doing the right thing when they're filling it in online because they're afraid that if they don't do it right then their appeal could go wrong."*

## Community Advice and Law Service, Leicestershire (LiPEG Network): Digital Support as part of an ongoing resolution of a legal issue

Community Advice and Law Service has been providing services in Leicester City and Leicestershire for 40 years. It holds a contract with The Money Advice Service for the East Midlands Money Advice Partnership and delivers advice in three areas of social welfare law: Debt, Housing and Welfare Benefits.

Community Advice and Law Service entered the Digital Support pilot through HMCTS's relationship with the Litigant in Person Engagement Group (LiPEG). Community Advice and Law Service had been supporting HMCTS users before joining the face-to-face Digital Support pilot, and also has expertise in appealing benefits decisions.

There are five people working at Community Advice and Law Service who are delivering the service: the project lead and another member of staff at the main office, and a further three members of staff based in the local court. Staff working on other areas of advice, and staff working on reception have also been briefed about the service so that they can refer people into the service.

The majority of the DS users supported through the Digital Support service are existing clients, and are referred in through other internal departments (though some were identified through links with the local Citizens Advice Bureau and local charities).

Given the centre's expertise, procedural and legal advice figure highly in the face-to-face DS appointments, and advisers support DS users with how to put forward their case. The Digital Support appointment is part of a wider journey of support on a legal issue. For instance, in the case of an SSCS appellant, Community Advice and Law Service may also provide representation for the user at a hearing.



## 2.4 Implementing the face-to-face Digital Support service

Some centres found it a smooth process to integrate the face-to-face DS service into their existing delivery model – this was more likely to be the case for centres that offer accredited legal advice and centres that offer specialist welfare and benefits advice. The pilot may also have provided funding where Digital Support had previously been delivered unfunded (in response to user needs).

However, the experience of implementing the face-to-face DS service has not been a smooth one for all centres.

Among the centres which had expertise in HMCTS services, some explained that taking part in the pilot entailed changing their existing delivery mode. For example, some centres had to:

- **Adapt their delivery channels:** some centres had to stop phone consultations in order to meet the face-to-face DS requirements.
- **Provide support at a different stage in the process:** some centres had traditionally only supported people after an appeal had been lodged (usually due to capacity or funding restrictions), but have now expanded their offer to provide support at the lodging appeal stage.
- **Shift to digital provision:** some centres only started using the HMCTS digital forms on entering the pilot.

Among the centres which had no experience of delivering HMCTS services prior to entering the pilot, some explained that delivering the face-to-face DS service required a significant investment of time upfront in order to upskill staff and volunteers.



## 2.5 Appointment data

By the end of Phase 3, 782 face-to-face DS appointments had been attended and a total of 738 DS users had been supported (some DS users needed support across multiple services).

The majority of the appointments delivered during the pilot were to support SSCS appellants.<sup>16 17</sup>

Not all appointments result in a form being completed. 695 online forms have been submitted in an DS appointment since the pilot began. There were 28 instances in which a form

was partially submitted during an appointment, and 59 instances in which organisations supported the user to prepare for the online form e.g. through setting up an email account, understanding the online form or helping them to find more help.

Most of the face-to-face appointments have been delivered in Phase 3 (prior to the introduction of government Covid-19 lockdown measures).

Phase	Form completed	Support, but form not completed	DS User supported to prepare for online form	Total
Phase 1	2	0	2	4
Phase 2	50	16	12	78
Phase 3	643	12	45	700
<b>Total</b>	<b>695</b>	<b>28</b>	<b>59</b>	<b>782</b>

Learn.org.uk Ltd, Citizens Advice Denbighshire and Bromley by Bow Centre account for 48% of the face-to-face DS appointments during the pilot: delivering 178, 127 and 67 appointments respectively<sup>18</sup>.

Bromley by Bow Centre joined the pilot in Phase 1, and Citizens Advice Denbighshire joined the pilot in Phase 2 – but both delivered the majority of their appointments in Phase 3. Learn.org.uk Ltd joined the pilot in Phase 3. Learn.org.uk Ltd is best described as a non-specialist support centre, whereas Bromley by Bow Centre and Citizens Advice Denbighshire can be categorised as centres that offer specialist welfare and benefit advice. All three centres have prior experience supporting people to access HMCTS services.

Beyond the top three (in terms of number of attended appointments), a further nine centres delivered 33% of appointments (each delivering between 20 and 35 appointments). One of these centres joined the pilot in Phase 1, and the remaining eight joined in Phase 3.

20 centres delivered between 1 and 20 appointments. Five of these centres joined in Phase 1, four joined in Phase 2 and the remaining 11 joined in Phase 3.

<sup>16</sup> A full break-down of the support provided for each HMCTS service can be found in Annex 4

<sup>17</sup> During Phase 3 the service design was updated to allow centres to choose which HMCTS services they support; a significant proportion of the centres in the pilot chose to focus on supporting SSCS appeals

<sup>18</sup> A full break-down of appointments attended by centre can be found in Annex 5.1

## Citizens Advice Denbighshire (Good Things Foundation Network)

Citizens Advice Denbighshire is a community advice charity operating 3 advice centres, and 7 outreach locations in North Wales. Citizens Advice Denbighshire has long-standing relationships with its users, and it uses its outreach model to identify users who could benefit from its services.

*"We deliberately built up our outreach service, it is important that people are able to access our services, we have to be part of the community."*

The DS users Citizens Advice Denbighshire has helped through the face-to-face DS service have often found the service through word of mouth or through having used Citizens Advice Denbighshire in the past. The centre may support a user from making a benefit application through to lodging an appeal (if necessary).

*"We can keep the same client for 2 years, from application to appeal."*

Citizens Advice Denbighshire explained that many of the DS users they support have multiple complex needs (including poor mental health, dyslexia, low levels of literacy and limited digital skills), which means that DS users require multiple layers of support, (which may be delivered over more than one appointment).

*"Firstly, they have a session about what the appeal's going to be about, they bring you all their letters, evidence etc. This session is also about 'what's the chance of success here', what evidence can they get?...Then we'd show them how to get on, and how to get access to the digital form."*

*"I just think we have to accept that there is a generation of people who aren't ready, and probably never will be able to be completely digital. Many know how to type on their phones, use Facebook, Google etc...but when it comes to a form, they can't type and need help with the spelling and support to put their case over effectively."*

*"Appeals are supposedly for the common man, but we all know, there's such a juxtaposition, between anyone putting the form in, and then being swamped by this massive big bundle, and then the process of the tribunal is so formal and so absent from people's real world. We're using the language that the tribunals system wants to hear, and that's something people can't do."*



## 2.6 Understanding the appointment data

### What the appointment data tells us about centre delivery

The intention of the pilot was not to draw conclusions about the types of centre which are best placed to deliver the face-to-face DS service, but rather, to 'test and learn' how the face-to-face Digital Support service can be successfully implemented by a diverse range of centres.

The number and type of appointments delivered by centres has been influenced by a number of contextual factors which need to be considered when reviewing the appointment data:

- **The contract size taken on by centres:** on entry to the pilot centres agreed to support either 25, 50, or 100 DS users to complete a HMCTS online form. The number of appointments delivered by a centre is shaped by its contract target and does not necessarily reflect an upper limit of what a centre is able to deliver.
- **The date of entry into the pilot:** centres that entered the pilot at a later stage have had less time to support people through the face-to-face DS service.
- **The impact of Covid-19:** the introduction of social distancing measures had a significant impact on the ability of centres to deliver the face-to-face DS service. Chapter 4 describes the actions that were taken to enable centres to continue to provide support to DS users remotely. However, the impact of Covid-19 needs to be considered when reviewing the appointment data – particularly in relation to the centres that offer accredited legal advice (which entered the pilot in December 2019/ January 2020, and only had a short period of delivery in 'normal times').

### What the appointment data tells us about service design

The face-to-face DS pilot has been undertaken using a user-centred service design approach to provide Digital Support.<sup>19</sup> Since the start of the pilot, HMCTS and Good Things Foundation have been evaluating how well the service is meeting DS user needs and updating the service design to provide a better experience for DS users.

Updates to the face-to-face DS service delivery guidelines were often made concurrently, and these changes were often made in parallel to the recruitment of new centres to the pilot. As a result, while it is possible to comment on the contribution that service design updates have made to the number or type of appointments delivered, it is not possible to draw causal links between the two.

The service design updates (described in more detail on Page 4) that are likely to have contributed to an upward trend in the number of appointments delivered are:

- **Allowing centres to provide an assisted typing service:** this update widened the scope of the people that centres were able to support.
- **Allowing centres to generate their own referrals:** this update allowed centres to engage people with whom they already had a relationship, rather than relying on referrals from CTSC. This provided centres with a wider audience of potential DS users.
- **Allowing centres to offer drop-in and outreach appointments:** this update enabled centres to maximise their engagement with potential DS users by reducing barriers to conversion (such as a DS user not returning for a booked appointment).
- **Allowing centres to provide additional support (such as legal advice) alongside Digital Support:** this update allowed centres to better integrate the delivery of the face-to-face DS service into their usual model of delivery, making it easier for them to deliver appointments.

<sup>19</sup> 'Service design is all about making the services we use usable, easy and desirable', (Design Council, Design Methods for Developing services). User-centred service design places the needs and experiences of the people using the service at the heart of the service design process, updating the design of the service based on user feedback. More information about service design can be found at: Design Council, Design Methods for Developing services. Available at: <https://www.designcouncil.org.uk/sites/default/files/asset/document/Design%20methods%20for%20developing%20services.pdf> (Accessed 11.09.20)

- **Recruiting centres with experience of supporting HMCTS customers:** this update was made based on the hypothesis that centres which have experience of supporting HMCTS customers are likely to be more successful at generating referrals into the service.
- **Recruiting more centres onto the pilot:** the number of centres delivering the face-to-face DS service increased during each phase of the pilot.

The service design update that is likely to have influenced the type of appointments delivered is:

- **Allowing centres to choose which HMCTS services they support:** this update was made based on the hypothesis that allowing centres to select the HMCTS services they wanted to support would boost the number of appointments being delivered and encourage more centres to enter the pilot. A significant proportion of the centres in the pilot chose to focus on supporting SSCS appeals, which is a contributing factor in the high number of SSCS appointments delivered.



## 2.7 Centre experiences and feedback: implementation enablers

The research has highlighted a number of organisational and contextual factors that facilitate centres to implement the face-to-face DS service. These include:

- **Good relationships with relevant local organisations:** the networks that centres operate in need to include organisations that come into frequent contact with users eligible for the face-to-face DS service e.g. welfare and benefits advice centres. Some centres who left the pilot mentioned that they were doing so because they were not able to benefit from strong referral networks (either due to a lack of such networks, or because they were outside existing networks).
- **Effective triaging:** if all staff and volunteers are familiar with HMCTS services they can identify people suitable for the service, leading to more internal referrals. For example, one centre noted that all their centre staff (including those answering the general telephone lines and those on duty at reception) have details of the project. If they identify someone that may benefit from a face-to-face DS service appointment they make them an appointment or pass on the DS user's details to the project lead.
- **Existing case management processes:** if centres already have systems in place this makes the process of tracking a DS user's progress easier and less resource intensive. It also helps centres to identify potential DS users from within their customer base. For example, one centre offering specialist welfare and benefit advice noted that it uses a case management system to track and monitor people throughout the benefits assessment process. This helps the centre to identify potential DS users; following a Mandatory Reconsideration application, they reach out to people to ask if they need to submit an appeal.
- **Expertise in supporting HMCTS services:** centres with expertise in HMCTS systems need to invest less time training staff and volunteers about HMCTS procedures. Being known as an expert in supporting HMCTS services is also beneficial for generating referrals. For example, one centre offering accredited legal advice explained that its reputation for delivering support for HMCTS services means it has been included in Citizens Advice's referral system.
- **Experience using digital forms:** centres which already used online services had a smoother transition into the pilot. For example, one centre explained that they had started using the online forms as soon as they had become available due to the benefits that the online process brings (such as quicker processing times). As a result, entering the pilot did not entail implementing a new digital process.
- **Organisational advocates:** staff who are willing to use, able to use, and see the benefits of, digital services are important to selling-in the benefit of the service internally.





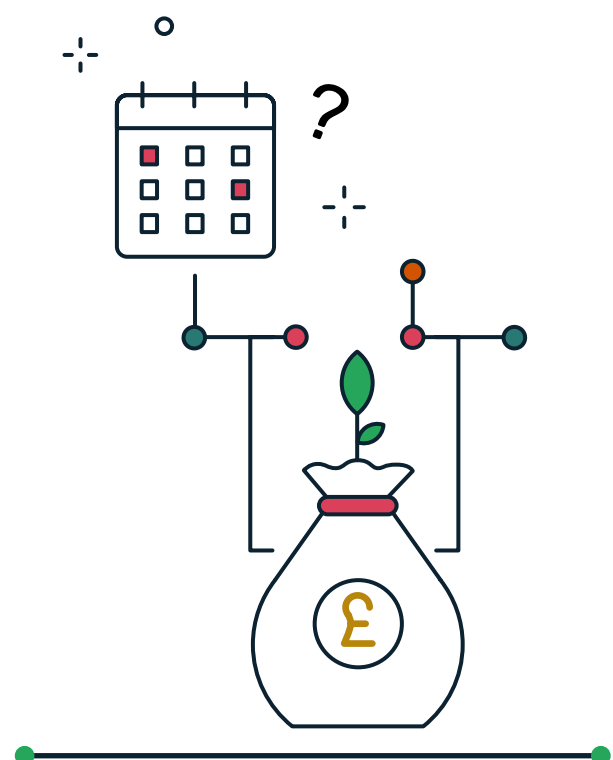
## 2.8 Centre experiences and feedback: implementation barriers

The research has highlighted a number of organisational and contextual barriers that make implementing the face-to-face DS service more difficult for some centres.

Some of the barriers faced by centres are common across the community advice and support sector, including:

- **Delivering unfunded support alongside DS support:** the range of issues faced by DS users can make it difficult to provide the face-to-face DS service as a distinct appointment; centres often need to provide support in other areas of DS users' lives, which can mean support needs to be delivered over multiple appointments.
  - **Small delivery teams:** in smaller organisations the face-to-face DS service is often delivered by a small team of staff and volunteers. This can create problems if a team member leaves or is ill.
  - **Technology and infrastructure issues:** some centres have a limited number of devices available, making it more difficult to offer flexible support for users. This issue has been heightened during Covid-19 because some staff and volunteers did not have suitable devices at home to deliver the service.
  - **Limited space:** some centres do not have enough rooms to deliver the face-to-face appointment in a private and quiet space.
- Other implementation barriers specifically related to the face-to-face DS service:
- **Difficulty identifying and engaging eligible users:** some centres entered the pilot under the assumption that they would be receiving a higher level of referrals from HMCTS, and struggled to identify and engage DS users. Some centres which left the pilot mentioned that difficulty finding eligible DS users was one of the main reasons they were leaving. This may be more of an issue for some HMCTS services than others. Some centres explained that it has been particularly difficult to find non-SSCS users. For example, one centre staff member explained "We don't go around asking people 'do you want a divorce?'".
  - **Not recognised as experts in HMCTS services:** some non-specialist support centres mentioned that despite being in a meaningful HMCTS referral network they were finding it difficult to generate referrals because partners within their networks – which were known as experts in HMCTS services – were more likely to be referred eligible users.
  - **Lack of clarity in communication of service design updates:** there were changes to the service design and expectations throughout the pilot and these were not always communicated clearly by Good Things Foundation or taken on board by centres. There are a number of reasons that updates to the service delivery guidelines did not reach centres including: the need to communicate different messages to centres based on their contract/delivery model; staff/volunteer turnover; missed messages due to 'communication overload'; and difficulty cascading the messages among centre staff/volunteers internally.

- **Administrative burden of the service:** some centres mentioned that the process for recording users and collecting consent felt unnecessarily onerous, and in some instances duplicated their own processes. For example, some centres explained that they were collecting consent to record and store a DS user's personal details as part of their own case management process, and as part of Good Things Foundation's data storage process.
- **Staying within the delivery parameters:** some centres had to change their delivery model in order to comply with the face-to-face DS guidelines, which created inefficiencies if staff were using different processes in parallel.
- **Delivering face-to-face DS support as a one-off interaction:** some centres fed back that it was unworkable to only provide support at one stage in the customer journey. Some DS users asked centres to provide assistance before or after the digital form filling, and some centres commented that they felt it was their duty of care to offer this support even though it is unfunded.
- **Funding model:** some centres who left the pilot mentioned the funding model wasn't sustainable for their centre because they were finding it difficult to engage DS users; these centres were worried about investing resources into finding DS users when they couldn't be sure it would result in an appointment.

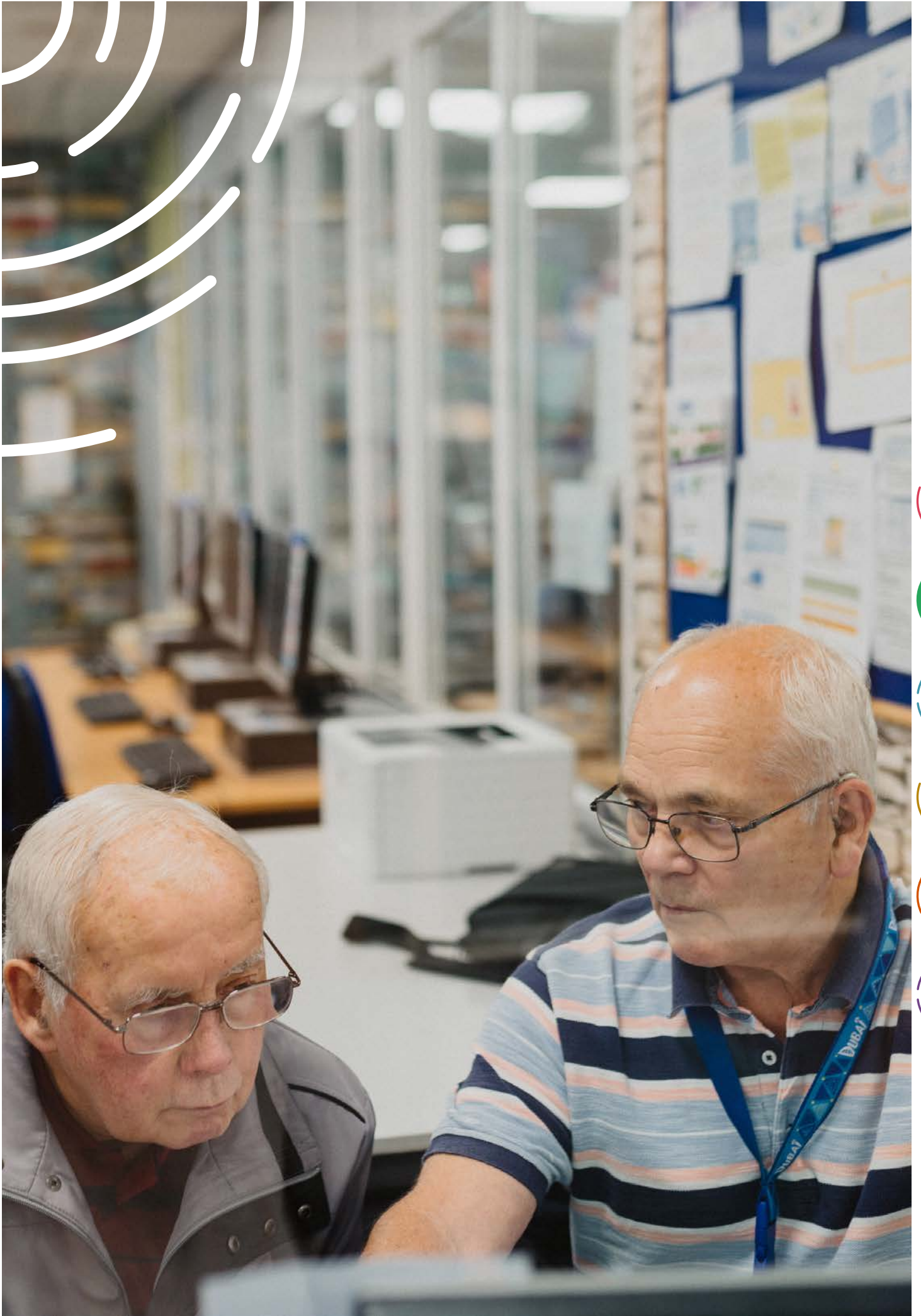


## 2.9 Implications for the future

The learnings that have been gained about centre delivery have several implications for the design and evaluation of the face-to-face DS service going forwards:

- The face-to-face DS service design guidelines need to be flexible enough to enable a diverse range of centres to integrate the face-to-face DS service within their existing delivery models (in a straightforward and smooth way). A service design which is too restrictive may limit the effectiveness of a national roll-out.
- Going forward, there needs to be a clear view of end-to-end service journey and potential Digital Support requirements outside the application stage. As HMCTS service development has followed an agile approach, different elements of the online journey have been built in stages. As they mature it will be important to understand the end-to-end journey and DS users' Digital Support touchpoints.
- Support from HMCTS will be crucial to train people on how to use, and support, people to access HMCTS digital services. Any onboarding training should be tailored to the expertise of the centre.
- It is important to consider how future service delivery changes will be communicated to centres, given the need to communicate different guidelines to different types of centre. Part of this is likely to require reducing the frequency of communication, however messaging will continue to be evaluated.
- The administrative system used to record appointments and capture consent needs to be reviewed and streamlined.
- The centres experiencing the fewest barriers to delivery are those that have existing experience delivering HMCTS services. It is important to continue monitoring the characteristics of centres to inform the recruitment of centres onto the pilot.





## Chapter 3

# Evaluating the customer journey

### 3.1 How do DS users find centres?

DS users find the face-to-face DS service through one of two routes:

- **HMCTS referral:** this category covers DS users who are referred to a centre via an email referral from CTSC, or through a referral from the courts.
- **Non-HMCTS referral:** this category covers users who are identified and engaged directly by a centre (a 'self-referral') or through a referral from within a centre's network (a 'referral from another organisation').

Most DS users found the face-to-face DS service through a non-HMCTS referral. 749 (96%) of appointments were the result of a non-HMCTS referral, 33 appointments (4%) were the result of an HMCTS referral.

#### HMCTS referrals

During Phase 1, all HMCTS DS users were referred in via CTSC. However, CTSC staff faced issues trying to identify and engage the people who needed the face-to-face DS service. Researchers at HMCTS have conducted focus groups and interviews with CTSC staff and they described a range of reasons why they felt the number of referrals from callers was low:

- Users calling HMCTS with other support already in place.
- Difficulty locating a centre within an appropriate travel distance for the user.
- A limited understanding of what the face-to-face DS service is, who delivers it and how it is delivered.
- A reluctance to make 'cold' referrals; CTSC call agents did not feel comfortable making a referral without a fixed time and date for the appointment.
- Users calling close to the deadline for their appeal.

At the start of Phase 3, it was hypothesised that the number of CTSC referrals could be increased by working with their staff to ensure that they have the right training and processes to refer users to the face-to-face DS support when appropriate. HMCTS also began to work with court staff to explore ways to advertise the service and direct users to the face-to-face service.

Alongside the work done to increase the number of HMCTS referrals into the face-to-face service, CTSC has also been implementing a telephone DS service. A number of individuals have been identified to become Digital Support pilot team members, and take Digital Support calls and make referrals to the face-to-face DS support alongside other calls which come into the centre. Individuals in the team were engaged in January 2020 to help the Digital Support team with data collection, insight testing and refining existing training materials.

Despite the action that has been taken to increase the number of HMCTS referrals, the number of people finding the face-to-face DS through this channel remains low. That said, HMCTS referrals remain a useful channel – the face-to-face DS service needs to be as accessible as possible for those who need it, and some users requiring the face-to-face DS service may present through CTSC or the courts.

7 interviews were conducted with DS users who found the face-to-face DS service through an HMCTS referral, and their feedback was consistently positive about the experience.

## Non-HMCTS referrals

During Phase 2 the face-to-face DS service design was updated to allow centres to engage people through channels outside of an HMCTS referral. Non-HMCTS referrals have been a very important mechanism in identifying users for the face-to-face DS service.

Non-HMCTS referrals fall into two subcategories:

**1. Self-referrals:** this subcategory covers DS users who are identified and engaged directly by centres. 'Self-referrals' cover a number of different routes into the DS service including:

- a. **The centre identifies the DS user through an existing relationship:** a DS user may be receiving support from a centre on a range of other issues and is sign-posted into the face-to-face DS service as part of this package of support.

*"They helped me with my benefits when they got stopped; someone else is helping me get back into work, helping me run my bills, due to my illnesses... another person helps me with all the financial side, I fell in debt... they were extremely helpful with that."*

DS User 25

- b. **The DS user has had previous support from a centre and revisits at a time of need:** the face-to-face DS service may be one of many layers of support offered to support a DS user on a particular issue. For example, some centres had helped people with identifying their benefits entitlements and applying for a Mandatory Reconsideration prior to delivering the face-to-face DS service.

*"I'd used them previously. The first time was about 4 years ago for debt advice and then again more recently in submitting a PIP application."*

DS User 30

- c. **The DS user hears about the service through word of mouth:** in some instances, DS users had heard about centres through friends and family. These friends and family may have used the centre themselves.

- d. **The DS user self-refers after seeing local advertising:** a small number of DS users found the service through advertising. Some of the advertising mentioned included posters/flyers in another community organisation (such as a food bank or library), advertising in the centre itself (e.g. a poster or window display) and information posted on social media.

Centres have described that the success of advertising has been mixed, and some centres mentioned they were wary about investing in advertising when it was unclear what returns it would bring.

*"My feeling is those posters in our offices aren't hugely helpful because if people are here already it's because they know they need to be here...I have also put the posters up in council offices and main libraries, but we don't have any evidence that people have come to us because they've seen them!"*

Centre staff

**2. Referrals from another organisation:** this subcategory covers DS users who are directed to a centre via its network. A referral from another organisation can take the form of:

- a. **A formal referral from another organisation:** this is where a DS user's contact details are shared between the 'referral organisation' and the centre delivering the face-to-face DS appointment, through a structured process. For example, some centres mentioned that they had a shared referral portal with organisations in their local area.
- b. **Sign-posting:** this is where a DS user is told about the face-to-face DS service by another organisation, but the DS user's details are not shared between the 'referral organisation' and the centre delivering the face-to-face DS appointment.

There are no clear patterns across centres in relation to the organisations referring into the face-to-face DS service, it tends to depend on the local context. Where centres had engaged users through 'referrals from another organisation' these also tended to be concentrated to relationships with one or two organisations.

## 3.2 Pre-appointment experience

At the outset of the pilot HMCTS created a series of checklists for centres to share with DS users prior to their appointment. However, the research found there is variation in the way that centres prepare DS users prior to an appointment. The methods used to prepare DS users range from giving DS users verbal instructions, to a SMS reminder or update, to sending them a series of preparatory forms.

DS users were not told in a systematic way that they would be attending a Digital Support appointment. The posters provided by Good Things Foundation described getting support with a particular HMCTS service rather than explicitly mentioning 'Digital Support', and the term 'Digital Support' was seldom explicitly referenced by centres – at most it was described as 'online form filling'.

*"We'll tend to say – we can do it online, I can help you, are you happy to proceed in that way - inevitably people say yes....we don't use term Digital Support – we say it's about supporting people to access online services"*

Centre staff

The face-to-face DS service allows centres to offer both drop-in appointments and booked appointments and for this reason it may be difficult to implement a standardised pre-appointment experience.

A formal pre-appointment process may not work for some of the DS users. Sending a checklist digitally would present challenges for those unable to access the internet. Sending too much information prior to the appointment may cause anxiety for people who feel less confident about the process or those with language barriers. Those with multiple and complex needs may not have the ability to retain the information communicated.

On the whole, DS users explained that they were satisfied with the level of communication they had received prior to the appointment. In the instances where DS users had not received any information prior to their appointment, they tended to bring along all the documents which they thought may support their case (though it is worth noting that in some cases DS users have not had the information they needed).



### 3.3 DS user expectations

On the whole, the key priority for DS users is to receive support for, or to resolve, their issue; most are unlikely to have firm expectations about how this aim is achieved.

DS users who had an existing relationship with a centre, were more likely to have expectations about the format of the appointment - generally expecting to receive support that is consistent with their previous experience of the centre. For example, a DS user receiving support from a non-specialist support centre was likely to expect to receive a holistic package of support, whereas a DS user receiving support from a centre offering accredited legal advice was likely to expect legal guidance.

In Phase 3, the guidelines were updated to allow centres to provide their usual advice offer alongside Digital Support. This was an important change as it allowed centres to work in a way that would meet the needs and expectations of their users.

Using the term 'Digital Support' does not resonate with all DS users as it does not encompass the full range of support DS users expect. Communicating the face-to-face DS service in the context of the outcomes delivered may be more compelling to DS users.





### 3.4 Appointment format

The average face-to-face DS appointment lasts 56 minutes, though there is variation across centres. Among those who delivered 20 or more appointments, the average appointment length varied between 30 minutes and 70 minutes.

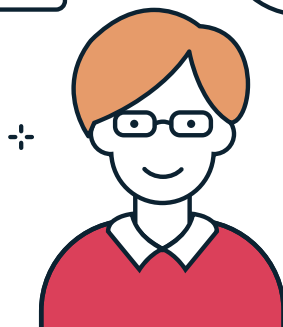
The aim of face-to-face HMCTS DS appointments is to help DS users to:

- Understand the HMCTS service and what it is there for
- Get ready to fill in the HMCTS online form
- Understand the content of the HMCTS online form
- Fill in the HMCTS online form (either by supporting the DS user to fill it in themselves or by typing for the DS user)

Although each face-to-face DS appointment aims to achieve similar outcomes, the way in which centres deliver support varies. This is not surprising given the diversity of organisations delivering the face-to-face DS pilot.

In general, the format and content of face-to-face DS appointments differs in four ways:

- Appointment structure
- Digital Support provided
- Additional support provided
- The HMCTS service



#### Appointment structure

Some centres have very structured appointment formats whereas other centres are more flexible in delivery. Centres that offer accredited legal advice tend to have a structured process, with interactions between DS users and staff/volunteers consistently following a similar format. Non-specialist support centres are more fluid in delivery, with support delivered in a way that is guided by the DS user's needs, and appointments varying significantly in length.

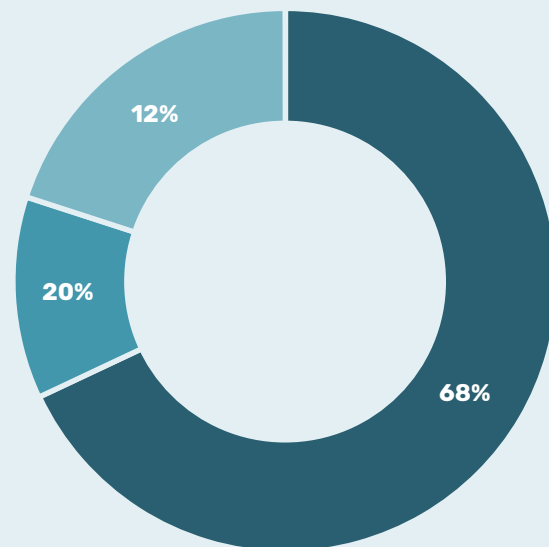
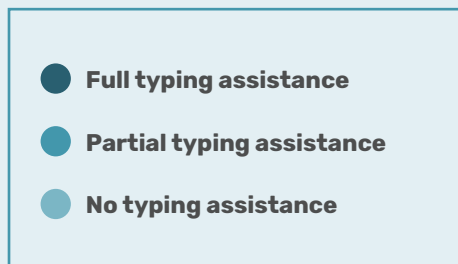
There is no right or wrong way to structure a face-to-face DS appointment, as long as the appointment delivers the outcome of supporting a DS user to access HMCTS online services. However, the format and length of the appointment may have implications for centre funding. If centres are spending a greater amount of time to provide the face-to-face DS service than they are funded for, then continuing to offer the service may become financially unsustainable. This also applies where staff/volunteers are spending a significant amount of time on the project outside of an appointment.

#### Digital Support provided

The face-to-face DS service allows centres to provide Digital Support either through guiding DS users to complete the online forms themselves or to provide an assisted typing service (where staff/volunteers type for the DS user).

Since Phase 2, data has been collected to identify the number of DS users who need typing assistance to complete a form. Since data has been collected, 70% of appointments have involved full assisted typing and 12% have involved partial assisted typing.

### Typing Assistance Required



Base: Data collected from October 2018, results based on data from 778 appointments

The type of Digital Support provided is often determined by the centre rather than the DS user. In the appointments that were observed as part of the research, DS users were rarely offered the choice between paper and digital channels, and in some instances the DS user was not asked whether they would prefer to complete the form themselves or receive an assisted typing service (it is unlikely that more DS users would have chosen to complete the form themselves had they been given the choice).

As mentioned previously, DS users were not told in a systematic way that their appointment was a DS appointment. As a result, it is unsurprising that some DS users did not know they would receive an assisted typing service, or that they would be submitting an online form in the appointment.

*"It was a very long appointment, he typed for some reason. It was really nice of him to sit there and write it out for me."*

DS User 21

The research suggests that DS users are unlikely to be in a frame of mind to improve their digital skills during a face-to-face DS appointment. However, there is an opportunity to signpost to this type of provision where it is provided by a centre, or locally (this could be through government-funded digital skills programmes such as Future Digital Inclusion<sup>20</sup>, or through Further Education colleges, or through other centres that offer this type of support).

Differences in the delivery styles of the centres may impact how well, or how likely they are to provide this signposting. The community support centres that operate within Good Things Foundation's Network have experience of supporting people who are digitally excluded or who have limited digital skills. These centres are experienced at triaging people based on their level of digital skills and may have digital skills courses to refer users on to internally.

Centres that offer accredited legal advice may be less likely to signpost users to digital skills support. It was apparent from the research observations that the priority for these centres was to provide DS users with their HMCTS expertise, and that Digital Support was an add-on to this. In fact, some filled in the online form after the DS user had left.

<sup>20</sup> For more information on the Future Digital Inclusion programme, see <https://www.goodthingsfoundation.org/projects/future-digital-inclusion>, (Accessed 11.09.20)

The approach taken by some centres raises questions about the minimum requirements needed for an appointment to be classed as a face-to-face DS appointment. Moving forwards, it is recommended that centres receive a set of standard criteria detailing the requirements for an appointment to qualify as a face-to-face DS appointment, such as:

- The face-to-face DS service is for people who lack the skills, access, confidence, or ability to complete a form online.
- DS users need to be provided with the option of completing a form online or on paper.
- The online form needs to be filled in – but not necessarily submitted – during the appointment (either by the DS user themselves, with help, or by staff/volunteers).
- If staff/volunteers are providing an assisted typing service they need to explain what information is being inputted into the online form.
- If a person is unable or unwilling to review an online form as it is being completed, this is ok, as long as the procedures above have been followed.

### Additional support provided

Digital Support is the crux of the face-to-face DS service and although centres have been allowed to provide complementary support alongside Digital Support since Phase 3, this is not within the remit of the funded DS service.

Nevertheless, the additional support that centres provide is often crucial to the success of the appointment, and in some instances not having this support would be a barrier to accessing HMCTS services online.

The types of additional support that centres provide to DS users include:

- **Emotional:** providing space, empathy and support which is needed to enable someone to complete their digital journey.

- **Procedural:** information around the processes and practical support in the context of Digital Support. A DS user may need procedural or practical help about a range of issues; these may impact on how they interact but may not always directly link to the current reason for contact. This could be about the court process and the next steps or supporting a user practically with a reasonable adjustment.
- **Legal:** In the context of Digital Support, this is advice which may be required throughout a case and informs a DS user with various options, explaining the consequences of each so that the DS user can make an informed choice. A DS user may need legal support on a range of issues, not just the reason for their current contact.

Appointments may not include each of these types of support, and only those that are certified to do so can provide legal advice.

### Emotional support

DS users are often interacting with the face-to-face DS service at a time of crisis and change. Many of the DS users being supported through the face-to-face DS service also have multiple and complex needs. In light of this it is unsurprising that staff and volunteers need to provide emotional support alongside support to fill in the online form.

*“Most of our clients are vulnerable....a small benefits issue is pretty large to them because it has such a big impact on their life. So for us, it’s all about giving them reassurance and putting them at ease.”*

Centre staff

Emotional support helps DS users to feel comfortable and helps to alleviate some of the stress of the situation. Emotional support also helps staff and volunteers to build rapport and trust with a DS user – which is often a prerequisite for the DS user to engage with the process. Non-specialist support centres are often adept at incorporating emotional support as they have expertise in providing a user-led service model.

### Procedural advice

Procedural advice refers to information around the processes and practical support in the context of Digital Support. DS users have varying levels of knowledge about HMCTS processes (which may be influenced by whether or not they have had a previous experience of interacting with HMCTS, or at what point in their journey the DS appointment falls). For those that are unfamiliar with HMCTS processes, procedural advice increases the transparency of the system, which promotes fair access to justice. Procedural advice also provides DS users with the information they need to take their case to the next stage.

Good Things Foundation and HMCTS have provided webinars on each of the different HMCTS services to ensure that centres are able to provide users with informed procedural advice. However, inevitably, it is easier for centres to provide procedural advice if they are already specialists in HMCTS services. Centres offering accredited legal advice or specialist welfare and benefits advice have an in-depth knowledge of HMCTS services and its processes, as well as DWP processes. This may not be the case for non-specialist support centres. Research observations suggested that, for non-specialist support centres, procedural advice is more likely to involve reading out the questions on the online form, checking comprehension, and providing a brief explanation of what would happen next.

*"I created this step-by-step document to encourage volunteers to use, but they are only here one day a week or sometimes less. They have issues with remembering what's been heard."*

Centre staff

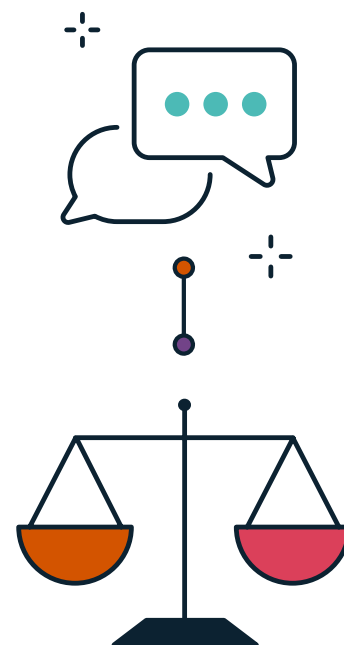
### Legal advice

In the context of Digital Support, legal advice is advice which may be required throughout a case and informs a user with various options, explaining the consequences of each so that the user can make an informed choice. A DS user may need legal support on a range of issues, not just the reason for their current contact.

During Phase 3, the service delivery guidelines were updated to allow centres offering accredited legal advice in areas that are relevant to HMCTS to offer this to DS users at the time of appointment.

Allowing licensed centres to provide legal advice is an 'added value' service for DS users. Centres offering accredited legal advice are able to advise DS users about the best way to present their case, which enhances the chances that they will achieve a positive outcome.

Allowing licensed centres to provide legal advice also helps these centres to integrate the face-to-face Digital Support service in a streamlined way. Legal advice is a core component of how these centres support their clients and preventing these centres from offering legal advice in face-to-face DS appointments would have been a barrier to them joining the pilot.



### Type of HMCTS service

Across all of the HMCTS services, face-to-face Digital Support appointments have many similarities. However, there are some important contextual factors that need to be considered in relation to the different HMCTS services:

- **Where the online form fits in the DS user journey:** some HMCTS online forms are submitted at the start of the DS user journey, while others occur later on in the process. This has important implications for the DS user's engagement, understanding, and attitudes towards filling in the online form. For a SSCS appellant, a face-to-face DS appointment comes at the end of engagement with DWP. This means that the DS user may have a greater understanding of where the SSCS appeal fits within the wider system, but may also be dealing with the fall out of a stressful and challenging interaction with DWP. In contrast, an SJS face-to-face DS appointment occurs at the start of a user journey, which may mean a DS user has a lower level of understanding of HMCTS systems.
- **The length of the user journey:** some DS user journeys may also be much longer than others. For example, one of the DS users interviewed as part of the research had started a Civil Money Claim journey three years prior to being supported through the face-to-face DS service.
- **Personal information required:** Some forms require DS users to articulate more information about their personal circumstances than others, and this has implications for the level of support they are likely to require in an appointment. For example, the process for filling out a Help With Fees form is much more straightforward than an SSCS form (although it is worth noting that Help With Fees form is often filled out in combination with another form).
- **Outcome for DS user:** Some of the forms bring financial benefits for the DS user, and are perceived by DS users to carry less risk (such as probate), while others are perceived by DS users to carry a higher level of risk (such as SSCS appeals). Although perceived risk may not reflect the reality of the process (for example, errors on a probate form can carry significant financial cost), it still has implications for a DS user's state of mind. Where a DS user perceives a service to have a high level of risk, they may require a higher level of emotional support.



### 3.5 Post appointment experience

The post-appointment support offered to DS users is likely to fall under one of three umbrellas:

1. DS user is told what will happen next and there is no expectation of support
2. DS user is provided with the contact details of the centre if they need further support
3. DS user is invited back or told they will be supported through the next stage

Some DS users have a good knowledge about what will happen next - these DS users are more likely to be those who are further along the journey e.g. SSCS appellants, or those that were receiving other types of support from a centre.

Some DS users do not leave a face-to-face DS appointment with a clear idea of what the next steps will be. This may be due to the fact that they have not interacted with HMCTS services before, or that they face personal barriers to retaining the information that was communicated in their appointment.

Where DS users are less clear about the next steps, the ability to access further support

from a centre (if needed) is useful in allaying concerns. It is worth noting that people expect to be able to go back to the same centre for support.

DS users frequently mentioned that they may also turn to friends or family for support if they needed help post-appointment. However, this was not an appropriate course of action for all DS users. For example, one DS user mentioned that they did not think it was appropriate to ask their children to help with their divorce application.

Some DS users facing digital barriers such as limited access to the internet or digital devices or limited digital skills were concerned about the prospect of receiving a digital follow-up (for example, by email), and this is something that needs to be considered by centres in relation to the post-appointment support that is provided. It is important for centres to assess a DS user's digital access, digital skills and digital confidence before leaving an appointment, so they can be sign-posted to further Digital Support should they need it during the next step of the process.

### 3.6 Partial completes

There were 28 instances in which it was reported a form was partially submitted during an appointment.<sup>21</sup> The reasons that a form may be partially submitted include:

- The DS user does not have some of the documents they need to submit the form.
- The DS user is not in an emotional state to complete the form.
- The DS user is provided with some initial support and is judged to have the digital skills to be able to submit on their own at a later date.

<sup>21</sup> The actual figure may be higher than this due to centres not recording all partial completes

### 3.7 Non-attended appointments

60 non-attended appointments were reported during the pilot<sup>22</sup>. The reasons that DS users did not attend a scheduled appointment include:

- Illness
- Changes in availability
- DS user not having correct documents
- DS user forgetting about the appointment
- Difficulty getting to the centre
- Unforeseen events in DS user's personal life

### 3.8 DS user experience

DS users were overwhelmingly positive about their experience of using the face-to-face DS service, both in terms of the support they received and in relation to the member of staff or volunteer who had helped them. This is borne out in the feedback ratings provided by DS users; none of the participating centres had an average feedback rating of less than 8/10.

*"A lot of pressure has been taken off me... it's one less thing I have to worry about. I couldn't be any happier from what he's done for me."*

DS User 22

A number of DS users also mentioned that they didn't know what they would have done without the face-to-face service, reinforcing the importance of this service to DS users.

*"I'd have done the best I could but it may never have gone through because I couldn't have done it as good as they did...I'd have struggled, and they would have probably turned it down anyway this way it has a chance of going through. The support from start to finish was marvellous, it really was."*

DS User 7



<sup>22</sup> The actual figure may be higher than this due to centres not recording all non-attended appointments

### 3.9 Implications for the future

The learnings that have been gained about the DS user journey have several implications for the design and evaluation of the face-to-face DS service going forwards:

- A standardised pre- and post-appointment process may not work given the variety of centre delivery models, and the personal barriers (such as memory problems or learning difficulties) experienced by some DS users.
- It is important for centres to assess a DS user's digital access, digital skills and digital confidence before leaving an appointment, so they can be sign-posted to further Digital Support should they need it during the next step of the process.
- The most important thing for DS users is to resolve their issue, and DS users are likely to require emotional, procedural (and sometimes legal) support in order to reach a positive outcome. Different types of centres are better placed to deliver elements of this support than others. Non-specialist support centres have expertise in delivering emotional and Digital Support, whereas centres that offer accredited legal advice or specialist welfare and benefits advice have expertise in providing procedural and legal advice. The national roll-out will need to ensure that DS users have the choice to access the types of support most relevant to them, in their local area or via a remote support service.
- A face-to-face DS appointment is not the appropriate time to support DS users to improve their digital skills. The key objective of an appointment is to help DS users access HMCTS services, but this should be combined with signposting to support that can help address a DS user's digital barriers over the longer term.
- The approach shown by some centres raises questions about the minimum requirements for an appointment to be classed as a DS appointment – there is a need to create a clear definition of what constitutes a DS appointment.
- Using the term 'Digital Support' does not resonate with DS users. Communicating the face-to-face DS service in the context of the outcomes delivered may be more compelling.







## Chapter 4

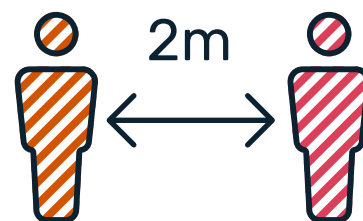
# The Impact of Covid-19

On 23rd March 2020 the UK government introduced social distancing measures in response to the Covid-19 pandemic. This had a significant impact on the ability of centres to deliver the face-to-face DS service. Good Things Foundation's Covid-19 Response Report tells the story of what has happened to people and community partners across the Good Things Network as a result of Covid-19.<sup>23</sup>

During this period the priority for HMCTS and Good Things Foundation was to ensure that the people assisted through the pilot continued to receive the support they needed and were not excluded from accessing HMCTS services. As a result, the following actions were put in place:

- Appointment targets were lifted for a 12 week period.
- An upfront payment was released to centres to cover this 12 week period based on the size of their contract (i.e. they were paid for the appointments they would have been expected to deliver in 'normal times'). This payment was made irrespective of the appointments actually delivered over this 12 week period.
- Centres were allowed to provide the HMCTS DS service remotely over the phone or call/video via web-based software.

During lockdown research interviews were conducted with 6 centres and 7 DS users. We do not have a large enough sample of performance data or qualitative data to be able to draw conclusions about the delivery of DS during lockdown. However, the interviews with centres and DS users did prompt some interesting considerations for the future.



<sup>23</sup> Good Things Foundation, Covid-19 Response Report. Available at: <https://www.goodthingsfoundation.org/research-publications/covid19-response-report> (accessed 11.09.20)

## 4.1 The impact on DS users

Some centres mentioned that there were benefits to delivering the service remotely (i.e. via telephone, Skype, WhatsApp, Zoom), in that it removed barriers for some of their more vulnerable users who find it difficult to come into a centre (such as those with physical disabilities).

Some centres also mentioned that the impact of Covid-19 had brought home the importance of digital skills to some DS users – which may mean DS users will be more receptive to being signposted to digital learning support moving forward.

That being said, a remote service does not work for all DS users. Using digital tools to support DS users with low digital skills proved difficult for some centres, and some mentioned they had to spend a considerable amount of time getting DS users set up on a device before even starting to support them with their HMCTS forms. Other centres mentioned that it was very difficult to deliver the service remotely where a DS user had a language barrier or low levels of literacy, because DS users could not read out information from HMCTS documents or information that was required as evidence as part of submitting the form. Some centres also mentioned that DS users were wary about disclosing personal information over the phone or via an online communication tool.

In addition to this, some centres explained that they were concerned that people without access to the internet were slipping through the net (e.g. people who cannot afford an internet connection, people who do not have a digital device, or those that live in rural areas with no internet connection/reception).

*“For some people seeing people face-to-face is really important and shouldn’t underestimate the number of people who fall into that category... but not requiring people to come in and sign anything has actually been a blessing in disguise. A high proportion of our users have a physical difficulty or a mental health problem. To be told that it can all be done by phone and with email confirmation has been really welcome.”*

Centre staff



### 4.2 The impact on service delivery

Among the centres that we spoke to, the demand for HMCTS services had dropped. This may, in part, be due to a slow-down in DWP’s processing of SSCS assessments since the outbreak of Covid-19. However, some centres also mentioned that the closure of their physical space made it more difficult to communicate to DS users that they were still operating, and some centres also commented their local referral networks had also been disrupted. The centres we interviewed were primarily delivering services to their existing user base.

Transitioning to remote working was difficult for centres. Some centres mentioned that their staff and volunteers did not have adequate devices, or a quiet space to deliver remotely. For some centres without a case management system it was also a challenge to implement sensitive information sharing in a secure way.

Some centres mentioned that appointments were taking longer to deliver remotely – this was due to both the medium and DS users’ personal and environmental barriers.

*“We are finding this challenging because the person we are supporting may:*  
*a. not have good English skills,*  
*b. not have good IT skills, and*  
*c. we’re helping them remotely through video calls.”*

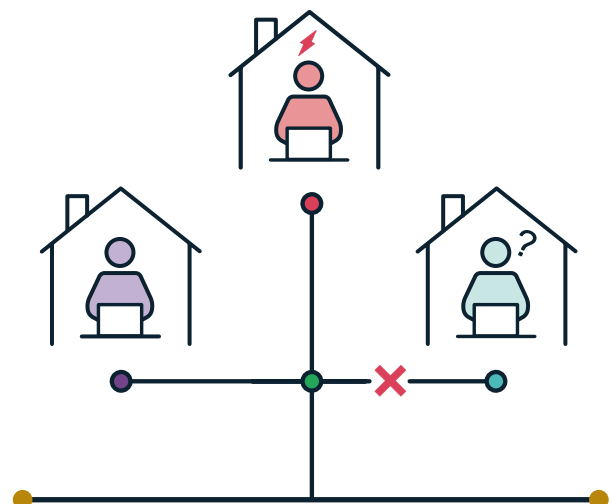
**Centre staff**

Some centres also mentioned that it was more difficult to capture informed consent from DS users when delivering remotely.

### 4.3 Implications for the future

The impact of Covid-19 has several implications for the design of the Digital Support pilot:

- A mixed model of delivery is likely to work well for centres – whereby they can deliver remotely to DS users who are unable to visit a centre, but also provide face-to-face support for those who cannot be supported remotely.
- Social distancing legislation may mean that the amount of support that a centre can provide within their physical centre is reduced.
- Remote appointments are likely to take longer than face-to-face appointments.
- Centre staff and volunteers may not have the digital devices they need to deliver remotely and therefore it is worth considering providing grants for technology/resources to help centres deliver remotely.
- While HMCTS user numbers have dropped during lockdown, demand may increase as DWP starts to process SSCS assessments at higher volumes.



## Chapter 5

# Next Steps for the Pilot

From September 2020, the face-to-face DS pilot will be extended for a further 12 months.

The pilot will continue to support the same HMCTS services:

- Civil Money Claims
- Divorce
- Help with Fees
- Probate
- Single Justice System
- Social Security and Child Support (PIP appeals, ESA appeals, Universal Credit appeals)

There will be other digital services introduced as part of the reform programme (such as Immigration and Asylum, Public Law and other tribunals). However, there are no current plans to include these in the pilot; they will be supported by an upcoming national service.

The findings from the implementation review of the face-to-face pilot between September 2017 and August 2020 have informed the design of the next phase of the pilot in the following ways:

- **Delivery model:** The service delivery adjustments made as a result of Covid-19 will be carried through to the next stage of the pilot. Centres will be able to provide Digital Support appointments both face-to-face and remotely (via telephone, online video tool, or online voice calling tool). The channel used for each appointment is at the centre's discretion. Centres will continue to be able to provide an assisted typing service and to provide additional support alongside Digital Support (no matter the appointment channel).
- **Data collection:** The appointment data collected through CaptureIT will be streamlined and refined to reduce the administrative burden on centres.

Good Things Foundation will continue to work with HMCTS to explore the implications that the face-to-face DS pilot has for national policy, as well as the impact that Covid-19 has had on how the Digital Support service needs to be delivered.



## Chapter 6

# Conclusion

This report brings together the findings from the face-to-face Digital Support pilot between September 2017 – August 2020.

The face-to-face DS pilot has taken a ‘test and learn’ approach. HMCTS and Good Things Foundation have worked collaboratively, and iteratively, to design the face-to-face DS service, evaluate how well the service is meeting user needs, and update the service design to provide a better experience for users.

Two core questions considered as part of the ‘test and learn’ approach were:

- What needs to be in place to meet DS users’ Digital Support and wider needs?
- What needs to be in place to enable community-based and/or support organisations to deliver?

The face-to-face DS service is highly valued by DS users and addresses a clear set of barriers, supporting users who lack the skills, access, confidence, or ability to complete a form online. Many DS users said they would not have been able to address their needs without the face-to-face DS service.

Many of the barriers that DS users face would be present whether they were accessing HMCTS service online or via paper, and in many instances it is the centre who suggests that the DS user access HMCTS services online. However, the face-to-face Digital Support service provides value in that it provides both an effective and efficient way of providing access to justice: effective in that it helps address DS users’ needs, and efficient in that it does this via digital channels.

### **What needs to be in place to meet DS users’ Digital Support and wider needs?**

On the whole, the key priority for DS users is to receive support for, or to resolve, their issue; most are unlikely to have firm expectations about how this aim is achieved.

DS users can face multiple barriers to accessing HMCTS services online, and this means that they are likely to require a wider package of support than just Digital Support (including emotional, procedural – and sometimes legal – support).

Although additional support is not within the remit of the funded face-to-face DS service, where needed, it cannot be separated from Digital Support. The additional support provided by centres is often crucial to the success of a face-to-face DS appointment, and in some instances not having this support would be a barrier to accessing HMCTS services online.

Going forward, there needs to be a clear view of end-to-end service journey and potential Digital Support requirements outside the application stage. As HMCTS service development has followed an agile approach, different elements of the online journey have been built in stages. As they mature it will be important to understand the end-to-end journey and DS users’ Digital Support touchpoints.



### What needs to be in place to enable community-based and/or support organisations to deliver?

Community-based/support organisations are an effective channel through which to provide the face-to-face Digital Support service. DS users appreciate being able to visit a local organisation that they know and trust, and the support that centres deliver receives very high levels of satisfaction.

Central provision needs to enable community-based/support organisations to best serve their users, in their local context. The face-to-face DS service design guidelines need to be flexible enough to enable a diverse range of centres to integrate the face-to-face DS service within their existing delivery models (in a straightforward way).

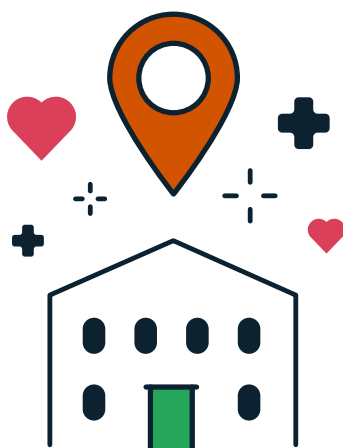
The intention of the pilot was to 'test and learn' how the face-to-face DS service can be successfully implemented across a range of organisations. The diversity of organisations delivering the face-to-face DS service has been an asset, allowing us to better understand the enablers and barriers to implementation in a variety of contexts.

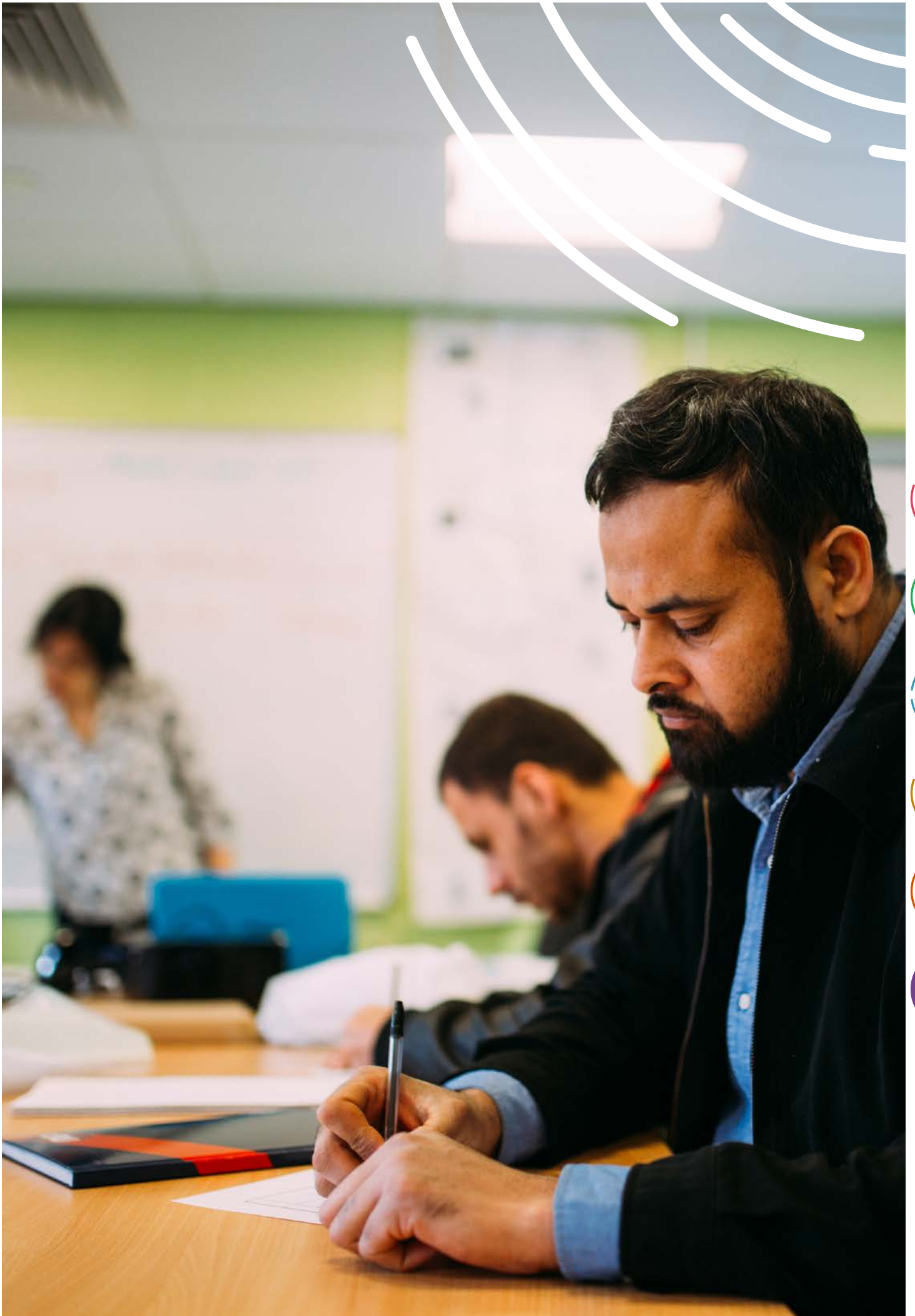
The research has uncovered a number of organisational and contextual factors that facilitate community-based/support organisations to implement the face-to-face DS service. These include:

- Good relationships with relevant local organisations (that include those that come into frequent contact with users eligible for the service e.g. welfare and benefits advice centres).
- Effective triaging, where all staff and volunteers have the understanding to identify people suitable for the service.
- Existing case management processes to enable centres to track DS user progress more easily and identify potential DS users.
- Expertise in supporting HMCTS services.
- Experience using digital forms.
- Staff and volunteers who are willing to use, able to use, and see the benefits of, digital services (and can sell-in the benefit of the service internally).

Support from HMCTS is also crucial to training staff/volunteers about how to use, and support, people to access HMCTS digital services. Reflecting the diversity of community-based/support organisations within the pilot, any onboarding training needs to be tailored to the expertise of the organisation.

Over the next 12 months Good Things Foundation will continue to work with HMCTS to explore the implications that the face-to-face DS pilot has for national policy, as well as the impact that Covid-19 has had on how the Digital Support service needs to be delivered.







## Annex 1: Methodology

This report brings together the qualitative and quantitative findings from Phases 1, 2 and 3 of the pilot. The findings have been drawn from performance data (captured in Phases 1, 2 and 3), and qualitative research (conducted between September 2017 – June 2020).

### Appointment Data

A range of service-level and demographic data has been collected using Good Things Foundation's customer relationship management system, CaptureIT. Centres were required to input the user data into CaptureIT at the end of each appointment.

This data has allowed the service team to monitor the usage of the face-to-face DS service, and understand: referral routes into the service, the support provided in a DS appointment, the outcome of DS appointment, and a limited range of DS user characteristics.

### Qualitative Research

Qualitative research was conducted between September 2017 – June 2020 to understand how centres are delivering the pilot, and how successfully the face-to-face service meets the needs of DS users.

Research largely took the form of in-depth interviews, with:

- DS users who had interacted with the face-to-face DS service
- Staff/volunteers delivering the face-to-face DS service

5 DS users also consented to researchers observing their DS appointment. This provided additional observational data to supplement interviews.

### Qualitative research with DS users

32 interviews were conducted with DS users:

- 11 interviews were conducted in Phase 2 and 21 were conducted in Phase 3; 7 of the interviews were conducted during government lockdown.
- 27 of the interviews were with SSCS appellants and 5 were with non-SSCS DS users.
- 7 interviews were conducted with DS users who had been referred into the service by an HMCTS referral, 25 interviews were conducted with DS users had been identified through a non-HMCTS referral
- The DS users interviewed had received support from 14 different centres

DS users were engaged following their DS appointments. At each DS appointment, DS users were asked for their consent to participate in research which assesses the service. Interviews were then brokered with participants who agreed to be contacted again.

In Phase 1 of the pilot, Good Things Foundation and HMCTS also ran 5 user research sessions with two participating Online Centres. These sessions combined DS user interviews and usability testing, prior to the release of online services for PIP and ESA appeals, and Divorce.

In Phase 2 of the pilot HMCTS conducted user research and data capture within courts to understand whether users come into court or call courts pre-application or during their application.

### Centre Research

A total of 33 interviews were conducted staff/volunteers delivering the face-to-face DS service.

19 Interviews were conducted with staff/volunteers from 14 of the 26 centres still on the pilot:

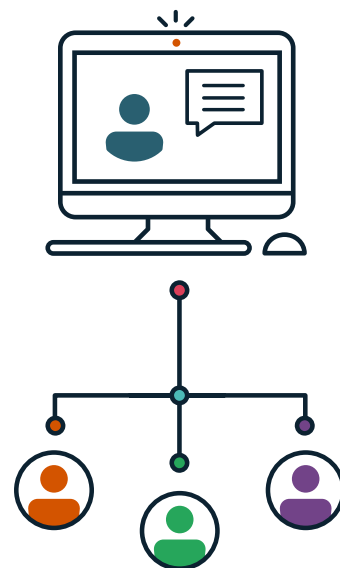
- 5 centres have been interviewed twice, and 9 have been interviewed once
- 5 interviews were conducted in Phase 2 and 14 were conducted in Phase 3; 6 interviews were conducted during government lockdown

An additional 14 research interviews were conducted with 12 of the 17 centres who have left the pilot.

### Workshops/Design Sessions

In Phase 2, HMCTS ran a design session with Good Things input at Birmingham Courts and Tribunal Service Centre to explore support provided and referrals from HMCTS to local support organisations.

In Phase 3 of the pilot Good Things Foundation ran a virtual workshop with centres still involved in the pilot to collect feedback on their experience of delivering the pilot and to gain their input into the ongoing design of the face-to-face service.



## Annex 2: References

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Good Things Foundation, Covid-19 Response Report. Available at:

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## Annex 3: List of participating centres

Centre	Phase 1	Phase 2	Phase 3	Remain in Pilot
Action Station, South Tyneside	●	●		
Bangladeshi Youth and Cultural Shomiti			●	●
Bristol Law Centre			●	●
Bromley by Bow Centre	●	●	●	●
CAS Community Solutions			●	
Cheadle Citizens Advice			●	●
Citizens Advice Denbighshire		●	●	●
Citizens Advice Halton			●	●
Citizens Advice Manchester			●	
Citizens Advice North Somerset			●	
Citizens Advice Staffordshire North and Stoke on Trent			●	
Citizens Advice Stroud and Cotswolds Districts		●		
Citizens Advice Torfaen		●	●	●
Community Advice and Law Service (Leicestershire)			●	●
Community Law Service (Northampton and County)			●	●
Crofton Park Community Library		●	●	
Cyngor Ar Bopeth Gwynedd Citizens Advice			●	●
Destinations@Saltburn		●	●	
Doncaster Central Library	●	●	●	
Edlington Hilltop Centre	●	●	●	
Emmanuel Westly Foundation			●	
Food and Education Enterprise			●	
Golden Centre of Opportunities			●	
Hackney Co-operative Developments (HCD)	●	●	●	●
Kensington Community Learning Centre	●	●	●	●

List of participating centres (cont.)

Centre	Phase 1	Phase 2	Phase 3	Remain in Pilot
Learn.org.uk Ltd			●	●
Leeds Together Women		●		
Legal Advice Centre (University House)			●	●
Lincs Training			●	
Norfolk Community Law Service			●	●
North and West Gloucester Citizens Advice			●	●
Nottingham Law Centre			●	●
Plymouth Citizens Advice			●	●
Raise			●	●
Rhondda Cynon Taf Citizens Advice		●		
Smartlyte	●	●	●	●
St Pauls Advice Centre			●	●
Sunderland North Family Zone	●	●	●	
Support Through Court			●	●
The Dracaena Centre			●	
The Hope Centre	●	●		
We Are Digital	●	●		
Wai Yin Society		●	●	●



## Annex 4: Support provided by HMCTS service

HMCTS Service	Form completed	Support, but form not completed	DS Users supported to prepare for online form	Total
SSCS appeal (PIP)	354	11	14	379
Help with fees	102	2	2	106
SSCS appeal (Universal Credit)	74	0	12	86
SSCS appeal (ESA)	46	9	11	66
Civil money claims	33	1	1	35
Divorce	54	1	6	61
Single Justice System	30	4	11	45
Probate	2	0	2	4
<b>Total</b>	<b>695</b>	<b>28</b>	<b>59</b>	<b>782</b>

## Annex 5.1: Attended appointments by centre<sup>24</sup>

Centre	Phase 1	Phase 2	Phase 3	Total
Bangladeshi Youth and Cultural Shomiti			33	33
Bristol Law Centre			13	13
Bromley by Bow Centre		19	48	67
CAS Community Solutions			1	1
Cheadle Citizens Advice			7	7
Citizens Advice Denbighshire		26	101	127
Citizens Advice Halton			23	23
Citizens Advice North Somerset			4	4
Citizens Advice Staffordshire North and Stoke on Trent			8	8
Citizens Advice Torfaen		2	10	12
Community Advice and Law Service (Leicestershire)			38	38
Community Law Service (Northampton and County)			32	32
Crofton Park Community Library		4		4
Cyngor Ar Bopeth Gwynedd Citizens Advice			35	35
Destinations@Saltburn		7	1	8
Doncaster Central Library			1	1
Food and Education Enterprise			9	9
Golden Centre of Opportunities			8	8
Hackney Co-operative Developments (HCD)		4	18	22
Kensington Community Learning Centre	1	5	8	14
Learn.org.uk Ltd			178	178
Legal Advice Centre (University House)			21	21
Norfolk Community Law Service			9	9
North and West Gloucester Citizens Advice			26	26
Plymouth Citizens Advice			4	4

<sup>24</sup> The following centres did not deliver any appointments: Action Station South Tyneside, Citizens Advice Manchester, Citizens Advice Stroud and Cotswolds Districts, Edlington Hilltop Centre, Emmanuel Westly Foundation, Leeds Together Women, Lincs Training, Nottingham Law Centre, Rhondda Cynon Taf Citizens Advice, The Dracaena Centre, We Are Digital

## Attended appointments by centre (cont.)

Centre	Phase 1	Phase 2	Phase 3	Total
Raise			30	30
Smartlyte	1	4	8	13
St Pauls Advice Centre			8	8
Sunderland North Family Zone		4	5	9
Support Through Court			4	4
The Hope Centre	2			2
Wai Yin Society		3	9	12
<b>Grand Total</b>	<b>4</b>	<b>78</b>	<b>700</b>	<b>782</b>



## Annex 5.2: - Form submitted by centre<sup>25</sup>

Centre	Phase 1	Phase 2	Phase 3	Total
Bangladeshi Youth and Cultural Shomiti			19	19
Bristol Law Centre			13	13
The Bromley by Bow Centre		11	48	59
Cheadle Citizens Advice			5	5
Citizens Advice Denbighshire		24	99	123
Citizens Advice Halton			22	22
Citizens Advice North Somerset			4	4
Citizens Advice Staffordshire North and Stoke on Trent			8	8
Citizens Advice Torfaen		2	10	12
Community Advice and Law Service (Leicestershire)			37	37
Community Law Service (Northampton and County)			31	31
Crofton Park Community Library		2		2
Cyngor Ar Bopeth Gwynedd Citizens Advice			34	34
Destinations@Saltburn		1		1
Doncaster Central Library			1	1
Golden Centre of Opportunities			3	3
Hackney Co-operative Developments (HCD)		2	11	13
Kensington Community Learning Centre	1	4	5	10
Learn.org.uk Ltd			175	175
Legal Advice Centre (University House)			21	21
Norfolk Community Law Service			9	9
North and West Gloucester Citizens Advice			26	26
Plymouth Citizens Advice			4	4
North and West Gloucester Citizens Advice			26	26
Plymouth Citizens Advice			4	4

<sup>25</sup> The following centres did not submit any forms: Action Station South Tyneside, CAS Community Solutions, Citizens Advice Manchester, Citizens Advice Stroud and Cotswolds Districts, Edlington Hilltop Centre, Emmanuel Westly Foundation, Food and Education Enterprise, Leeds Together Women, Lincs Training, Nottingham Law Centre, Rhondda Cynon Taf Citizens Advice, The Dracaena Centre, The Hope Centre, We Are Digital

## Forms submitted by centre (cont.)

Centre	Phase 1	Phase 2	Phase 3	Total
Raise			30	30
Smartlyte	1	4	7	12
St Pauls Advice Centre			8	8
Sunderland North Family Zone			1	1
Support Through Court			4	4
Wai Yin Society			8	8
<b>Grand Total</b>	<b>2</b>	<b>50</b>	<b>643</b>	<b>695</b>

## Annex 5.3: - Partial completes by centre<sup>26</sup>

Centre	Phase 1	Phase 2	Phase 3	Total
Bangladeshi Youth and Cultural Shomiti			1	1
Bromley by Bow Centre		7		7
Citizens Advice Denbighshire		2	2	4
Community Law Service (Northampton and County)			1	1
Crofton Park Community Library		1		1
Destinations@Saltburn		2	1	3
Golden Centre of Opportunities			3	3
Hackney Co-operative Developments (HCD)			1	1
Kensington Community Learning Centre			1	1
Learn.org.uk Ltd			1	1
Sunderland North Family Zone		4	1	5
<b>Grand Total</b>		<b>16</b>	<b>12</b>	<b>28</b>

<sup>26</sup> The actual figure may be higher than this due to centres not recording all partial completes

## Annex 5.4: - Support the customer to prepare for online form by centre<sup>27</sup>

Centre	Phase 1	Phase 2	Phase 3	Total
Bangladeshi Youth and Cultural Shomiti			13	13
Bromley by Bow Centre		1		1
CAS Community Solutions			1	1
Cheadle Citizens Advice			2	2
Citizens Advice Halton			1	1
Community Advice and Law Service (Leicestershire)			1	1
Crofton Park Community Library		1		1
Cyngor Ar Bopeth Gwynedd Citizens Advice			1	1
Destinations@Saltburn		4		4
Food and Education Enterprise			9	9
Golden Centre of Opportunities			2	2
Hackney Co-operative Developments (HCD)		2	6	8
Kensington Community Learning Centre		1	2	3
Learn.org.uk Ltd			2	2
Smartlyte			1	1
Sunderland North Family Zone			3	3
The Hope Centre	2			2
Wai Yin Society		3	1	4
<b>Grand Total</b>	<b>2</b>	<b>12</b>	<b>45</b>	<b>59</b>

<sup>27</sup> The actual figure may be higher than this due to centres not recording all 'support appointments'

## Annex 5.5: - Attended appointments by referral type and centre

Centre	HMCTS	Non-HMCTS referral	Total
Bangladeshi Youth and Cultural Shomiti	1	32	33
Bristol Law Centre	0	13	13
Bromley by Bow Centre	3	64	67
CAS Community Solutions	0	1	1
Cheadle Citizens Advice	0	7	7
Citizens Advice Denbighshire	1	126	127
Citizens Advice Halton	0	23	23
Citizens Advice North Somerset	0	4	4
Citizens Advice Staffordshire North and Stoke on Trent	1	7	8
Citizens Advice Torfaen	0	12	12
Community Advice and Law Service (Leicestershire)	2	36	38
Community Law Service (Northampton and County)	0	32	32
Crofton Park Community Library	0	4	4
Cyngor Ar Bopeth Gwynedd Citizens Advice	0	35	35
Destinations@Saltburn	0	8	8
Doncaster Central Library	1	0	1
Food and Education Enterprise	0	9	9
Golden Centre of Opportunities	0	8	8
Hackney Co-operative Developments (HCD)	9	13	22
Kensington Community Learning Centre	5	9	14
Learn.org.uk Ltd	1	177	178
Legal Advice Centre (University House)	1	20	21
Norfolk Community Law Service	0	9	9
North and West Gloucester Citizens Advice	0	26	26
Plymouth Citizens Advice	0	4	4

## Forms submitted by centre (cont.)

Centre	HMCTS	Non-HMCTS referral	Total
Raise	0	30	30
Smartlyte	4	9	13
St Pauls Advice Centre	0	8	8
Sunderland North Family Zone	0	9	9
Support Through Court	0	4	4
The Hope Centre	2	0	2
Wai Yin Society	2	10	12
<b>Grand Total</b>	<b>33</b>	<b>749</b>	<b>782</b>

## Annex 5.6: - Attended appointments by HMCTS service and centre

Centre	Civil money claims	Divorce	ESA	Help with fees	PIP	Probate	Single Justice System	Universal Credit	Total
Bangladeshi Youth and Cultural Shomiti	2	1			4		23	3	33
Bristol Law Centre			1		9			3	13
Bromley by Bow Centre		1	18	1	38		1	8	67
CAS Community Solutions					1				1
Cheadle Citizens Advice			1	3	2	1			7
Citizens Advice Denbighshire			11		105			11	127
Citizens Advice Halton					20	1		2	23
Citizens Advice North Somerset					3			1	4
Citizens Advice Staffordshire North and Stoke on Trent			1		7				8
Citizens Advice Torfaen					12				12
Community Advice and Law Service (Leicestershire)				8	26			4	38
Community Law Service (Northampton and County)			2		25			5	32
Crofton Park Community Library			1	1			2		4
Cyngor Ar Bopeth Gwynedd Citizens Advice			2	12	15			6	35
Destinations@Saltburn			4		2	1	1		8
Doncaster Central Library					1				1
Food and Education Enterprise								9	9
Golden Centre of Opportunities		5					3		8

## Attended appointments by HMCTS service and centre (cont.)

Centre	Civil money claims	Divorce	ESA	Help with fees	PIP	Probate	Single Justice System	Universal Credit	Total
Hackney Co-operative Developments (HCD)	3	1	8	3	3		4		22
Kensington Community Learning Centre	3	2	4	2	2		1		14
Learn.org.uk Ltd	25	43	6	63	15		10	16	178
Legal Advice Centre (University House)	2	1	1	4	11			2	21
Norfolk Community Law Service					5			4	9
North and West Gloucester Citizens Advice			1		16			9	26
Plymouth Citizens Advice				4					4
Raise					28			2	30
Smartlyte					13				13
St Pauls Advice Centre					7			1	8
Sunderland North Family Zone			3		6				9
Support Through Court		1		3					4
The Hope Centre		2							2
Wai Yin Society		4	2	2	3	1			12
<b>Grand Total</b>	<b>35</b>	<b>61</b>	<b>66</b>	<b>106</b>	<b>379</b>	<b>4</b>	<b>45</b>	<b>86</b>	<b>782</b>



## Annex 5.7: - Attended appointments by Month

Appointment Month	Appointments Attended
July 2018	1
August 2018	3
December 2018	4
January 2019	8
February 2019	11
March 2019	17
April 2019	15
May 2019	15
June 2019	8
July 2019	15
August 2019	59
September 2019	61
October 2019	69
November 2019	73
December 2019	64
January 2020	92
February 2020	56
March 2020	48
April 2020	26
May 2020	37
June 2020	37
July 2020	42
August 2020	21
<b>Grand Total</b>	<b>782</b>

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