

Just a Phone Call Away: Is Telephone Advice Enough?

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Journal of Social Welfare and Family Law (In press), Volume 33, Issue 4

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Over the last two decades the public sector has embraced new modes of service delivery, with a shift away from traditional face-to-face provision towards Internet and telephone based advice and information. While telephone provision has played an increasingly significant role in overall provision of legal advice in recent years, there has been limited empirical research which compares telephone to face-to-face services. Utilising administrative data from the Legal Services Commission (LSC) on legal aid services for housing problems, this paper explores the similarities and differences between the two delivery modes. We examine the client groups and matter types which tend toward particular channels of advice, the relationship between mode of advice and the outcome of cases for clients and the relationship between mode of advice and advice time. We find that there are significant differences in mode of advice among clients with particular demographic characteristics, with clients under the age of 18 and clients living with an illness or disability more likely to use face-to-face services. Our findings also suggest differences among the types of problems being addressed by telephone based services. On the surface there are small differences between modes of advice and the proportion of cases which lead to a substantive benefit outcome. However, once we disaggregate the data and investigate specific outcomes, there are pronounced differences in the outcomes achieved. Having controlled for key variables such as client demographics, case type and particularly stage reached, we find that telephone advice takes, on average, 14 minutes longer than face-to-face advice (compared to an hour less when examining the raw data). The implications of these findings for the future development of telephone based services in light of current policy in legal services are discussed.

Keywords: legal aid, mode of access, housing problems, telephone advice, civil justice

Introduction

Modernisation in Legal Services

Following their electoral success in 1997, the Labour Government began an ambitious program of reform. The strategy, set out in *Modernising Government* (Cabinet Office 1999), affected all aspects of the public sector, including the delivery of public services. At its core was a desire to shape services to create “new, efficient and convenient ways...to [enable citizens to] communicate with government and to receive services” (Cabinet Office 1999: 45). The multiple advances in communication technology that had occurred in the preceding decade enabled the government to set ambitious targets for delivering services through electronic means. The then Lord Chancellor’s Department (now the Ministry of Justice) recognised that publicly funded legal services would fall within the remit of the modernisation agenda, stating that “[i]n the information age...the public will come to expect services, both public and private, to be delivered through technology. The civil justice system will not be immune to these changes and so must surely adapt” (Lord Chancellor’s Department, 1999). Subsequent years witnessed the steady development of new delivery channels for legal information and advice. The Legal Services Commission (LSC) oversaw the establishment of a telephone advice pilot, the forerunner to the current Community Legal Advice (CLA) telephone service, and advances in digital access to information through television and the Community Legal Advice website (formerly known as JustAsk!). Other innovative approaches to service delivery were funded through the Lord Chancellor’s Department Partnership Initiative Budget, such as legal services delivered using video link technology (O’Brien & Seymour, 2005).

The current Coalition Government has continued to emphasise the modernisation of public service delivery, with initiatives, which “continue or accelerate activities to implement policies and strategies that began many years ago” (National Audit Office, 2011: 20). Adopting a ‘digital by default’ policy with regards to outward facing services (Cabinet Office 2010), it anticipates that traditional access modes will be needed only in exceptional circumstances. Even in these cases there is no presumption of a need for face-to-face provision but rather a requirement for assisted communication channels such as telephone assistance and video conferencing (Deloitte, 2011). In the legal advice sector, recent proposals for reform indicate a step-change from previous strategies, which whilst championing the telephone as a medium through which advice could be obtained, continued to emphasise the need for channel (or access) plurality (see for example Lord Chancellor’s

Department, 2000; Varney, 2006). The recent publication of the Legal Aid, Sentencing and Punishment of Offenders Bill (HC Bill (2010-2011) [205]) demonstrates the current government's commitment to the development of a single telephone gateway for legal aid. Although the proposals have been modified following consultation, with the telephone gateway mandatory for only four categories of law, there is an expectation that the gateway will be expanded to other categories later, with all but limited exceptions¹ (Ministry of Justice 2011a).

Justification of a Move Toward Telephone Advice

The move to a single gateway was based upon the assessment that “[t]oo often, those seeking civil legal aid find the process time-consuming, inconvenient and stressful...the system [needs redesigning] so that it caters much better for the needs of its clients, makes the most of advances in technology and acknowledges changes in the structures of our lives. It must also provide the value for money that is essential in view of the need to reduce legal aid expenditure.” (Ministry of Justice 2010b: 82). The assumption that shifting provision from face-to-face to telephone advice results in costs savings, appears to be based on findings from an early evaluation that shows telephone advice has shorter advice times than face-to-face provision and a review of existing data from the Legal Services Commission that shows telephone advice costs on average 45 per cent less than face-to-face advice (Legal Services Commission 2004, Ministry of Justice 2010a). It is true that initial evaluations of telephone advice credited it with the potential to provide planned, targeted advice that could act as an alternative to face-to-face advice in the majority of civil law cases (Steele & Seargeant 1999). Yet the promise that telephone advice heralded was not unequivocal and even Steele and Seargeant's (1999) enthusiastic appraisal of telephone services indicated an on-going need to safeguard client access to ‘occasional’ face-to-face services. Existing research, although scarce, has suggested that telephone advice may offer advantages to those who live in rural areas, those who experience mobility issues, those who are time constrained, those with caring responsibilities and those without private transport (Pearson & Davis 2002). Whilst immediacy and convenience are highlighted as advantages of telephone services (Legal Services Commission 2004, Erlich, Lanier & Davis 2006, Pearson & Davis 2002) these may not be realisable for clients who find it difficult to communicate their advice needs, who may find it difficult to use a telephone in a private setting, or for whom operating hours are not suitable. Such barriers and disadvantages are addressed in greater detail below.

Overall, little reliable evidence appears to exist to support claims that telephone advice better caters to the needs of clients, enhances ease of access and/or delivers value for money. Thus, much of our knowledge regarding how willing clients are to obtain advice via the telephone, the barriers that they may face in doing so, and their success in understanding and implementing the advice that they obtain, is informed only by a limited number of policy orientated service evaluations².

Client Characteristics and Preferences for Telephone Advice

There is limited evidence on the preferences of clients specifically in the context of legal advice. While an evaluation of National Debtline found that two-thirds of clients surveyed preferred telephone advice to face-to-face services (National Debtline 2007), only 23 per cent of clients surveyed as part of an evaluation by the LSC indicated a preference for advice by telephone (Legal Services Commission 2004).³ In a broader study conducted by Age Concern and Help the Aged (2009) the findings on client preferences were more pronounced, with only 2 per cent of those aged 45 and over who believed they would need information, advice or support in the next five years, selecting a national helpline as their first choice for advice. Interestingly, age also appears to play a role in relation to Internet use to obtain information or advice legal problems, with use notably low amongst young people, despite high levels of access (Denvir *et al.* 2011). In areas outside legal advice, there is some evidence that user preference may be dictated by the nature of the problem for which advice is being obtained. Research exploring customer preferences for different modes of service delivery in the banking sector suggests that the telephone (and to a lesser extent the Internet) are preferred advice channels for gathering information, with the majority of customers indicating a preference for attending a branch in-person for the sale-stage of the process (Booz Allen Hamilton 2003). Consumer behaviours such as these may be translatable to the legal advice sector, demarcating the point at which face-to-face advice is sought for more involved resolution processes. This contention is supported by findings in the Community Legal Advice Centre setting where clients seek advice in a face-to-face setting for complex problems which often have reached crises point (Buck *et al.* 2010).

The characteristics of existing users of telephone advice offer some insight into the preferences of specific client groups as well as highlighting the barriers that some users may face. Pearson and Davis (2002) for example, showed that legal hotline users were more commonly female, English-speaking, middle aged, with children under the age of 18, although there was diversity across education level, ethnicity and source of income. Similar

characteristics were identified in the LSC's 2004 study, albeit with some notable differences, especially in respect of Black, Minority and Ethnic (BME) clients, who it was found "(were) happy to use the telephone to obtain advice" (Legal Services Commission 2004: 19). This finding may be explained by the fact that the study included a pilot service delivering advice on discrimination issues which had a high proportion of BME clients, with more than half the BME clients included in the evaluation drawn from this service⁴. While the characteristics of existing users of telephone advice provide a guide to client preferences, it may also provide evidence as to the groups more likely to be aware of telephone services. Research by Hasluck *et al.* (2005) in relation to advice about employment found that client's knowledge of face-to-face services was much higher than their awareness of other delivery channels such as the Jobcentre website or 'warm phones'.⁵

Barriers to Telephone Advice and Assessment of its Utility

Research from both the health and legal fields suggest that telephone provision may put some groups at risk of service exclusion (Pearson & Davis 2002, George 2002, McKinstry & Sheikh 2006, Griffith & Burton 2011). BME users are considered to be one such 'at risk' population given potential language barriers. Communication barriers may also act as an impediment to those clients who have a hearing or speech impairment. In health services, such barriers result in discouraging telephone as the first point of contact for some groups (McKinstry & Sheikh 2006). Unlike barriers such as call costs and phone access, which have largely been mitigated by the use of 'warm phones' (Hasluck *et al.* 2005) and 'client call back' services (Pearson & Davis, 2002), communication barriers arising from other causes may prove more difficult to overcome.

Beyond issues of communication, issues of comprehension and understanding may present as problematic for some client groups. Many of the assumptions underlying telephone advice efficacy are based on a belief that the advice skills used in a face-to-face setting are readily transferrable to the telephone (Crouch & Dale 1998). This transferability is considered important as a key mechanism by which to ensure that the caller will comprehend, absorb and act upon the advice they are given (Munro *et al.* 2001, Leclerc *et al.* 2003). Research evidence from health studies suggests that there may be problems with communication and comprehension for advice delivered by telephone (Munro *et al.* 2001) and with client's recall of the advice they have been given (Leclerc *et al.* 2003). However, a recent study suggested that patients had good levels of recall for important components of both face-to-face and telephone advice (McKinstry *et al.* 2011). In the legal advice field,

Pearson and Davis' (2002) evaluation reported good rates of comprehension overall, but identified that nearly half of Spanish-speaking callers had not understood the advice they had been given. The 2004 study by the LSC found that 65 per cent of clients reported that the advice they were given was 'very easy' to follow (Legal Services Commission 2004). Unfortunately this figure did not disclose how many of these clients originated from ethnic minorities, their level of educational attainment, nor the type of problem or complexity of the problem they were experiencing at the time they sought telephone advice. Evidence from Erlich, Lanier and Davis (2006) suggested that clients may not act on telephone advice because they do not remember what to do, feel implementing advice is too difficult and/or do not understand the advice they have been given.

It is also recognised that impediments to obtaining advice persist beyond the initial contact, impacting upon the implementation of advice, particularly for those groups who are identified as needing greater guidance and support (Buck *et al.* 2008, Echols & Gordon 2003). In Pearson and Davies (2002) US Hotline evaluation report, 42 per cent of all respondents across five hotline sites indicated that their disability or illness would make it difficult to execute the telephone advice they had been given, 33 per cent indicated their transportation difficulties would remain a barrier, 12 per cent indicated language difficulties and 16 per cent said that their schedule would remain a problem (Pearson & Davis 2002: 24). When it came to problem-resolution, those with language, transport, and scheduling difficulties reported unfavourable outcomes with greater frequency.

Importantly, differences in outcome for telephone advice may not simply be a result of client inaction, misunderstanding or confusion, since little is known about the content of the advice provided and the outcomes which result. This problem has been acknowledged in respect of telephone health advice (McKinstry & Sheikh, 2006; Bunn *et al.* 2009) although some evidence has been forthcoming (SWOOP 1997; Lattimer 1998; Poole 1993). In the field of legal advice, evaluations of service performance have often cited results from customer satisfaction surveys as evidence of service utility. Commonly, such surveys report high levels of satisfaction amongst users of telephone legal advice services (LSC 2004, Pearson & Davis 2002, National Debtline 2006). In respect of legal advice provided under contract to the LSC, utility is measured in part by the case outcomes achieved, with outcomes being specified as providing 'substantive' or 'non substantive' benefit to clients. As one of a number of Key Performance Indicators (KPIs), providers are required to reach threshold targets for the proportion of cases in which a 'substantive' benefit is achieved.⁶ Analysis by the Legal Services Commission comparing the proportion of cases in which a substantive

benefit was achieved showed no systematic differences between telephone and face-to-face provision. In the categories of debt and welfare benefits, clients were more likely to gain a substantive benefit from a face-to-face service whereas in the family and education categories clients of the telephone service were more likely to gain a substantive benefit (Ministry of Justice 2011b).

Though these assessment tools represent a departure from customer satisfaction surveys, they do not escape criticism. Smith (1990) elucidates these concerns in noting that where service evaluations are reliant upon success against KPIs it becomes difficult to define less tangible outcomes, to provide consistency of measurement between KPIs and to ensure that consistent thresholds are reached before a KPI is said to be fulfilled. Accordingly, KPIs do not necessarily lend themselves well to comparisons across services in different locations, nor presumably, services which deliver via different modes. Overall, there is little reliable comparison of the utility of telephone and face-to-face advice in legal services.

Aims and Hypotheses

Telephone advice has been a fundamental part of legal advice delivery in some subject areas for over two decades, with its prominence set to increase as a consequence of reforms to publicly funded legal services. Despite this, as highlighted by respondents to the recent consultation on legal aid reforms (Ministry of Justice 2011a), there is a notable absence of research comparing alternative delivery modes, and the implications of increased reliance on telephone based services. .

Utilising administrative data from the Legal Services Commission (LSC) on legal aid services, this paper aims to provide detailed empirical evidence on the differences between telephone and face-to-face provision of legal advice in the category of housing. We examine the client groups and matter types which tend toward the two channels of advice; the relationship between mode of advice and the outcome of cases for clients; and mode of advice and advice time of cases.

On the basis of the findings detailed in Pearson and Davis (2002), Buck et al. (2010), McKinstry and Sheikh (2006) and Denvir et al. (2011) it is hypothesised that those using face-to-face advice services will display demographic characteristics indicative of higher levels of social deprivation and social welfare need, compared to those utilising telephone based services. Secondly, based on the findings of the LSC (2004), it is hypothesised that face-to-face and telephone advice will produce broadly comparable outcomes for clients.

However, given the concerns highlighted by Smith (1990) about the use of KPIs for comparative evaluation it is hypothesised that differences between the two modes will become more apparent when examining disaggregated outcome measures. Thirdly, on the basis of literature highlighting communication difficulties specific to telephone advice (Munro et al. 2001, Leclerc et al. 2003) it is hypothesised that when demographics, problem (matter type) and stage are controlled for, telephone advice is less time efficient than face-to-face advice.

Methods

Data

Data for this paper are derived from the records of the LSC and cover cases conducted under the Controlled Work Scheme for which administrative data was submitted in the 2009/10 financial year.⁷ The dataset contained records for 131,618 housing matters which were delivered under contract by solicitors and Not for Profit providers.⁸ Of this total, 77.5 per cent were delivered face-to-face and 22.5 per cent via telephone services. Administrative data for face-to-face cases were derived from the LSC's Closed Matter Reporting Form (CMRF). Data for the cases delivered via the Community Legal Advice specialist telephone services were collected by First Assist, on behalf of the LSC. The data fields included basic client demographics, supplier information and case details such as case type, duration, outcome and advice time.

Client demographic data included gender, age, ethnicity and illness and disability status. For the purposes of this paper ethnicity data was classified into seven categories, namely, 'White British', 'White other', 'Black', 'Asian', 'Mixed', 'Other' and 'Unknown'. Data on illness and disability were collapsed into four categories, 'none', 'physical illness or disability' which comprised physical or sensory impairment and long term illness, 'mental illness or disability', which comprised mental health illness, learning disability or cognitive impairment, and 'unknown/other' which included clients who were not willing to provide information.

The types of cases for which providers have delivered legal advice were captured in the data by matter type labels. These categories are specific to subject category covered by the Legal Help scheme and comprise two parts, a Part I category which reflected the most significant legal issue dealt with during the case, and a Part II category which described the status of the main person involved in the case as it related to their main legal issue; for

example, the housing tenure status of the client, or the type of landlord. In the housing category, there were 12 Part 1 categories and eight Part II categories. Together the two categories provided a description of the case type.⁹

All case records also contained data on the stage reached in the case. This category described the highest level of assistance provided to the client by the provider. There are four stage-reached categories in the data, namely ‘first meeting’, ‘further work’, ‘putting the case for the client’, and ‘representation at court or tribunal’.¹⁰

The administrative records also contain information regarding the outcome achieved for the client in all cases. Only one category is recorded for each case and providers are advised that if more than one applies the one which appears to be the most significant for the client should be selected. There are 13 possible outcome categories for housing cases. For the purpose of this paper, similar outcomes have been grouped together, for example, the three categories relating to client receiving damages, property or a payment have been grouped and relabelled ‘receipt of property/damages’ so that the total number of outcomes reported has been reduced to 10. Further, outcome categories were also redefined as a binary variable in line with the LSC’s notion of substantive benefit.¹¹

Analysis

First, a binary logistic regression model¹² was fitted to test the influence of matter type (1 and 2) and social and demographic characteristics on mode of advice (telephone vs. face-to-face). Social and demographic characteristics included gender, age group, ethnicity and illness or disability. Predictors were entered simultaneously in the model as main effects only. Each explanatory variable has a reference category, to which other categories are compared. For example, in the case of ‘ethnicity’, each ethnic group is compared to ‘White British’ (the reference category). Reference categories can be identified by the fact that they have an estimate of zero and no standard error in the output tables. Positive estimates indicate an increase in the likelihood of using telephone rather than face-to-face advice compared to the reference category, while negative estimates indicate a decrease.

Second, a multilevel binary logistic regression model was fitted, using MLwiN (Rasbash *et al.* 2009a), to explore the relationship between matter type (1 and 2), stage reached and social and demographic characteristics on whether or not the case resulted in ‘substantive benefit’. A multilevel model (Goldstein 2011) was used in order to correctly model the hierarchical structure of the dataset. In the current dataset, cases were nested within advisers and a random intercept model was fitted, allowing the probability of substantive

benefit to vary by adviser (i.e. acknowledging that certain advisers were more or less likely to deliver substantive benefit). There are a number of consequences associated with not accounting for clustering, including underestimation of standard errors associated with regression coefficients (Rasbash *et al.* 2009b). Predictors were entered in the model as main effects, though the interaction between matter type 1 and mode of advice was also entered to explore to the extent to which variations in substantive benefit by mode might vary by type of housing issue. Estimates and standard errors can be interpreted in much the same way as for standard single-level logistic regression. The model was then followed by more detailed description of outcomes by mode of access, breaking down substantive and non-substantive benefits into their constituent outcome categories. This aimed to determine whether particular modes of advice were associated with specific outcomes more often than others.

Finally, to model advice time a generalized linear model was used, implemented using STATA (StataCorp 2009). The generalized linear model (McCullagh & Nelder 1989) is a generalisation of ordinary least squared regression. It consists of three elements; a probability distribution from the exponential family, a linear predictor and a link function. The model used was a gamma model with an identity link. The gamma distribution function was chosen since advice time (as with cost data, e.g. Barber & Thompson 2004, Montez-Rath *et al.* 2006) can only take positive values and is highly skewed. This is reflected by the gamma distribution (e.g. see Hardin & Hilbe 2007). The linear predictor incorporates information about the independent variables into the model. The link function provides the relationship between the linear predictor and the mean of the distribution function. In this case we used an identity link which is an attractive option since interpretation of the coefficients remains unchanged from a standard ordinary least squared model (see Barber & Thompson 2004, for a discussion). Robust standard errors were calculated since variance estimates were adjusted for within-cluster correlation in advice time as a result of suppliers (e.g. see Williams 2000). Again, each explanatory variable had a reference category, to which other categories are compared. Positive estimates indicate an increase in advice time, compared to the reference category, while negative estimates indicate a decrease. Since an identity link was used, estimates relate to advice time changes in minutes.

In all models, statistically significant findings (i.e. a p-value less than 0.05) are indicated in bold in the statistical output tables.

Results

Determinants of Mode of Advice

Overall, for 131,608 cases, clients received telephone advice for 29,657 (22.5%) and face-to-face advice for 101,951 (77.5%). The following analysis explores some determinants of mode of advice¹³. Table 1 shows the binary logistic regression model predicting mode of contact for housing problems on the basis of matter types (1 and 2) as well as social and demographic characteristics.

Table 1 Binary logistic regression model of mode of contact

Variable	Level	Estimate	Standard error
Constant		-2.21	0.10
Age group	Under 18	0	-
	18-24	0.71	0.10
	25-34	0.68	0.10
	35-44	0.56	0.10
	45-54	0.58	0.10
	55-64	0.64	0.10
	65-74	0.61	0.10
	75+	0.77	0.12
Ethnicity	White British	0	-
	White other	0.15	0.03
	Black	0.07	0.02
	Asian	0.00	0.04
	Mixed	0.62	0.05
	Other	0.29	0.03
	Unknown	-0.03	0.03
Gender	Female	0	-
	Male	-0.01	0.01
Illness/disability	None	0	-
	Physical	-0.35	0.02
	Mental	-0.89	0.03
	Unknown/other	-0.39	0.02
Matter type 1	Homelessness/threat of homelessness	0	-
	ASBOs – Magistrates/Crown Court	1.68	0.20
	Housing benefit	-1.25	0.08
	Anti-social behaviour	1.19	0.04
	Landlord and tenant	1.50	0.03
	Possession – mortgage	0.47	0.04
	Other	0.85	0.03
	Possession – other	0.43	0.04

	Re-housing	0.02	0.04
	Disrepair	0.93	0.03
	Possession – rent arrears	0.67	0.03
	Harassment/unlawful eviction	0.51	0.05
Matter type 2	Private landlord	0	-
	Client has other social landlord	-0.71	0.02
	Client is homeless	-0.36	0.04
	Client is landlord	-0.67	0.20
	Client has NASS accommodation	-1.12	0.24
	Other	0.37	0.03
	Client is owner occupier	0.54	0.04
	Client has public landlord	-0.49	0.02

For age, compared to under eighteens, there were significant increases in the likelihood of telephone advice for all other age groups. In percentage terms, simulated from the model in Table 1 (i.e. keeping other variables in proportions relative to their representation in the dataset as a whole), under 18 year olds would be expected to use telephone advice 11.5 per cent of the time compared to 20.7 per cent for 18-24 year olds, 20.3 per cent for 25-34 year olds, 18.4 per cent for 35-44 year olds, 18.7 per cent for 45-54 year olds, 19.6 per cent for 55-64 year olds, 19.1 per cent for 65-74 year olds and 21.8 per cent for those over 75 years old¹⁴. Looking at raw percentages, the differences between under 18 year olds and other age groups were even greater, as controlling for other variables (e.g. standardising matter types reported) somewhat reduces the impact of age.

For ethnicity, ‘mixed’ and ‘other’ ethnicity clients were significantly more likely to tend towards telephone advice when compared to white British clients (testing the terms in the model; $\chi^2_1 = 187.30$, $p < 0.001$ and $\chi^2_1 = 99.25$, $p < 0.001$ respectively)¹⁵. There were also smaller, though significant increases for white other and black clients. Simulating from the model in Table 1, white British clients would be expected to use the telephone around 18.5 per cent of the time compared to 29.6 per cent for mixed ethnicity and 23.2 per cent for ‘other’ ethnicity clients. Of the social and demographic characteristics available, illness or disability had the greatest impact on mode of advice. Compared to clients with no illness or disability, other groups were all significantly less likely to use telephone advice (testing the terms in the model; $\chi^2_1 = 216.33$, $p < 0.001$ (physical); $\chi^2_1 = 766.24$, $p < 0.001$ (mental); $\chi^2_1 = 272.91$, $p < 0.001$ (other/unknown))¹⁶. Simulated from the model, those without an illness or disability would be expected to use the telephone 22.3 per cent of the time, compared to 16.8 per cent for those with physical ill health, 10.5 per cent for those with mental illness and 16.3 per cent where the client’s illness or disability status was unknown.

There were significant differences in mode of advice between both matter type 1 and matter type 2 groups. For matter type 1, compared to the reference category ‘homelessness/threat of homelessness’, there was a significant reduction in the likelihood of telephone advice for housing benefit cases ($\chi^2_1 = 272.43$, $p < 0.001$), and significant increases for a number of categories, including most notably landlord and tenant issues ($\chi^2_1 = 2385.40$, $p < 0.001$) and ASBOs in the magistrates’ or county court ($\chi^2_1 = 74.41$, $p < 0.001$)¹⁷. In percentage terms, cases of homelessness or threat of homelessness would be expected to utilise telephone advice 12.4 per cent of the time, compared to 3.9 per cent for housing benefit cases, 38.8 per cent for landlord and tenant cases and 43.2 per cent for ASBOs in the magistrates’ or county court. For matter type 2, the highest likelihood of telephone advice was for ‘other’ tenure clients and clients who were owner occupiers (compared to where the client had a private landlord’; $\chi^2_1 = 157.08$, $p < 0.001$ and $\chi^2_1 = 235.74$, $p < 0.001$ respectively¹⁸), with the lowest likelihood where the client had NASS accommodation.

Mode of Advice and Substantive Benefit

Overall, of 131,618 housing problems, advice for 93,485 (71.0%) was said to have resulted in substantive benefit. In simple descriptive terms, telephone advice results in substantive benefit 69.1 per cent of the time, compared to 71.6 per cent for face-to-face advice. However, this does not account for the influence of other variables. Table 2 shows the multilevel binary logistic regression model predicting substantive benefit for housing problems on the basis of matter types (1 and 2), social and demographic characteristics, mode of advice and the interaction between matter type 1 and mode of advice.

Table 2 Multilevel binary logistic regression model of substantive benefit

Variable	Level	Estimate	Standard
Fixed effects			
Constant		1.16	0.08
Age group	Under 18	0.00	-
	18-24	-0.01	0.08
	25-34	0.02	0.07
	35-44	0.04	0.07
	45-54	0.05	0.08
	55-64	0.07	0.08
	65-74	0.04	0.08
	75+	-0.01	0.10
Ethnicity	White British	0.00	-
	White Other	0.00	0.03

	Black	-0.16	0.02
	Asian	-0.17	0.04
	Mixed	-0.07	0.05
	Other	-0.05	0.03
	Unknown	-0.17	0.03
Gender	Female	0.00	-
	Male	-0.02	0.01
Illness/disability	None	0.00	-
	Physical	-0.04	0.02
	Mental	-0.07	0.03
	Unknown/other	-0.13	0.03
Stage	First meeting		
	Further work	-0.13	0.02
	Putting the case for the client	0.38	0.02
	Representation at court/tribunal	1.12	0.04
Matter type 1	Homelessness/threat of homelessness	0.00	-
	ASBOS – Magistrates/Crown Court	-1.01	0.27
	Housing benefit	0.17	0.05
	Anti-social behaviour	-1.16	0.04
	Landlord and tenant	-0.16	0.04
	Possession – mortgage	-0.03	0.05
	Other	-0.41	0.04
	Possession – other	-0.53	0.04
	Re-housing	-0.03	0.03
	Disrepair	-0.91	0.03
	Possession – rent arrears	-0.25	0.03
	Harassment/unlawful eviction	-0.92	0.05
Matter type 2	Client has private landlord	0.00	-
	Client has other social landlord	0.00	0.02
	Client is homeless	-0.25	0.03
	Client is landlord	-0.32	0.18
	Client has NASS accommodation	0.36	0.19
	Other	-0.23	0.03
	Client is owner occupier	-0.04	0.04
	Client has public landlord	-0.12	0.02
Mode of advice	Face-to-face	0.00	-
	Telephone	0.04	0.06
Matter type 1 x mode	Homelessness/threat of. x Telephone	0.00	-
	ASBOs – Magistrates/Crown Court x Telephone	-0.16	0.45
	Housing benefit x Telephone	-0.15	0.19
	Anti-social behaviour x Telephone	1.15	0.09
	‘Landlord and tenant’ x Telephone	0.35	0.07
	Possession – mortgage x Telephone	-0.15	0.08
	Other x Telephone	-0.01	0.07
	Possession – other x Telephone	0.34	0.09
	Re-housing x Telephone	0.15	0.09

Disrepair x Telephone	0.78	0.07
Possession – rent arrears x Telephone	0.06	0.07
Harassment/unlawful eviction x Telephone	0.82	0.12
Random effects		
Provider level variance	1.21	0.03

Neither age nor gender had a significant impact on likelihood of substantive benefit, and while there was some evidence of differences by ethnicity and illness/disability differences were modest in practical terms¹⁹.

Stage reached was strongly related to substantive benefit, with cases reaching ‘further work’ less likely than the reference category ‘first meeting’ to attain substantive benefit ($\chi^2_1 = 34.92$, $p < 0.001$). In contrast, large significant increases in benefit were observed for ‘putting the case for the client’ compared to ‘first meeting’ ($\chi^2_1 = 255.77$, $p < 0.001$) and particularly for cases progressing to representation at court or tribunal ($\chi^2_1 = 749.21$, $p < 0.001$). Controlling for other factors (simulating from the model), substantive benefit would be expected for 65.4 per cent reaching stage ‘first meeting’ compared to 63.0 per cent for ‘further work’, 72.0 per cent for ‘putting the case for the client’ and 82.6 per cent for ‘representation at court or tribunal’. There were also variations by matter type 2 category, with highest percentages with substantive benefit for clients with NASS accommodation, and significantly lower percentages (compared to the reference category ‘client has private landlord’) for cases where the client had a public landlord ($\chi^2_1 = 30.99$, $p < 0.001$) and particularly those with some ‘other’ tenure ($\chi^2_1 = 48.56$, $p < 0.001$) and homeless clients ($\chi^2_1 = 60.52$, $p < 0.001$). There was also strong evidence of clustering in the likelihood of substantive benefit adviser, as denoted by the highly significant provider variance term ($\chi^2_1 = 1781.9$, $p < 0.001$).

There was also evidence of differences in substantive benefit by mode of access for different matter type 1 codes. For cases of homelessness or the threat of homelessness, differences by mode were small ($\chi^2_1 = 0.48$, $p = 0.49$), though significant increases in substantive benefit with telephone advice were observed for possession (other) cases ($\chi^2_1 = 13.13$, $p < 0.001$), landlord and tenant cases ($\chi^2_1 = 26.21$, $p < 0.001$), disrepair ($\chi^2_1 = 113.48$, $p < 0.001$), harassment or unlawful eviction ($\chi^2_1 = 44.41$, $p < 0.001$) and particularly for anti-social behaviour ($\chi^2_1 = 157.43$, $p < 0.001$). The interaction between mode of advice and matter type 1 in substantive benefit is illustrated in Figure 1, controlling for other variables by simulating proportions corresponding to their representation in the dataset as a whole. As

shown, telephone advice was comparable to face-to-face advice in substantive benefit for the majority of matter types and attained a higher percentage for the remainder.

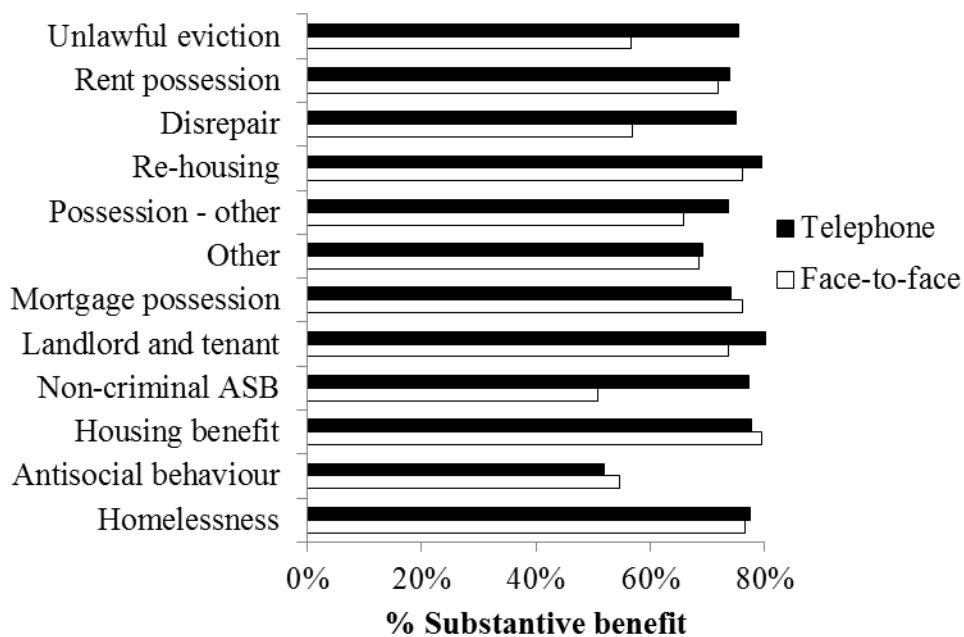


Figure 1 Substantive benefit by matter type 1 and mode of access, simulated from the model in Table 1.

How Substantial is Substantive Benefit?

The analysis in Table 2 and illustrated in Figure 1 does not tell a complete picture regarding outcome and mode of advice. The broad definition of outcome as substantive benefit or non-substantive benefit masks considerable differences by mode. Restricting analysis to only cases classed as resulting in substantive benefit, the vast majority of outcomes for telephone advice involved enabling clients to plan or manage affairs (86.6% compared to 40.6% for face-to-face advice). Face-to-face advice had an increase in all other outcome categories including receipt of property or damages (4.1% vs. 0.8%), reduction in liability (2.6% vs. 0.3%), being housed, re-housed or retaining a home (38.2% vs. 7.7%), repairs (3.0% vs. 0.8%), other party action or inaction (9.1% vs. 1.9%) and apology (2.5% vs. 1.9%). Using both substantive and non-substantive outcome categories, Figures 2 and 3 illustrate outcome by mode for two example matter types; homelessness or threat of homelessness (where there was little difference in substantive benefit by mode) and disrepair (where telephone advice resulted in a greater likelihood of substantive benefit).

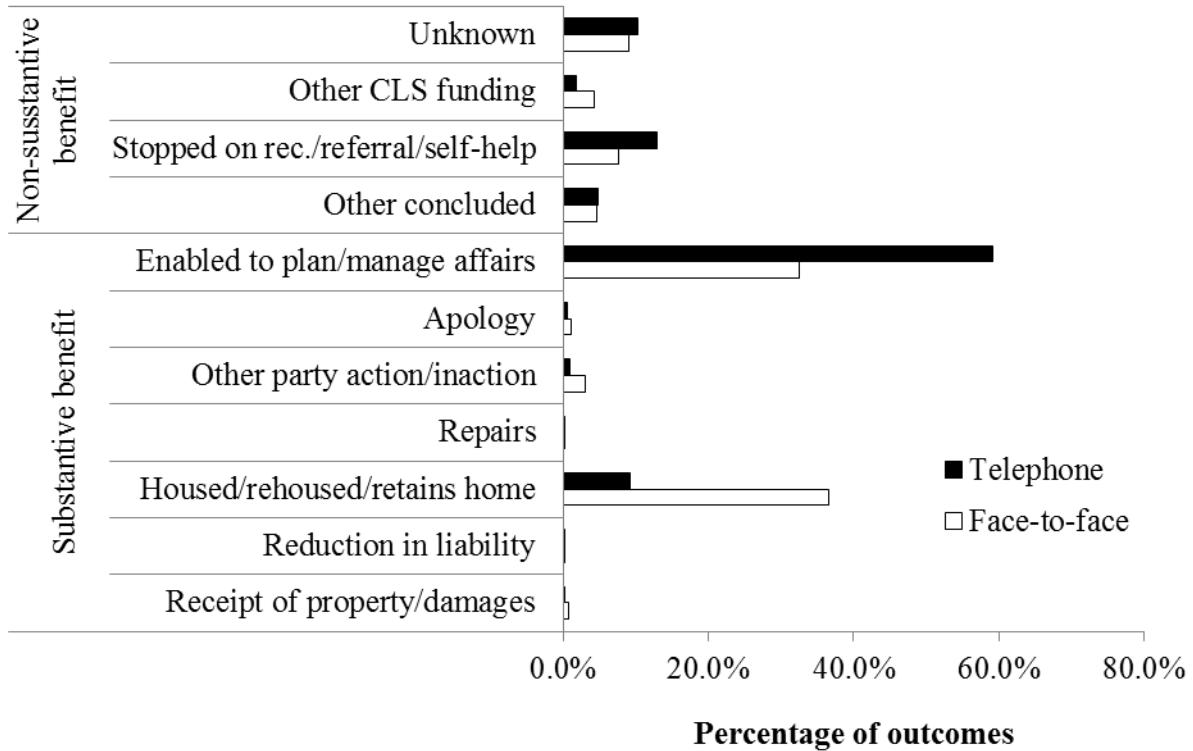


Figure 2 Outcomes for telephone and face-to-face advice in homelessness/threat of homelessness cases

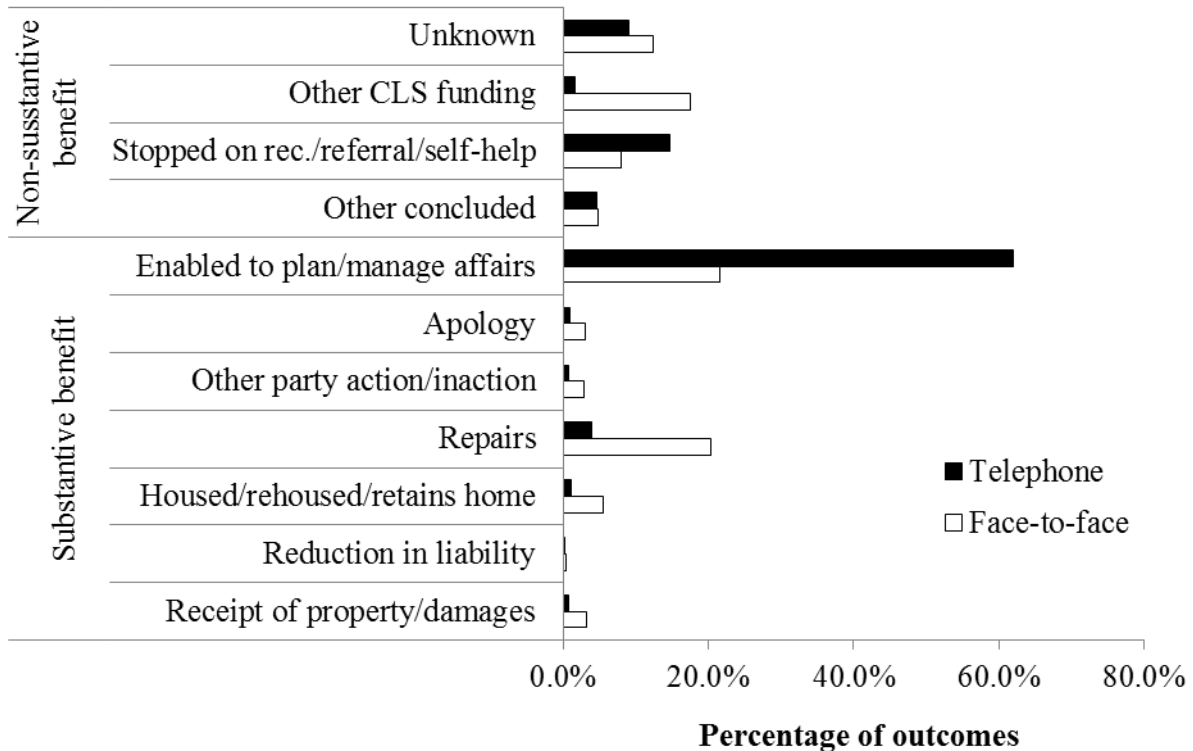


Figure 3 Outcomes for telephone and face-to-face advice in disrepair cases

As can be seen in both figures, telephone advice had far higher percentages enabling clients to plan or manage affairs, while face-to-face advice had a far greater percentage in the

housed/re-housed or home retained category for cases involving homelessness or the threat of homelessness and the repairs category in particular for disrepair cases. The increase in substantive benefit observed for telephone advice over face-to-face advice for possession (other) cases, landlord and tenant cases, disrepair, harassment or unlawful eviction and anti-social behaviour illustrated in Figure 1 was predominantly a consequence of higher percentages of cases referred to other CLS funding for face-to-face advice (as shown for disrepair in Figure 3). Among only those cases where there was no substantive benefit, this outcome accounted for 27.0 per cent for face-to-face advice, compared to 5.6 per cent for telephone advice.

Advice Time for Telephone and Face-to-Face Advice

Without controlling for other variables, telephone advice time was significantly shorter than face-to-face advice time, with a mean duration of 133 minutes compared to 192 minutes for face-to-face advice. However, as shown previously, people and problems tending towards particular modes of advice differ. The following analysis aims to examine determinants of advice time and particularly what impact mode of advice has on advice time having controlled for other key variables. Table 3 shows generalized linear model output, modelling advice time on the basis of matter type (1 and 2), the stage reached, social and demographic characteristics and mode of advice.

Table 3 Generalized linear model of advice time

Variable	Level	Estimate	Standard
Constant		123.51	9.17
Mode of advice	Face-to-face	0.00	-
	Telephone	14.36	6.28
Matter type 1	Homelessness/threat of homelessness	0.00	-
	ASBOs – Magistrates/ County Court	-22.61	9.95
	Housing benefit	-28.02	4.08
	Anti-social behaviour	-23.81	4.10
	Landlord and tenant	-22.58	3.29
	Possession – mortgage	-11.25	3.81
	Other	-23.88	3.03
	Possession – other	-18.00	3.16
	Re-housing	-18.08	4.24
	Disrepair	-14.61	3.33
	Possession – rent arrears	-25.48	3.35
	Harassment/unlawful eviction	-17.08	3.84
Matter type 2	Client has private landlord	0.00	-

	Client has other social landlord	0.23	1.88
	Client is homeless	3.37	3.77
	Client is landlord	-8.73	7.97
	Client has NASS accommodation	2.95	14.36
	Other	-5.65	2.15
	Client is owner occupier	-6.39	2.73
	Client has public landlord	4.78	2.24
Stage	First meeting	0.00	-
	Further work	71.15	5.67
	Putting the case for the client	133.63	7.98
	Representation at court/tribunal	131.55	7.48
Gender	Female	0.00	-
	Male	-2.91	0.85
Age group	Under 18	0.00	-
	18-24	-16.93	9.09
	25-34	-15.62	9.53
	35-44	-12.52	9.77
	45-54	-10.74	10.00
	55-64	-10.53	9.83
	65-74	-8.53	9.93
	75+	-13.39	10.33
Illness/disability	None	0.00	-
	Physical	14.47	2.56
	Mental	21.21	3.34
	Unknown/other	16.21	5.72
Ethnicity	White British	0.00	-
	White other	14.08	4.12
	Black	17.53	4.30
	Asian	16.42	4.00
	Mixed	11.39	3.41
	Other	8.53	11.32
	Unknown	4.34	6.10

Matter type 1 had a significant impact on advice time. In particular, cases involving homelessness or the threat of homelessness resulted in more time than other types of case. There were also some significant differences among matter type 2 categories, though in practical terms these were modest. In terms of social and demographic characteristics, while those under 18 had somewhat longer advice time, differences by age group were fairly small. Similarly, differences by gender were small in practical terms. Those reporting physical ill health had advice time over 14 minutes longer on average when compared to those without an illness or disability ($Z = 5.66$, $p < 0.001$), with a 21 minute increase for those reporting

mental illness ($Z = 6.34, p < 0.001$). Ethnicity also had some impact on advice time, with longer times for ethnic groups other than white British.

Stage reached clearly had the greatest impact on advice time. Compared to 'first meeting', increases in time of 71 minutes were observed for cases reaching 'further work', 134 minutes for cases reaching 'putting the case for the client' and 132 minutes for cases progressing to 'representation at court or tribunal' (all differences were highly significant). Controlling for stage accounted for much of the difference in the impact of mode of advice on advice time between raw data (minus 60 minutes) and having controlled for other variables (plus 14 minutes for telephone advice). If stage is removed from the model telephone advice takes 43 minutes less on average. Essentially, telephone and face-to-face advice differed massively in stage reached, and stage was the major driver of advice time. For telephone advice 84.2 per cent only reach 'first meeting', 12.6 per cent 'further work', 3.0 per cent 'putting the case for the client' and 0.2 per cent 'representation at court or tribunal'. For face-to-face advice these percentages were 17.2, 36.9, 35.9 and 10.0 per cent respectively. Failing to control for stage creates the impression that advice time is far shorter over the telephone which is not the case once stage is considered.

Most importantly, having controlled for other variables, telephone advice no longer took an hour less than face-to-face advice, taking over 14 minutes longer on average for comparable cases, clients and stages reached (testing the telephone term in the model; $Z = 2.29, p = 0.022$).

Discussion

Summary of Results

Overall in 77 per cent of cases legal advice was delivered face-to-face and in 23 per cent over the telephone. However, the proportion using telephone advice was not uniform across people or problems and related to vulnerability and disadvantage. For example, clients who were under eighteen years of age and particularly those with mental health issues were far less likely to use telephone advice. Similarly, matter types such as homelessness and particularly housing benefit issues were far less likely to be associated with telephone advice as were matter type 2 cases where clients were in NASS accommodation. In contrast, telephone advice was far more common for landlord and tenant issues, ASBOs in the Magistrates or Crown Courts and for matter type 2 cases where the client was the owner occupier. Seventy-one per cent of cases resulted in outcomes defined by the LSC as providing 'substantive

benefit', with benefit increasingly likely as case stage progressed to 'putting the case for the client' and particularly 'representation at court/tribunal'. Most importantly, while telephone advice and face-to-face advice were comparable in rates of substantive benefit across the majority of problem types, telephone advice outperformed face-to-face advice for a number of matter types ('unlawful eviction', 'disrepair' and 'non-criminal anti-social behaviour' in particular). However, categorisation of case outcomes on this basis masked fundamental differences between telephone and face-to-face advice. While the majority of substantive benefit outcomes for telephone advice comprised 'enabling clients to plan or manage affairs', more tangible outcomes such as being 'housed, rehoused or retaining a home' in the case of homelessness, or 'repairs' in the case of disrepair were rare, and far more common for face-to-face advice. Similarly for cases with no substantive benefit, referral to 'other CLS funding' was far more common for face-to-face advice. Using raw data, telephone advice took around an hour less than face-to-face advice (192 compared to 133 minutes). Importantly, however, telephone and face-to-face advice differed in distribution of people and problems (as shown in our first model) and most importantly in stage reached (the majority of telephone advice only reached 'first meeting' while face-to-face advice was far more likely to progress through stages). Having controlling for social and demographic characteristics, matter types and most importantly stage reached, telephone advice took fourteen minutes longer on average (for comparable people, problems and stages reached).

As hypothesised, some problem types and demographic characteristics associated with disadvantage were more likely to tend towards face-to-face advice. With respect to age, those aged under eighteen were least likely to use telephone advice. This is in keeping with recent research in relation to the use of Internet advice among young people (Denvir *et al.* 2011) suggesting a preference for face-to-face advice (despite high levels of Internet access) in part as a result of difficulty establishing trust in remote advisers. However, in contrast to findings on older people suggesting they would be unlikely to use national helplines to seek advice (Age Concern/Help the Aged 2009), a relatively high percentage sought legal help over the telephone. In keeping with LSC findings (Legal Services Commission 2004) our results illustrate that ethnicity does not appear to present a major barrier to accessing telephone services. While Pearson and Davis (2002) found otherwise, it may be that in the United States ethnicity is a better indicator of language difficulties than in England and Wales, which would invariably impact on use of the telephone. In a further departure from Pearson and Davis (2002) and the LSC (2004) we find no evidence to support claims that telephone advice may be a preferred option by those with mobility issues, with those with

physical ill-health less likely to use the telephone. However, the significantly reduced likelihood of telephone advice for those with mental ill health is consistent with the view put forth by (MIND & Rethink 2011:19) that people with mental health problems or cognitive impairments prefer accessing services in face-to-face settings. More generally, for vulnerable clients where the development of a personal relationship between the advisor and client may be crucial to the successful progress of a case, the telephone may be an inadequate substitute for face-to-face services. This is acknowledged in the referral practice of the existing CLA telephone service, and other telephone advice services such as National Debtline, where clients who are assessed as particularly vulnerable by the operator service are referred to face-to-face provision. There was also some evidence to suggest that mode of advice may have been dictated in part by socio-economic status, with clients who were tenants of social landlords, private landlords, the local authority or homeless shown to be much more likely to use face-to-face services. This may, in part, be explained by disadvantaged clients being less likely to have a fixed line telephone and being increasingly reliant on pay as you go mobile phones which have higher charges than landlines for non-geographic numbers such as the 0845 prefix for the LSC funded CLA telephone advice line. For these clients telephony costs may present a barrier to accessing services (Hasluck *et al.* 2005) which as Pearson and Davis note (2002) may produce a more stark disparity in the event that ‘client call back’ features are made unavailable. More generally, access may simply be dictated by awareness of particular services (Hasluck *et al.* 2005). It may be that lower levels of telephone advice utilisation by those under 18 and those with physical or mental ill health and those of a particularly low socio-economic status are explained by a lack of knowledge of telephone services. With knowledge of services potentially dependent upon information spread through peer networks or the ability to self-direct to services via searching online, a lack of knowledge of such services may be explained by issues of social or digital exclusion. As hypothesised, particular problem types gravitated towards particular modes. Here it could be said that clients with problems that required urgent advice or which had reached a point of crisis or involved an immediate threat to the client’s welfare were more likely to gravitate towards face-to-face advice (Buck *et al.* 2010). This is seen in the higher rate of those with landlord and tenant issues relating to ‘other terms and conditions’ and housing problems in relation to anti-social behaviour using the telephone for advice. This is in contrast to those clients least likely to use the telephone to access advice who had issues in respect of housing benefits or who were facing homelessness or the threat of homelessness. Whilst previous research has suggested that telephone advice may be preferred on account of its convenience and efficiency (Pearson

& Davis 2002, Legal Services Commission 2004) this may not extend to serious problems where the likelihood of utilising telephone appears to be lower, a finding which is consistent with Booz Allen Hamilton's (2003) work suggesting that face-to-face interaction was preferred from banking clients for more serious or complex transactions. Similarly, findings are in line with Griffith and Burton's (2011) suggestion that telephone advice may be best suited to simpler issues.

Looking at the difference in substantive benefit obtained from telephone versus face-to-face advice, turning attention solely to *whether* substantive benefit has been achieved, there appear to be advantages to telephone advice versus face-to-face services for a number of types of housing problems. Findings such as these correlate with previous work (Legal Services Commission 2004, Ministry of Justice 2011b) which suggest that telephone advice produces as good outcomes for clients as face-to-face advice and with those of Pearson and Davis (2002) who demonstrate the capacity of telephone advice to produce better results in the areas of housing and consumer problems than other areas. However, disaggregating binary benefits down to constituent outcome categories demonstrated substantial differences by mode with face-to-face advice leading to more tangible case outcomes for clients. This finding is not unexpected, given Smith's (1990) concerns about the limitations of KPIs for comparing services operating across different modes and locations.

In respect of our third hypothesis, as anticipated having controlled for problem types, social and demographic predictors and stage reached, telephone advice took longer than face-to-face advice. This represents a development upon previous assessments which suggested that (using raw data) telephone advice requires less time than face-to-face advice (Legal Services Commission 2004). Our results highlight the importance of controlling for other variables, with the modelled difference by mode providing an indication of the efficiencies offered by face-to-face services where client-advisor communication benefits from nonverbal cues (Crouch & Dale 1998) and miscommunication of information is reduced (Munro *et al.* 2001).

Some Caveats

The findings in this paper provide a detailed picture of the differences between face-to-face and telephone provision for legal aid cases conducted under contract. However, the analysis is necessarily limited by the narrowness of the range of data captured in the LSC's administrative records, and by its reliability. A key benefit offered by telephone services is the extension of specialist advice to people who may be geographically isolated. The analysis

presented in this paper has not considered whether telephone services extend access to isolated groups and this is an area which merits investigation. To improve understanding of the comparability of face-to-face and telephone provision future research should be based on a broader range of administrative data, including data from services which serve a wider range of clients, for example, local authority housing advice lines and Shelter. Our analysis has concentrated on civil problems in relation to housing. To determine if the differences found between modes of advice for housing are replicated in other civil categories, future research will need to generalise the analytical approach to other categories of law.

Although our research is based on a large number of cases, data limitations have meant that it has not been possible to match client records across the two modes of access or over multiple years. Accordingly we have not investigated the extent to which clients who have received telephone based advice subsequently self-refer to face-to-face provision, or vice versa. Nor has it been possible to explore the hypothesis that clients may access telephone services early in their problem experience but turn to face-to-face provision when problems become more difficult. Limitations in the data in respect of problem characterisation have also prevented an examination of whether the overwhelming majority of telephone cases take less than two hours because they are less serious than cases which are dealt with by face-to-face providers or because asymmetries in contracts between face-to-face and telephone advice providers incentivise the latter to conclude cases within two hours.²⁰

Moreover, administrative records do not lend themselves to the long-term follow-up of clients. This is an important omission as it has not been possible to compare the two modes in respect of the ability of clients to understand and act upon the advice they have been given. With a higher share of telephone advice outcomes attributed to ‘client enabled to plan or manage affairs better’ it suggests a continued onus on the individual to implement the advice provided. Future research may need to be directed to a more depth analysis of the content of advice provided and the extent to which it assists the client in resolving their problems, beyond ‘planning or managing their affairs.’

Implications for Policy

Notwithstanding limitations in the data, our results produce a number of important findings regarding the provision of telephone advice in legal services, an area of research which has remained largely unexplored. These results have significant implications for an expansion of telephone based advice provision. Findings indicate that problems and client groups particularly associated with disadvantage and vulnerability tend towards face-to-face

services, revealing a preference for this mode of delivery. Understanding what drives these preferences is critical to any policy which aims to encourage a shift away from face-to-face provision. Where current behaviour is driven by lack of awareness of the availability of telephone services, any advertising campaign will require careful management. Given the relative ease of telephone access there is a risk of such services being overwhelmed by callers who do not prove to have eligible problems or do not meet the criteria for otherwise targeted services. In addition, there is an overriding need to identify those population groups who may find it particularly difficult to switch to using telephone services and to understand the ways in which telephone advice presents particular access barriers. Our findings suggest that the profile of the existing telephone advice service will require significant change if it is to respond to the differences in case composition and client demographics which will follow a reduction in face-to-face service availability.

Our findings on existing telephone provision reveal that the administrative imperative to monitor substantive benefit as an aggregate measure has obscured the pronounced differences in the types of outcomes achieved for clients by different modes. The analysis we have presented suggests that mode of delivery is a significant determinant of outcomes achieved for service users, with a greater proportion of tangible outcomes delivered in the face-to-face setting. Even if this finding reflects to some extent less serious problems tending towards telephone provision, it highlights that there is insufficient evidence from the current CLA telephone service to show that telephone advice can deliver the range of tangible benefits available from face-to-face services. This uncertainty is reinforced by the findings that the overwhelming majority of telephone cases does not progress beyond the stage of a first meeting.

The findings also indicate that projected resource gains from telephone provision may not be realisable as they are sensitive to the assumption that existing services are a reliable guide to the resource requirements of an expanded service. In addition to the manifest differences in client demographics and case type, our research suggests that there are differences in the advice time of cases by mode of delivery. In the context of the proposed reforms to legal aid, it is especially important to note the differences in advice time between those cases which will remain in scope of the legal aid scheme (homelessness) and those which will not (housing benefit) with the former generally longer than the latter. A switch to telephone provision will lead to a rise in average advice time of cases, when compared to existing services. Whether the economies offered by lower overhead costs of telephone provision will be sufficient to offset the costs generated by higher advice times is open to

debate. The clear differences in the types of people, problems, outcomes and advice times for cases in receipt of telephone advice imply that the existing CLA telephone service is an unreliable proxy for an expanded service. Our findings suggest that there are substantial risks inherent in a channel shift for legal advice.

References

- Age Concern and Help the Aged, 2009 *Take my advice: A survey on information and advice needs among the 45+ age group*, London: Age Concern and Help the Aged
- Barber, J., and Thompson, S., 2004. Multiple regression modelling of cost data: use of generalised linear models. *Journal of Health Services Research and Policy*. 9, 4: 197-204.
- Booz Allen Hamilton., 2003. *Implementing the Customer-Centric Bank, The Rebirth of the Forgotten Branch*. Available from http://www.booz.com/media/uploads/Implementing_the_Customer_Centric_Bank.pdf . [accessed 18/7/2011]
- Buck, A., Pleasence, P., and Balmer, N.J., 2008. Do citizens know how to deal with legal issues? Some empirical insights. *Journal of Social Policy*, 37, 4: 661-681
- Buck, A., Smith, M., Sidaway, J. and Scanlan, L. 2010, *Piecing It Together: Exploring One-Stop Shop Legal Service Delivery in Community Legal Advice Centres*, London: Legal Services Commission
- Bunn, F., Byrne, G., Kendall, S., 2009. Telephone consultation and triage: effects on health care use and patient satisfaction. *The Cochrane Library*, Issue 1
- Cabinet Office, 2010. *Digital by default proposed for government services*. Press release, 23 November, Available from www.cabinetoffice.gov.uk/news/digital-default-proposed-government-services, [accessed 28 June 2011]
- Cabinet Office, 1999. *Modernising Government*. London: The Stationery Office
- Crouch, R., and Dale, J., 1998. 'Telephone triage—How good are the decisions?(Part 2). *Nursing Standard* 12, 35: 33–9.
- Deloitte., 2011. *Choosing fewer channels: Public service channel options in an age of austerity*. London: Deloitte
- Denvir, C., Balmer, N.J., and Pleasence, P. 2011. Surfing the web- Recreation or Resource? Exploring how young people use the Internet as an advice portal for problems with a legal dimension. *Interacting with Computers*. 23: 96-104

- Echols, R. and Gordon, J., 2003. Recommendations and thoughts from the managers of the Hotline Outcomes Assessment Project. *Management Information Exchange Journal*. Spring, 10-18
- Erlich, S., Lanier, E, Davis, L., 2006. *Legal hotline client outcome study 2006 - AARP foundation technical support for legal hotlines project*. Washington: AARP
- George, S., 2002. NHS Direct audited: Customer satisfaction but at what price? *BMJ*, 324: 558–559.
- Goldstein, H.,2011. *Multilevel Statistical Models (4th Edition)*. Chichester: Wiley.
- Griffith, A., and Burton, M., 2011. ‘From face-to-face to telephone advice? *Legal Action*, February.
- Hardin, J.W., and Hilbe, H.M., 2007. *Generalized Linear Models and Extensions (2nd edition)*. College Station, Texas: Stata Press.
- Hasluck, C., Mhonda, J., Winter, E., Durrant, C., Thompson, M., Dobbs, L., and Chrisou, G., 2005. *The use and development of alternative service channels in Jobcentre Plus: a review of recent evidence*. Norwich: DwP.
- Lattimer V, George S, Thompson F, Thomas E, Mullee M, and Turnbull J., 1998. Safety and effectiveness of nurse telephone consultation in out of hours primary care: randomised controlled trial. *BMJ*, 317: 1054–1059.
- Leclerc, B.S. Dunnigan, L. Co[^]te[’], H., Zunzunegui, M.V.Hagan, L. and Morin, D., 2003. Callers’ Ability to Understand Advice Received from a Telephone Health-Line Service: Comparison of Self-Reported and Registered Data. *Health Services Research*, 38, 2: 679-710
- Legal Aid, Sentencing and Punishment of Offenders Bill HC Bill (2010-2011) [205]
- Legal Services Commission (LSC), 2004. *Improving Access to Advice in the Community Legal Service: Report on Evaluation Research on Alternative Methods of Delivery*. London: Legal Services Commission
- Lord Chancellor’s Department, 2000. *civil.justice.2000: A vision of the civil justice system in the information age*. Online: Lord Chancellor’s Department, Available from <http://webarchive.nationalarchives.gov.uk/20050301193140/http://dca.gov.uk/cj2000/cj2000fr.htm>, [accessed 23 June 2011].
- Lord Chancellor’s Department., 1999. *civil.justice. Resolving and avoiding disputes in the information age*. Online: Lord Chancellor’s Department. Available from <http://webarchive.nationalarchives.gov.uk/20050301193140/http://dca.gov.uk/consult/itstrat/civindex.htm> [accessed 23 June 2011]

- McCullagh, P., and Nelder, J.A., 1989. *Generalized Linear Models*. London: Chapman and Hall.
- McKinstry B, Sheikh A., 2006. Unresolved questions in telephone consulting. *J R Soc Med*, 99: 2-3
- McKinstry, B., Watson, P, Elton, R, Pinnock, H., Kidd, G., Meyer, B., Logie, R. and Sheikh, A., 2011. Comparison of the accuracy of patients' recall of the content of telephone and face-to-face consultations: an exploratory study. *Postgrad Med J*, 87
- MIND & Rethink, 2011, *Proposals for the Reform of Legal Aid in England and Wales Response from Mind and Rethink*. Available from http://www.mind.org.uk/assets/0001/1883/response_to_legal_aid_Green_Paper_-_Mind_and_Rethink.doc [accessed 10/08/2011]
- Ministry of Justice 2010a *Legal Aid Reform: Provision of Telephone Advice Impact Assessment* London: Ministry of Justice.
- Ministry of Justice 2010b. *Proposals for the Reform of Legal Aid in England and Wales*. London: Ministry of Justice.
- Ministry of Justice, 2011a. *Reform of Legal Aid in England and Wales: The government response*. London: The Stationery Office, Available from <http://www.justice.gov.uk/downloads/consultations/legal-aid-reform-government-response.pdf> [accessed 28 June 2011]
- Ministry of Justice, 2011b. *Impact assessment Annex D: Community Legal Advice telephone helpline*. Available from www.justice.gov.uk/downloads/consultations/annex-d-telephone-advice.pdf [accessed 14 September 2011]
- Montez-Rath, M., Christiansen, C.L., Ettner, S.L., Loveland, S. and Rosen, A.K., 2006. Performance of statistical models to predict mental health and substance abuse cost. *BMC Medical Research Methodology* 6: 53
- Munro, J., Nicholl, J., O'Cathain, A., Knowles, E., Morgan, A., and Dagnall, A. 2001. *Evaluation of NHS Direct first wave sites: Final report of the phase 1 research*. Sheffield, England: Medical Care Research Unit. University of Sheffield.
- National Audit Office, 2011. *Information and communications technology in government – Landscape review*. London: The Stationery Office
- National Debtline 2006, *National Debtline Evaluation*, London: Money Advice Trust
- National Debtline 2007, *Good Practical Advice: A Brief History of National Debtline*, London: Money Advice Trust

- O'Brien, R. and Seymour, R., 2005. *Videolink projects*. In Legal Services Commission (ed). 2005. *Innovation in the Community Legal Service*. London: Legal Services Commission.
- Pearson, J., and Davis, L., 2002. *The Hotline Outcomes Assessment Study Final Report - Phase III: Full-Scale Telephone Survey*. Denver: Centre for Policy Research
- Poole SR, Schmitt BD, Carruth T, Peterson-Smith A, and Slusarski M.,1993. After-hours telephone coverage: the application of an area-wide telephone triage and advice system for pediatric practices. *Pediatrics*, 92, 5: 670–679.
- Rasbash, J., Charlton, C., Browne, W.J., Healy, M. and Cameron, B., 2009a. *MLwiN Version 2.1*. England: Centre for Multilevel Modelling, University of Bristol.
- Rasbash, J., Charlton, C., Browne, W.J., Healy, M. and Cameron, B., 2009b. *A User's Guide to MLwiN, v2.10*. England: Centre for Multilevel Modelling, University of Bristol.
- Smith, P., 1990. The Use of Performance Indicators in the Public Sector. *Journal of the Royal Statistical Society. Series A (Statistics in Society)*, 153, 1: 53-72
- StataCorp, 2009. *Statistical Software: Release 11*. College Station, TX: Stata Corporation.
- Steele, J. and Seargeant, J.,1999. *Access to Legal Services: the contribution of alternative approaches*, London: Policy Studies Institute
- SWOOP, 1997. South Wiltshire Out of Hours Project (SWOOP) Group. Nurse telephone triage in out of hours primary care: a pilot study. *BMJ*, 314: 198.
- Varney, D., 2006. *Service transformation: A better service for citizens and businesses, a better deal for the taxpayer*. Norwich: The Stationery Office.
- Williams, R. L., 2000. A note on robust variance estimation for cluster-correlated data. *Biometrics* 56: 645–646.

¹ The exceptions include the category of asylum, and other categories cases where the client needs emergency advice, where the client is a child, where the client is in detention or where they have been assessed by the CLA helpline as requiring face-to-face advice in the previous 12 months and are seeking to resolve a linked problem from the same provider. Exceptions would also be made for clients who would not be able to give or understand instructions given through a telephone-based service.

² These include: the LSC's evaluation of an English Telephone Legal Advice Pilot in 2004; the Client Outcomes Hotlines Evaluation project which looked at seven telephone advice services in the United States in 2006 (Erlich, Lanier and Davis 2006) and the telephone hotlines effectiveness study, also conducted in the United States, which looked at five services in 2002 (Pearson and Davis 2002). It is noted that the latter refers to 'Hotlines' which are typically one-off requests for advice which differentiate them from the LSC model of provision of a full specialist help service delivered by telephone.

³ That is to say, only 23% specified that their preference was based entirely on mode i.e., purely on the fact that they would rather obtain their advice over the telephone and not because telephone advice was more convenient on account of their distance from an advice centre, their inability to find another source of advice, their disability/illness, or their caring responsibilities.

⁴ The report also derived the conclusion of equal access on the basis that that percentage of BME clients utilising the service (13%) matched the rate at which they were represented in the general population, which does not necessarily follow.

⁵ Warm phones are located in Jobcentre Plus offices and allow clients to contact a number of other services free of charge.

⁶ The KPIs became formal contract requirements in the 2010 Standard Civil Contract but will not take effect until April 2012.

⁷ Controlled Work includes the following legal aid schemes: Legal Help which provides initial advice and assistance, Help at Court which allows someone to speak for clients at a court hearing, and Family Help which provides help with negotiation and obtaining court orders in family disputes. It does not include Legal Representation for clients taking or defending court proceedings.

⁸ Civil legal aid work for the year 09/10 was conducted under the Unified Contract, which replaced the LSC General Civil Contract and Family Mediation Contract in April 2007. This contract brought conditions for Not for Profit organisations into line with solicitors who carry out civil legal aid work. From 1st October 2007, Not for Profit providers were covered by the same payment provisions as solicitors, subject to some transitional provisions.

⁹ Matter Type I categories are: 'Homelessness/threat of homelessness'; 'ASBOs – Magistrates/ Crown Court'; 'Housing benefit'; 'Anti-social behaviour not involving criminal courts' (referred to as simply 'Anti-social behaviour' in the text); 'Landlord and tenant: other terms and conditions' ('Landlord and tenant' in the text); 'Possession – mortgage'; 'Other'; 'Possession – other'; 'Re-housing (non-homelessness)' ('Re-housing' in the text); 'Disrepair'; 'Possession – rent arrears'; 'Harassment/unlawful eviction'. Matter Type II categories are: 'Client has public landlord'; 'Client has private landlord'; 'Client has other social landlord'; 'Client has NASS accommodation'; 'Client is owner occupier'; 'Client is homeless'; 'Client is landlord'; 'Other'.

¹⁰ The stages are defined as: First Meeting, where no further work is undertaken beyond confirming instructions and giving advice, including the confirmation of advice letter; Further Work: Work beyond the first meeting, including work preparatory to putting the case for the client. This applies to where further work has been carried out but there has been no contact with the potential opposing party, other than for the purposes of investigation; Putting the Case for the Client: Includes correspondence with opposing party and pre-action protocol letters and any communication with the third party that involves substantively putting the case for the client, including preparation of representations and evidence for tribunals; Representation at Court/tribunal: Applies where representation before courts or tribunals has been provided or arranged.

¹¹ In the housing category, the following outcomes are recognised as providing a substantive benefit: Client receives damages or property, Client receives new or increased periodical payment, Client receives damages or property and new or increased periodical payment, Sum owed by client to a third party is reduced or is less than claimed, Liability of client to make regular payments is reduced or is less than claimed, Client housed, re-housed or retains home, Repairs or improvements to the client's home, Opponent/other party action benefits client, Opponent/other party action prevented, Opponent/other party action delayed, Client secures explanation or apology, Client advised and enabled to plan and/or manage their affairs better. Outcomes which are not defined as providing a substantive benefit are: matter concluded otherwise, matter stopped on advisor's recommendation, matter proceeded under other CLS funding, client referred to another organization, client advised and taking action themselves or with the help of a third party, client advised and third party action or decision awaited, and outcome not known/client ceased to give instructions.

¹² Note, a multilevel model could also be fitted here, since cases are nested within supplier. Using a single level model assumes that clients make the choice to use the telephone or seek face-to-face advice independently of any choice of adviser (which is likely to be the case for the majority of clients). If clients were to choose advisers, with mode then driven by advisers, a multilevel model would be more appropriate (which was considered less likely). Readers interested in corresponding multilevel findings should contact the authors.

¹³ Note, that stage reached (First Meeting; Further Work; Putting the Case for the Client; Representation at Court/tribunal) was not included in the 'mode of contact' analysis. This decision was taken since the assumption

was made that mode was chosen independently of any consideration regarding the stage that was likely to be reached upon the conclusion of the problem (which would only become clear well after choosing a mode and as a consequence of the advice received). However, if stage was considered a proxy for severity/intractability, and clients were making decisions on mode in light of this, its inclusion may be justified. As a consequence, we also refer to findings with stage reached included as endnotes throughout the ‘mode of contact’ analysis. Readers interested in the full statistical output having included stage should contact the authors.

¹⁴ The impact of age remains if stage is added to the model. Parameter estimates (and standard errors) were 0.61 (0.11) for 18-24 year olds, 0.57 (0.11) for 25-34 year olds, 0.51 (0.11) for 34-44 year olds, 0.52 (0.11) for 45-54 year olds, 0.57 (0.11) for 55-64 year olds, 0.53 (0.12) for 65-74 year olds and 0.79 (0.14) for those aged 75 or over.

¹⁵ These difference remained having added stage to the model, though their significance, particularly for ‘other’ ethnicity was reduced ($\chi^2_1 = 85.55$, $p < 0.001$ for ‘mixed’ and $\chi^2_1 = 6.31$, $p = 0.01$ for ‘other’).

¹⁶ While some reduction in significance was observed, all of these terms remained highly influential having added stage to the model ($\chi^2_1 = 46.27$, $p < 0.001$ for physical ill-health; $\chi^2_1 = 336.67$, $p < 0.001$ for mental illness and $\chi^2_1 = 22.97$, $p < 0.001$ for ‘other/unknown’).

¹⁷ Findings for matter type 1 were predominantly similar having introduced stage to the model (for example, $\chi^2_1 = 111.33$, $p < 0.001$ for housing benefit; $\chi^2_1 = 1621.85$, $p < 0.001$ for landlord and tenant issues and $\chi^2_1 = 37.69$, $p < 0.001$ for ‘ASBOs in the magistrates or crown court’).

¹⁸ Again, findings for matter type 2 were fairly comparable having added stage to the model (for example, $\chi^2_1 = 91.41$, $p < 0.001$ for ‘other’ and $\chi^2_1 = 201.85$, $p < 0.001$ for owner/occupiers).

¹⁹ Particularly when using large datasets, statistical significance will not equate to practical significance. This highlights the importance of also interpreting models in terms of actual percentages, probabilities or times. For example, the statistically significant mental illness term in this model equates to 67.4% substantive benefit compared to 68.7% for the reference category (simulated from the model), a modest difference in practical terms.

²⁰ Providers of specialist telephone advice are permitted to provide up to two hours of advice before evidence on legal aid eligibility must be submitted by the client.