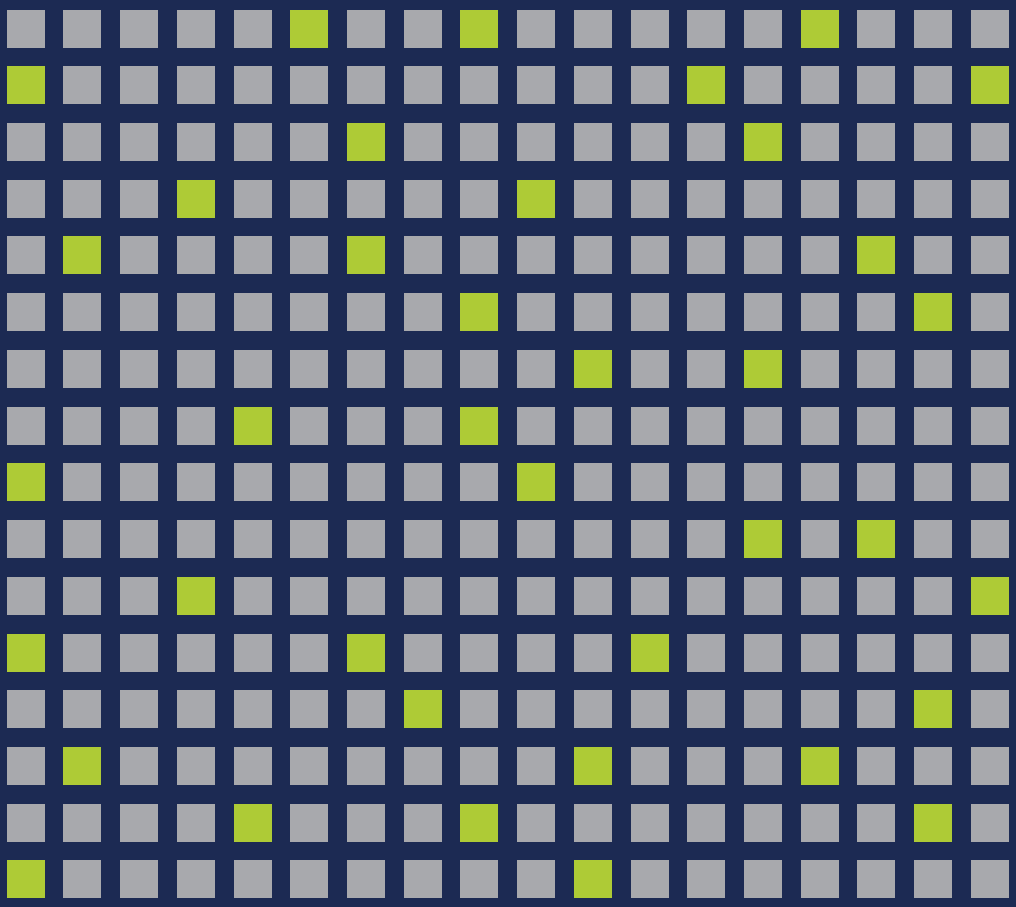
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Changing research in social housing

RCTs in practice

January 2021



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Changing Research in Social Housing: the role of RCTs,
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1. Introduction

Targeting resources and services has always been a complex balance for housing providers, in terms of ensuring that the right people receive the right services with the best use of resources. HACT has long championed the use of evidence and insight within the social housing sector to measure the impact and effectiveness of services and interventions and drive strategic decision making and service improvements.

More recently we have been working with sector partners to design and implement RCTs and build capability to successfully use the methodology. Whilst RCTs are a relatively new concept for many in the social housing sector, there are an increasing number of housing providers pioneering the application of this method to test assumptions and create actionable insights.

This report is the second of two that draws on the learning and insights from a collaborative HACT - JRF RCT project. The aim of the project was to showcase RCTs as a robust and accessible methodology that could be used alongside traditional research approaches to drive evidence-based service design.

The two reports are designed to explain RCTs and provide an insight into their use in the social housing sector. Together, the reports help build capability and the mindset in the sector to consider and use RCTs.

The first report, entitled *Changing research in social housing: the role of RCTs*, outlined progress so far in the use of RCTs in the social housing sector. It set out the theory behind the methodology, introduced the basics of running a trial and set out steps to consider before running an RCT.[1]

This second report, entitled *Changing research in the social housing: RCTs in practice*, does something slightly different. It looks at how the theory behind RCTs has been put into practice, with an emphasis on the practical application of RCTs in the social housing sector.

It pulls together experiences, learning and reflections from RCTs that have been designed and delivered by housing providers. Through a consistent format, it provides insights into the practical application of RCTs in the social housing sector. These use cases form the core content of the report, providing insights for social housing organisations to optimise their future potential use of RCTs.

In the current operating environment, research methods need to be accessible, flexible and actionable. Drawing on research disciplines, models and methodologies to address the ever-increasing unanswered questions is more relevant than ever

1 https://www.hact.org.uk/sites/default/files/ChangingResearch_Final.pdf

and doesn't necessarily need to be time consuming. RCTs continue to be a relevant methodology for social housing organiastions to use during an unprecedented and unfamiliar operating environment, whether for long term strategy or short to medium term tactical utility.

2 RCTS in social housing: use cases

This report draws on insights and reflections from real world applications of RCTs by seven social housing providers. Family Mosaic, now part of Peabody, was the first social housing organisation to run an RCT, when it began an ambitious three-year RCT in 2013 to test the effectiveness of a new care and support service model. Hyde Housing Group, L&Q and Citizen Housing (formerly WM Housing Group) embarked on their respective RCTs between 2015 and 2018. Optivo, Clarion Housing Group, Town & Country (now a subsidiary of Peabody) and Orbit launched RCTs in 2018 and 2019.

These housing providers identified RCTs as one way to measure impact and use insights to drive evidence-based decision making. This report demonstrates the breadth and variety of RCTs in the sector. They have been used to test the effectiveness of a broad range of services and organisational processes in different parts of the business. However, the ambition is the same – to test new things and create robust evidence about what works to inform service design, strategic decision making and ultimately investment choices.

In pioneering the use of RCTs, these organisations have demonstrated bold thinking. Some of the trials featured in this report failed to achieve outcomes of interest. However, as the following chapters of use cases illustrate, the process of designing and implementing an RCT has provided invaluable learning opportunities.

Each use case in the following chapters includes trial descriptions and findings, as well as an analysis of the capabilities raised for each of the housing providers and complexities in running the RCT.

The format of each chapter is consistent, in order to highlight the common issues and experiences of individual housing providers as well as opportunities to optimise the future application of RCTs. Each use case combines insights from published and internal research reports on RCTs as well as feedback from housing staff involved in the design and delivery of RCTs in the social housing sector.

3 Family Mosaic (now merged with Peabody)

3.1 What was the trial testing?

The trial was based on the hypothesis:

> Interventions delivered by housing providers can reduce NHS usage and improve health and wellbeing outcomes.

3.2 What happened

Family Mosaic, and subsequently Peabody, ran two RCTs between 2013 and 2018.

The initial three-year RCT commenced in 2013. The aim was to test the effectiveness of discrete interventions delivered as part of a new care and support service model.[2] Internal research found that 71% of residents over the age of 50 years had one or more long term health conditions. Family Mosaic developed a new care and support delivery model incorporating different levels of support. The trial provided an opportunity to test the impact of different interventions and levels of support.

Residents were randomised into three groups:

- Control: this group received no additional support.
- Treatment intervention A: this group were signposted to health and wellbeing support services by their neighbourhood manager.
- Treatment intervention B: this group were offered intensive personalised support from a dedicated health and wellbeing support worker, including support to attend local relevant services.

A total of 547 residents were randomised into each group, 186 into the Control Group, 172 into Treatment A and 174 into Treatment B.

A second related one-year trial commenced in 2017 to test whether more focused, person-centred health and wellbeing interventions could address the potential issue of dependency identified by the first trial, by improving people's ability to manage their health more efficiently and effectively.

This trial focused on general needs residents and had two arms:

- Control: this group received no health and wellbeing support, signposting or advice, but did have further health assessments.
- Treatment intervention: this group received a tailored package of support lasting three months.

A total of 261 residents were randomised into two control and treatment groups, indicating this was not an equal split.

3.3 Findings

The first trial found that the health and wellbeing interventions resulted in reduced

2 https://www.peabody.org.uk/media/13024/2013-health_begins_at_home.pdf
https://www.peabody.org.uk/media/13004/2016-health_begins_at_home_final_report.pdf
https://www.peabody.org.uk/media/12914/pub_18_007_peabody_health_final_optimised.pdf

NHS usage, particularly in planned hospital appointments.

The second trial found that after receiving an intervention for three months, participant's ability to self-manage their health improved significantly, and continued for at least nine months after the intervention ended.

3.4 Capability, limitations and opportunities

3.4.1 Mindset

Optimising the effectiveness of RCTs requires alignment and buy-in up and down the organisation. This ensures that senior staff and leadership help recognise the importance of the discipline and ensure sufficient resources. This also ensures that frontline staff are not removed from this strategic content and have the opportunity to input into research design and implementation of findings.

Opportunities to optimise capability

Research project teams should include a senior level sponsor and subject matter operational representatives from the outset. Internal communications and huddles should share highlights and progression research work and milestone results.

4.3.2 Environmental circumstances

The nature of the service model being tested meant that some trial participants with serious long-term health conditions became seriously unwell and required support regardless of the group they had been randomised into as part of the trial. These individuals therefore had to be removed from the trial, which affected the sample size. This highlights the need to consider the nature of the intervention being tested and sensitivities associated with randomisation.

Opportunities to optimise capability

To address this, housing providers should manage expectations with sample attrition in high-risk groups. While this is indicative of the severity of the problem and subject matter, the research design should anticipate the impact when triaging potential trial participants.

In the example of the Peabody trial, the research recommendations suggested that those with high level needs or certain characteristics should be excluded from the trial as they are likely to require additional support beyond that offered as part of the trial. This also highlights the need to involve those staff directly engaging with residents and service users to design the intervention and research project, which will also enhance their level of investment in the project.

4.3.3 Inter/intra team collaboration

The trials highlighted some of the interdependencies between departments providing different aspects of the same services.

This provided an opportunity for collaboration between teams and departments where historic silos existed. In this case, the trial brought the research team in contact with the care and support part of the business, which tended to operate independently from the wider business.

However, a longer more protracted phase two RCT was applied between 2013 and 2018. During this time period, Family Mosaic merged with Peabody, underwent restructure and subsequent staff turnover. By the end of the second phase, many of the staff involved in the design and initial delivery of the trial were no longer in the same roles or had left, which created gaps in knowledge of decision making and delivery/analysis plans for the trial.

Opportunities to optimise capability
This highlights the need to ensure that project documentation is available centrally and is updated regularly to reflect thought processes and rationale for decision making. Working with HACT or a similar external support partner or academic advisor helps maintain this continuity.

4.3.4 Data

Data quality and the ability to make robust statements around outcomes from trials can be affected by different factors, such the methods used to collect data from participants. This is a common challenge in social housing RCTs. Lengthy feedback forms and the use of questions that are difficult to understand or have lots of different response scales can affect response rates, particularly for control groups who may not have received any form of support.

Opportunities to optimise capability
Enhancing data collection and management processes will ensure that the relative impact of interventions for residents and the organisation can be identified. HACT's UK Data Standard is working with sector partners to improve data quality and integrity to optimise the effectiveness and accuracy of RCTs and other research methods.

4 WM Housing (now Citizen Housing)

4.1 What was the trial testing?

The trial was based on the hypothesis:

SMS reminders are an effective way to ensure rent payments.

4.2 What happened

The five-month RCT ran between December 2015 and April 2016. The aim was to test whether SMS reminders are an effective way to collect income.

Historically, WM Housing tended to chase rent payments at the point where residents were in arrears. The trial tested whether sending an SMS reminder before rent was due would have an impact on resident's behaviour.

Residents were randomised into two groups:

- Control: this group did not receive an SMS reminder.
- Treatment intervention: this group received an SMS reminder to pay their rent.

A total of 2198 residents were randomised into each group, 1099 in each group.

4.3 Findings

The trial showed that residents who received the SMS remainder were slightly more likely to pay their rent than the control group, however, the results were not statistically significant as the study was too small.

4.4 Capability, limitations and opportunities

4.4.1 Mindset

WM Housing found the RCT project useful for thinking about how new services and processes are implemented. It also encouraged collaboration with external partners and academic partners. The project ultimately started to create some of the right conditions to think about evidence-led strategy and re-imagine working practices.

Opportunities to optimise capability

Sharing new thinking and making this a routine part of the narrative internally helps improve the organisation's profile as bold thinking and progressive. This builds a culture of open thinking and continuous improvement.

5 Hyde Housing

5.1 What was the trial testing?

The trial was based on the hypothesis:

> Changing how the housing provider communicates with residents can enhance rates of engagement with support services.

5.2 What happened

Hyde Housing Group ran two trials in 2017 to test the effectiveness of different communication approaches at encouraging engagement with support services.

The first trial looked at two parts in the service user journey – the point of referral and engagement with advisers and tested the impact of combinations of three interventions:

- SMS text message sent before the initial call from advisors (who serve as a triage function). The SMS was designed to prime residents to let them know to expect a call with an offer of support from the team. The impact of this in maintaining engagement of residents was compared to a control group who did not receive the SMS message.
- Existing letter sent after engagement with advisor.
- New letter sent after engagement with advisor, designed using techniques informed by behavioural science.

Residents were randomised into four groups:

- Group one: this group received no SMS & existing letter – a total of 354 residents received this intervention
- Group two: this group received SMS & existing letter – a total of 348 residents received this intervention
- Group three: this group received the new letter – a total of 131 residents received this intervention
- Group four: this group received the old letter – a total of 124 residents received this intervention

The second trial looked at improving engagement from tenants facing court action for arrears who engage with Hyde's support advisors. Residents were randomised into two groups:

- Control group: received the existing letter.
- Treatment group: received a new, designed letter.

A total of 248 residents were randomised into each group, 125 received the new letter and 123 received the existing letter.

5.3 Findings

Findings from the first trial were overall inconclusive and there was no evidence that adding an SMS to the process would positively affect the rate of engagement.

The second trial found that the new letter was more effective at stimulating engagement that the original letter.

5.4 Capability, limitations and opportunities

5.4.1 Mindset

The RCT methodology helped Hyde challenge some assumptions about the 'always been done this way' mentality and start to re-imagine service delivery according to data, not just for the sake of change. This is a common outcome from RCTs which encourage different thinking and help empirically support or expose good and bad working practices. The trials enabled Hyde to justify permanent adjustments to processes.

Opportunities to optimise capability

Trials and these type of outputs should be reviewed as part of Hyde's learning culture and shared with leadership and the wider-staff team.

5.4.2 Inter/intra team collaboration

Hyde selected discrete parts of the service user journey to test new approaches to communicating with residents. The RCT methodology would therefore only involve three members of staff. This made the process of getting internal sign-off more straightforward and meant these staff members could actively engage with the RCT methodology, co-create the research processes and encourage joint problem solving.

Opportunities to optimise capability

Two strong learning points have emerged; engage staff and keep it simple! Making research updates and results a routine feature of cascades, huddles, team meetings and performance dashboards helps link the research evidence into the context of operations.

5.4.3 Data

The process of setting up the trial also yielded a number of outcomes. It provided Hyde staff with an invaluable opportunity to scrutinise processes, data collection practises and interactions between staff in the organisation and identify and address data gaps and inconsistencies in reporting.

Opportunities to optimise capability

RCTs rely on having a consistent research question or hypothesis. Consider including multiple hypotheses to allow adjustments as the trial progresses and ensure appropriate and accurate data is collected from the outset.

SMS messages may usefully improve engagement (or achieve other outcomes of interest) in other contexts, but this RCT does suggest that they should not be assumed to be a tool that will help in all cases.

6 L&Q

6.1 What was the trial testing?

The trial was based on the hypothesis:

> Intensive one to one employment support can improve employment status and household income.

6.2 What happened

The twelve month trial ran between 2017 and 2018. The aim was to test the effectiveness of an intensive one-to-one employment support intervention delivered by an external delivery partner at supporting residents to maintain their tenancies compared to business as usual support. The trial looked at tenancy sustainment outcomes. It did so by using changes in rent accounts and arrears as well as housing benefit status as a proxy for employment status over a twelve month period to determine the extent to which the intervention supported tenancy sustainment.

Residents were randomised into two groups:

- Control: this group received the business as usual employment support.
- Treatment intervention: this group received intensive one-to-one support from an external delivery partner.

A total of 94 residents were randomised, 46 into the treatment group and 48 into the control group.

6.3 Findings

The trial found no significant difference between outcomes for the treatment and control groups.

6.4 Capability, limitations and opportunities

6.4.1 Mindset

L&Q sought to evidence the impact and effect of their investment and interventions in sustaining tenancies, which aligns with their evidence-led approach to decision making.

Opportunities to optimise capability

The operational impact of the trial and its findings can be optimised as the basis for ongoing impact monitoring. For example, where a number of services or interventions combine into one output e.g. tenancy sustainability, knowing the impact of each of those individual factors relative to each other factor makes adjustments to services more precise and weighted. This avoids any single variable 'drowning out' the effect of the others when reporting and monitoring.

6.4.2 Environmental circumstances

The trial experienced issues with recruitment, with the participants initially recruited from residents living in a small number of South London boroughs before the catchment area was extended to eight boroughs to enhance the sample size.

Opportunities to optimise capability

This highlights the need to select an intervention to test that will yield a sufficient sample size to make robust assessments of the data.

7 Optivo

7.1 What was the trial testing?

The trial was based on the hypothesis:

> A programme of life skills activities can improve employability and wellbeing outcomes.

7.2 What happened

Optivo initiated a two-and-a-half year RCT project in 2018 to test the impact and effectiveness of Health Works, a new 'life skills' programme, at achieving employability and wellbeing outcomes of interest.

The trial was originally intended to test the new programme against Optivo's business as usual employment support and encompassed two groups:

- Control: this group were offered the business as usual employment support.
- Treatment intervention: this group were offered the opportunity to participate in the Health Works programme.

During the research project, circumstantial and environmental factors such as post-merger restructure and staff turnover, affected the capacity of the business as usual employment support team which meant the trial was unable to continue in its original format. Optivo reviewed the opportunities and commenced a new trial focusing on the Health Works programme.

The RCT was restarted in 2019 and this second trial focused on a single component of the programme - a confidence building course. Both the control and treatment groups were able to participate in the Health Works programme. This trial had two groups:

- Control: this group offered the opportunity to participate in the Health Works programme.
- Treatment intervention: this group offered the opportunity to participate in the Health Works programme and a specific confidence building course.

7.3 Findings

Ongoing issues with recruitment had implications for the sample size, and the research model was revised in response to a number of challenges encountered and an evolving business model and delivery structure. Therefore, there were no conclusive findings from this trial.

7.4 Capability, limitations and opportunities

7.4.1 Mindset

The trial has provided an opportunity to build research capability within the Social Impact team, specifically around the theory and practical application of RCTs.

Opportunities to optimise capability

Research design is critical and future trials can be improved by building monitoring and evaluation time and processes into organisational time and capability resources. Assessing feasibility on an ongoing basis and

from the outset will support this. As will using a master schedule of research and subject matter, evaluation sequencing and timings for the duration of the project.

7.4.2 Environmental circumstances

Trial design must anticipate and plan for human behaviour which is inherently noisy. More vulnerable participants may have chaotic or complex factors, which can disrupt how information is collected and how participants interact with the study.

This trial has highlighted the need to adapt to the chaotic lives of participants. The nature of support services offered by housing providers means that we are often working with those most in need. This introduces sensitivities about withholding a service and a different approach may be required for different service user groups.

Opportunities to optimise capability

Social housing service providers are experts in working with vulnerable clients and this is a strong capability. In specific instances, introducing an assessment to determine a participant's suitability for the trial prior to the randomisation stage is recommended to isolate and remove people in need of intensive support from the trial at the outset.

7.4.3 Inter/intra team collaboration

Staff turnover and restructure is a fact of life for our sector. The Health Works programme was a new programme at the pilot stage when the RCT commenced and changes in structure and operations were anticipated. However, the trial was fundamentally impacted by the scale of change.

Opportunities to optimise capability

Handover processes should be a feature of the original design for RCTs and the language and narrative regarding the trial to frontline staff - e.g. what, why and how as well as trial progress is critical and would also benefit from guidance from colleagues in the communications team.

8 Orbit

8.1 What was the trial testing?

The trials were all based on the hypothesis:

> The new intervention or offer would improve processes or outcomes for residents and the business.

8.2 What happened

Orbit initiated a programme of applying RCTs to test new interventions and business processes over the 2019-2020 financial year.

The first trial aimed to test the impact of a Tenancy Intervention Officer on the eviction rates and rent arrear levels for Orbit residents. The trial ran between February 2019 to February 2020 and had two groups:

- Treatment group: Orbit residents living in a specific area who were offered support from the Tenancy Intervention Officer.
- Control group: Orbit created an artificial control group (as opposed to one that was randomly assigned) that comprised of 15 local authority areas that have much smaller pockets of Orbit residents, but similar rent arrear and eviction levels to the treatment area.

The second trial aimed to test the effectiveness of Pay Plan, an organisation that offers independent debt advice and support to improve residents' account balances. Orbit compared account balances for residents at the point of completing engagement with Pay Plan between August 2018 and August 2019, and subsequently at three and six months from that baseline point. The trial had two groups:

- Control group: this group comprised of residents who could have been referred to the Pay Plan service, but hadn't, and had similar account balances at baseline to the treatment group.
- Treatment group: this group received the Pay Plan support.

A total of 204 residents were involved with the trial,

8.3 Findings

The Tenancy Intervention trial found that having a dedicated support officer had a direct and positive impact on eviction rates.

The Pay Plan trial found that the intervention had a direct and positive impact on resident's account balances six months after the engagement.

8.4 Capability, limitations and opportunities

8.4.1 Mindset

The individual driving the innovative programme of RCTs at Orbit actively teamed up with the Business Improvement team to understand and identify opportunities to use RCTs across the business to test the effectiveness of services and inform evidence-led strategy. With a keen interest and objective to deliver a series of RCTs internally during the 2019-2020 financial

year, the research lead brought the Business Improvement team on board with applying the methodology, and ultimately different departments approaching the BI team for support to enhance their services.

This trial showed the dependence on clearly defined ambitions and language ahead of the trial starting.

8.4.2 Environmental circumstances

As the trials focusing on the Tenancy Intervention Officer and the Pay Plan support offer have demonstrated, it is possible to run an RCT even where there may be sensitivities about withholding a service intended to prevent evictions or improve rent arrears.

Opportunities to optimise capability

Creating a bold culture and a 'freedom to fail' helps make RCTs more innovative and produce results that better underpin how services can be re-imagined.

8.4.3 Inter/intra team collaboration

Embarking on an RCT has brought benefits beyond the creation of evidence: it has provided opportunities to do new things and work differently. For instance, it has provided opportunities for research and policy teams to engage and collaborate with teams they wouldn't ordinarily work with.

Opportunities to optimise capability

As with service delivery, there is an imperative for social housing providers to recognise the interdependencies of different service teams from a customer perspective. In addition to data and evidence, RCTs highlight these interdependencies in new ways.

8.4.4 Data

Orbit found the programme of RCTs useful for examining how data is collected and used and how insights from data are applied within the organisation. Designing and implementing different trials in different parts of the business has identified gaps and ambiguities with how data is stored and processed internally.

Opportunities to optimise capability

There is an emerging recognition of data as the foundations of all business strategy and improvement; our sector is behind the curve in this respect. With over 900 downloads and 130 implementations, the UK Housing Data Standard has significantly moved this forward.

9 Town & Country Housing, Clarion Futures and Clarion Housing

Clarion Housing was involved in two trials in 2019. One of these was delivered by the Clarion Futures team in collaboration with Town & Country Housing. The second one was delivered internally by Clarion Housing.

9.1 What was the first trial testing?

The first trial was initiated by Town & Country Housing, who determined the focus and hypothesis:

> Personalised communication from a peer will enhance employment outcomes.

9.2 What happened

The trial commenced in 2019. The aim was to test the effectiveness of personalised communication from a peer role model as a bolt-on to business as usual employment support, with the aim of supporting people to achieve employment outcomes.

Residents were randomised into two groups:

- Control: this group received the business as usual employment support.
- Treatment intervention: this group received the bolt on role model communication in addition to the business as usual employment.

9.3 Findings

During the research project, the sample size was affected by challenges with referrals to housing association partners, as well as circumstantial and environmental factors such as COVID-19. The research model was revised in response to a number of challenges encountered and an evolving business model and delivery structure. Therefore, there were no conclusive findings from this trial.

9.4 What was the second trial testing?

The second trial, which involved Clarion Housing, was based on the hypothesis:

> Communications using nudge techniques can enable residents to understand a planned fire safety project.

9.5 What happened

This short trial took place in 2019. The aim was to test the effectiveness of using nudge techniques, specifically the use of an image of the resident's property, at communicating information about the planned fire safety works to residents.

There were 165 homes that were accessed for this project. 82 residents were randomly assigned to the control group and the remaining 83 were in the intervention group:

- Control group: this group received the original FAQs
- Treatment intervention: this group received the new version of FAQs with an image of their property.

9.6 Capability, limitations and opportunities

9.6.1 Mindset

Running two trials helped pioneer RCT methodology with more than one organisation. As anticipated, this emphasised the benefits of combining resources and access to samples, but also the challenges of both internal processes coordinated with a different partner set-up and culture.

Opportunities to optimise capability

There was a lot of effort and willingness from the partners to make the trial work. Both organisations invested time and resource in to progress the trial and undertake the roles they had expected at outset of trial.

In multi-partner trials, it is important that all partners agree with the hypothesis and focus of the trial before it starts. It is also critical to account for and agree a common process that works for all parties involved and their operational models and services. The use of a commonly agreed trial protocol document, detailing the interventions being tested, rationale, data requirements and a visual of the trial process, is useful to ensure that all partners understand the purpose and focus for the trial.

It is also important that all partners and their sponsors recognise that this is part of the job rather than an additional requirement. It is useful to include in the business case and findings that the purpose of the trial is often to improve efficiencies and so is worth the time spent. This is particularly important across departments and should be visible for front-line staff.

It is useful to brief leadership and staff teams ahead of the trial on objectives and expected benefits. The exercise is to understand how to make service delivery better and more effective. Don't underplay the reality that these trials are to help staff in their roles and understand the needs of their customers better.

RCTs and other research methodologies are useful in creating a mindset and culture of converting data to decisions which can be replicated and applied in wider change programmes and continuous improvement campaigns.

9.6.2 Environmental circumstances

Working with another housing provider introduces additional and different pressures and priorities. In practical terms, this has led to delays in getting organisational agreement for the trial, getting collective agreement on roles and responsibilities for service delivery and data collection for the purposes of the trial. Sensitivities over data

sharing and the many organisational layers and sharing agreements require re-thinking and simplifying. This has led to the overall project taking much longer to design and implement than anticipated. Challenges around communication with multi-party trials can affect the overall progress of the project.

9.6.3 Inter/intra team collaboration

The in-house fire safety communications trial has proved to be more straightforward, with the research and policy team able to take ownership and control over decision making. It has also been quicker to design and deliver.

Opportunities to optimise capability

The need to outline roles and responsibilities for each partner, be open amount of resource each partner can provide and be transparent about potential delays in particularly important to take into account.

The multi-partner trial has provided both organisations with key learning about partnership working, for both service delivery and application of research projects. The need to outline roles and responsibilities for each partner and be transparent about potential delays has been particularly important.

Many of the issues relating to data collection processes and sharing were only uncovered through the processes of setting up and running the RCT.

10 Continuing the conversation

On one end of the continuum is the rigour of robust empirical research; at the other is the reality of the social housing setting. We need to be aware of the limitation of circumstances and and recognise the nuances of the environment in which we're trying to apply the RCT methodology.

These real-life case examples of RCTs in social housing illustrate the agility and flexibility of RCTs as a research method and demonstrate that it is possible to undertake a robust RCT in a social housing context.

Housing providers are using RCTs to test the effectiveness of a wide variety of services and business processes and assess the impact for residents as well as the business. Community investment interventions, specifically employment and wellbeing focused services, and the application of nudge techniques to different modes of communication with residents, have featured heavily in the trials delivered by the seven housing providers featured in this report.

Trials testing employment interventions have tended to experience issues with recruitment and sustained engagement and have also been longer projects. Trials looking at introducing an adjustment to existing business processes tended to be more successful at achieving sample sizes and data to make significant statistical assessments. These trials also tended to be shorter and more straightforward in order to get stakeholder buy-in and be implemented. What is common amongst all of these housing providers is the drive to use evidence.

The use cases highlight the complexities of designing and delivering an RCT and implications of environmental factors such as organisational restructure, staff turnover and recruitment challenges. This report has been configured to set out the description and findings of the trials, consider what has worked well and identify opportunities to optimise both organisational capability and the RCT methodology to enhance what can be achieved from RCTs in the social housing context in the future.

We hope that these two reports encourage housing providers to consider the use of RCTs as a complementary methodology to their existing research methods, as well as enable learning from real life case examples to refine the methodology and optimise what can be achieved.



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