



# A Brief Guide to Evaluation

NHS West Midlands

Submitted by GHK Consulting Ltd as part of the evaluation of the End of Life Care Workforce Programme Evaluation

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## Document control

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# 1 What is evaluation & why is it important? How can this Guide help me evaluate?

*“For thousands of years people have honoured the dead with special rituals and in special zones, from burial mounds to humanist funerals. These rites of passage first developed when life was usually nasty, brutish and short and death was sudden. The modern, long lives that we lead have created both an opportunity and responsibility for us to do more than that: we are the first society in human history that can plan to honour people while they are dying not just after they are dead. That is why we need to find better ways to die.”*

*Leadbeater, C & Garber, J (November 2010) Dying for Change. Demos*

*“Would you tell me please which way I ought to go from here?” asked Alice.  
“That depends a good deal on where you want to get to.” said the cat  
“I don’t really know,” replied Alice.  
“Then it doesn’t matter which way you go,” said the cat.*

*Lewis Carroll*

End of life care is changing. As the first quote above illustrates, the attention of various thinktanks, policy makers, philosophers, social and health care professionals has begun to focus upon the concept of a ‘good death’. Because of this, we have a better idea of the desired outcome – of where we want to be. Moreover, through work such as the national End of Life Care Strategy, we also have a clearer idea of the standards of care needed to get there. Despite this growing clarity, challenges remain. Notably, there is the perennial issue of resource constraints (amplified by current cuts to health and social care budgets).

This leaves us knowing where we need to be, and how to get there - yet needing guidance as to how to do so. High quality information is therefore vital. We need to know the route to achieving the best outcomes within the resources available.

At its best, evaluation provides this information. It can help us to understand: the value of actions; the degree to which they have achieved a given end; and ways in which future efforts might be improved. In this Guide, following the image on the front cover, we suggest that the value of evaluation is therefore analogous to that of a map in that it helps decision makers (at whatever level) steer a course towards a destination.

A more detailed definition of evaluation<sup>1</sup> is provided by the UK Evaluation Society:

*“An in-depth study which takes place at a discrete point in time, and in which recognised research procedures are used in a systematic and analytically defensible fashion to form a judgement on the value of an intervention”*

This Guide has been produced by GHK for the End of Life Care Workforce Programme, led by NHS West Midlands. Its purpose is to increase the ability of the programme’s various workstreams when evaluating their own work. There is a secondary aim of increasing their confidence in doing so.

This is a crucial element of the approach GHK is taking to the overall programme evaluation: we do not have the capacity to ‘do’ each workstream’s evaluation; instead we are offering support and guidance to workstreams in evaluating their own work. These outputs will then be treated as a source for the overall programme evaluation – alongside case study visits and interviews with workstream leads.

<sup>1</sup> Throughout, we refer to ‘evaluation’ and not ‘monitoring’ or ‘monitoring and evaluation’. This is partly just semantics; we view monitoring as an integral part of the evaluation process that is mainly concerned with the tracking of a project’s inputs and outputs (explored further in section 3).

We therefore concentrate upon the process of **self-evaluation**, on the understanding that most workstreams will be responsible for undertaking their own evaluations. Nevertheless, GHK will provide guidance and advice to any organisations commissioning external evaluation, and much of the Guide remains relevant here too.

The Guide is structured so as to take the reader through the following steps:

- Deciding which 'type' of evaluation is most appropriate (and how to avoid 'pitfalls' common to all evaluation);
- Planning an evaluation;
- Gathering the information required; and,
- Reporting results.

We include a short introduction to the concept of value for money / economic evaluation. Definitional guidance is also provided in a 'Jargon Buster' (Annex 3).

On a more practical level, we also provide a **Planning Template** (Annex 1) and a **Reporting Template** (Annex 2). The completion of these templates **part of the requirements** of each workstream in terms of evaluation, as set by the programme management team:

### Evaluation Requirements of the End of Life Care Programme

Following the templates and guidance offered here, each workstream shall:

- Complete an evaluation **Planning Template** for review by GHK / the programme team;
- Engage with the external element of the programme evaluation (e.g. completing any surveys / taking part in interviews);
- Provide '**Highlight Reports**' to the programme team every month; and,
- Provide a completed **Reporting Template** at the end of their workstream's activity.

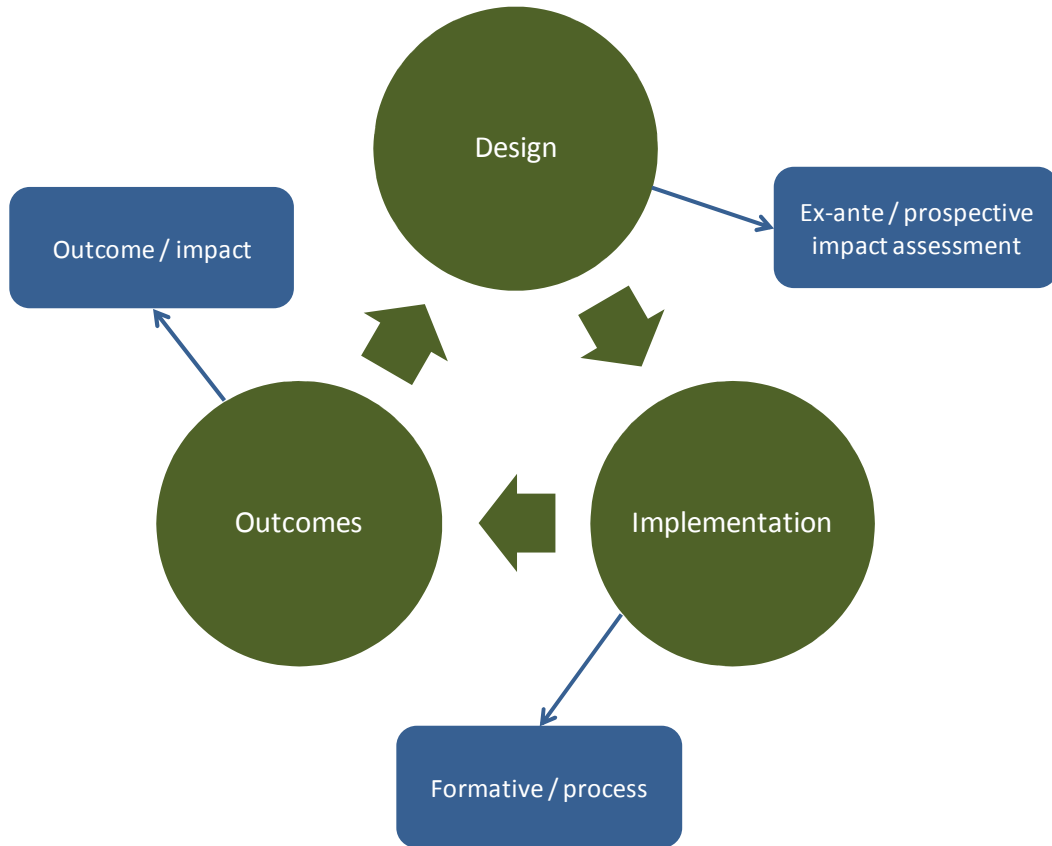
Support for the completion of each of these requirements will be provided by GHK and the programme team.

Having made the case for evaluation and set out the requirements for workstreams, we are in a position to set out some of the main types of evaluation and considerations in their use. This is the subject of the next section.

## 2 What are the main types of evaluation & how should I choose between them? Are there any general pointers to take into account?

In very general terms, there are three main types of evaluation. These are evaluations concerned with different parts of the project cycle, i.e.: design, implementation and outcomes. This is shown in the Figure below:

Figure 2.1 The project cycle provides a framework for choosing your evaluation type



The Table below describes these three main types.

Again in general terms, we anticipate that most workstreams will be using a combination of formative / process evaluation (as a means of tracking progress, highlighting key issues in putting their work into action) and outcome evaluation (demonstrating the difference that your work has made).

Within this framework, formative evaluation is a more straightforward proposition, since it is largely a question of gathering views on how well the activities have been carried out and any lessons arising. Outcome evaluation is more complex – as shown by the variety of (more or less technical) designs in the Table below.

A final important point to note here is that these types are **not mutually exclusive** – you do get evaluations of process as part of Randomised Controlled Trials for example. Typically, combinations of the different types come into play as we move around the project lifecycle.

Table 2.1 The three main (broad) types of evaluation; those supporting: design, implementation & outcome measurement

1) Evaluations that support project design				
Type	Diagram	Summary	Advantages	Drawbacks & Limitations
Ex ante / prospective impact assessment		A problem has been identified and the decision maker needs to work out what to do about it: what is likely to be most cost-effective / feasible?	<ul style="list-style-type: none"> <li>Formally sets out a range of options to consider (incl. 'Do Nothing')</li> <li>Can be more / less rigorous in terms of building on existing evidence</li> <li>Provides an opportunity to test approaches with those likely to be affected (informs planning, setting clear objectives etc)</li> </ul>	<ul style="list-style-type: none"> <li>Who decides what range of options might be?</li> <li>Can rely heavily on assumptions</li> </ul>
2) Evaluations that support project implementation				
Type	Diagram	Summary	Advantages	Drawbacks & Limitations
Formative / process		The project has been designed and is being put into action. The questions for formative evaluation are: how well? To what extent are the activities being implemented as planned? Should anything be changed to improve delivery?	<ul style="list-style-type: none"> <li>Provides an opportunity for evaluation to affect the project</li> <li>Success (effectiveness) of projects is very largely defined by how well implementation goes</li> <li>Learning orientated and practical</li> </ul>	<ul style="list-style-type: none"> <li>'Unscientific' – collections of opinions and often unclear data</li> <li>Room for interpretation can be wide, requires careful judgements</li> </ul>
3) Designs for measuring outcomes				
Type	Diagram	Summary	Advantages	Drawbacks & Limitations
Randomised Controlled Trial (RCT)		'Subjects' (e.g. people, areas, organisations etc) are <i>randomly</i> allocated to either receive the intervention(s) or not. Outcomes are measured and the differences (T1 - Tx) can be assumed to have been <i>caused</i> by the intervention.	<ul style="list-style-type: none"> <li>Best way of showing net effect</li> <li>Strongest study design (the 'gold-standard') - scientifically high-grade and objective</li> <li>Removes sources of bias and can show causation</li> <li>Great for economic analysis</li> <li>Can review systematically to get better estimates of effect</li> </ul>	<ul style="list-style-type: none"> <li>What is 'the intervention'? How does 'it' work?</li> <li>What about changes of context? (time and space) – will results 'transfer'?</li> <li>Often expensive</li> <li>Time taken to get results</li> <li>Can raise ethical questions around 'denying' treatment during the experiment</li> </ul>

Type	Diagram	Summary	Advantages	Drawbacks & Limitations
'Difference in difference'		<p>Random assignment of subjects is not possible, so a comparator is used – subjects alike 'in all important respects', but not a 'true' control group (known as a 'comparison group')</p>	<ul style="list-style-type: none"> <li>Lacks ethical challenges of RCTs</li> <li>'Natural experiments' often possible and cheaper – e.g. some areas get service before others</li> </ul>	<ul style="list-style-type: none"> <li>How to match the groups? What are the important characteristics you will control for? (needs lots of data and good theoretical basis for selection)</li> <li>More room for other things to cause changes because randomisation is missing</li> </ul>
Interrupted time series		<p>Comparator isn't available, so single cohort over time is used. Measures are taken at several points before and after the intervention and the evaluator looks for changes in trends.</p> <p>This is related to a simple two-point 'before and after' design where conditions are measured before the project and then again at the end.</p>	<ul style="list-style-type: none"> <li>Often practically and ethically sensible</li> <li>Allows the project / evaluator to design and collect information at relatively low cost</li> </ul>	<ul style="list-style-type: none"> <li>A range of factors outside the project could cause the observed change (e.g. seasonal effects)</li> <li>Often the case that the right data aren't collected before the intervention began</li> </ul>
Single point in time, no comparisons		<p>No data available for 'before', so you measure 'after' only (and ask participants to hypothesise about what would have happened in the absence of the project)</p>	<ul style="list-style-type: none"> <li>Easy, quick etc</li> <li>Can use modelling and assumptions to estimate impact</li> </ul>	<ul style="list-style-type: none"> <li>Any reported change could be caused by a wide range of 'other' factors; also relies upon the imagination / memory of key participants</li> </ul>

The choice of evaluation design should be guided by consideration of the levels of risk / value of the knowledge involved. Where risk is low and / or the effectiveness of the intervention in question is comparatively well established, then some combination of formative evaluation, backed with a 'before and after' approach to measuring outcomes is likely to be sufficient. We can illustrate this by returning to the analogy of evaluation and maps – investment in a highly detailed and specific map would only be appropriate in certain circumstances, a broad guide will often suffice.

We anticipate this largely being the case within the End of Life Care programme. Our expectation is that workstreams, while being varied in their activities, will most probably be served by some formative evaluation, backed by a simple approach to measuring outcomes.

Whatever the approach taken, there are some common pitfalls and problems; these are set out in the Table below:

Table 2.2 Common pitfalls and ways of avoiding them

Pitfall	Description	How to avoid it...
<b>Waiting until after the project has started</b>	Evaluation should be integral to project design. By far the most common pitfall is waiting until the end before asking questions about the effect a project has had – by then it is invariably too late and staff, beneficiaries, partners have moved on to the next thing! You won't have access to the information you need and will over-rely on people's memories and impressions.	Integrate evaluation planning into project design. This is often best done as part of a Business Case / project bid – say what your project will achieve and how you will know if it has done so.
<b>No means of measuring change</b>	Evaluation is concerned with change. One of the key questions asked by any evaluation is: what has changed as a result of this intervention?	When you are deciding what information to collect for evaluation, you need to think about measuring change over time – typically starting with a baseline position (see Jargon Buster) and assessing change from there.
<b>Trying to collect too much</b>	Collecting a massive array of data and then: not knowing what to do with it; and / or not being sure of its quality; and / or not knowing what it all means is perhaps the second most common pitfall of evaluation!  Overall, you should aim to <u>collect a few things well, rather than a lot of things badly.</u>	As a general rule, when you are planning your monitoring and evaluation system, start with a long list of things that it would be nice to have (a project team meeting is a good place to generate these lists). You should then reduce this list by thinking about what: is practical and possible to collect; will really tell you something; and lastly, will be useful when you analyse the information and report your results.
<b>Reliance on one source</b>	When collecting evaluative information, the more you rely on one source the less sure you can be that you are right. For example, if you were looking at the effect your project has had on a care home's services, then you might want to gather information from managers, employees, users and relatives.	As far as is practical (see above) you should try to use a range of sources and combine qualitative and quantitative information.

Pitfall	Description	How to avoid it...
<b>Not investing enough</b>	There is no easy rule of thumb when considering the levels of resources to devote to monitoring and evaluation. It will vary according to whether the project is especially innovative or risky, whether there is potentially a wider application of this approach, and the ambitions in terms of sustainability and mainstreaming. These factors mean that resources devoted to evaluation vary from a typically cited minimum of around 3-5% of project resources, right up to more than the cost of the actual intervention in the case of some large-scale evaluations!	The key when thinking about self-evaluation is to make information collection part of everyday project activity and to be clear about the responsibility for ensuring it is done.
<b>Advocating, not learning</b>	Most people involved in a project are partial; they have reason to think that it is the right thing to do and are committed to doing it. This presents a challenge to self-evaluation: project staff can end up collecting evidence to support their view, rather than being neutral and curious.	Follow the data and be prepared to find out that things have not worked the way you thought they would. It is important when approaching self-evaluation to be self-critical, clear and honest about what works and what doesn't.

Having set out the main types of evaluation available, and some common pitfalls involved, we are in a position to offer more detailed guidance in planning the evaluation. This is the subject of the next section.

### 3 What information do I need to collect?

*“When an intervention is planned and implemented, there should be a clear and explicit model in the minds of the planners about why they have reason to believe that the intervention will work. There will be a theory about the ways in which the different elements in the programme connect with each other...what an evaluation must do is describe very clearly what these different steps are, seek to be clear about the reasons why the steps along the pathway may get interrupted and try to evaluate the outcome using as much information about these steps as is possible.”*

*Professor Michael P Kelly, Director of the Centre for Public Health Excellence, National Institute of Health and Clinical Excellence <sup>2</sup>*

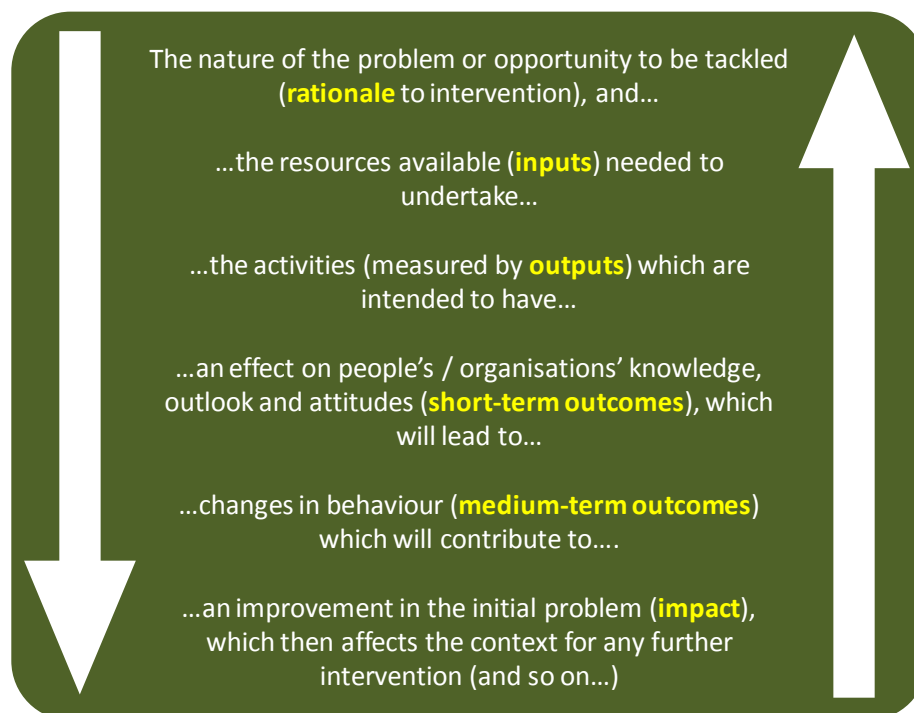
All projects contain propositions. These propositions (which are often described as ‘theories’ – see quote above) can typically be stated in causal terms – i.e. ‘*If we do x, then y will result*’.

The often complex and inter-related elements of projects in the health and social care arena means that these statements can often be brought together to link project activities to a broader goal. In the case of the End of Life Care workforce programme, this might include statements such as:

*“If we deliver our training package, then we will improve the care planning skills of care homes staff...If staff have better care planning skills, then they will be more able to cope in the event of a crisis...If they are more able to cope in a crisis, then there will be fewer unnecessary admissions to hospital....If there are fewer unnecessary admissions, then more people will die in a setting of their choice.”*

This example shows how the activities of part of a project might be logically connected to a broader goal. As the quote at the beginning of the section suggests, the task of an evaluation (whichever type you choose) is to set this thinking out in clear terms and then to test it by gathering evidence. GHK’s preferred approach to doing so uses a ‘Logic Model’. The Figure below shows the main components of such a model:

Figure 3.1 Logic Models offer a tool for setting out the thinking behind a project



<sup>2</sup> Improvement and Development Agency (2010) *The social determinants of health and the role of local government*. Ch3. Making a difference: using NICE guidance and embedding evaluation <http://www.idea.gov.uk/idk/aio/17422694>

It is crucial for evaluation purposes (and also for project design and delivery) that you are explicit about what your project is trying to achieve. It sounds obvious, but until you've said what 'success' is there is no way of knowing whether you've achieved it or not. Again, our analogy of the map illustrates this: you need to know where you are heading and how you intend to get there.

The Figure below shows a more detailed Logic Model. It shows each of the components of a project – from rationale, to inputs, activities / outputs, outcomes and impact – and provides definitions for each.

We have produced a **Planning Template** to guide the process of planning the evaluation of your workstream (Annex 1). It takes each of the elements of the Logic Model below and asks you to describe your project in these terms. You should complete this and return it to GHK for comment<sup>3</sup>. If you have already planned your evaluation, then please summarise your plans using the template. GHK will review your plans and make any comments / suggestions for improvement as necessary.

**Tip:** When you are thinking about the results you are trying to achieve (outcomes), you should think in terms of change.

In doing so, language is important and it is helpful to use words that describe change, such as: *increased, decreased, enhanced, improved, reduced and expanded*.

Outcomes typically relate to changes in knowledge, outlook, attitudes, behaviour or skills. You should also be clear about who, or what, you intend to have an effect on.

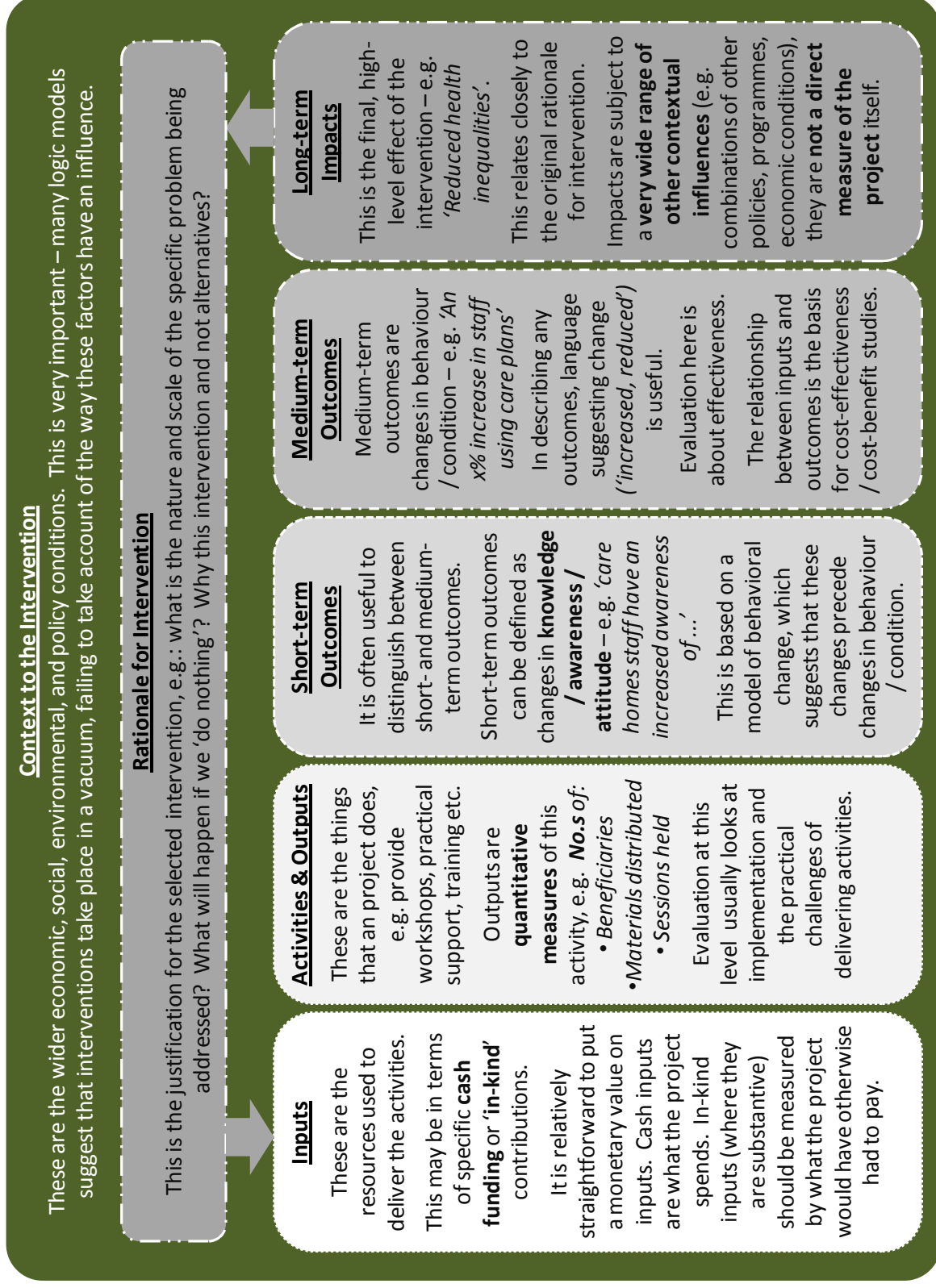
Targets can be set against both outcomes and outputs. For example, you might aim to deliver 15 workshops to a total of 135 people (an output target) – you might then want 75 of those people to be more able to perform a specific task as a result (an outcome target).

We have also included a blank version of the Logic Model as Annex 4 for those that would find it useful to complete a similar template.

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<sup>3</sup> Return to: [nahid.ahmad@ghkint.com](mailto:nahid.ahmad@ghkint.com)

Figure 3.2 Logic Models are a useful means of being clear at the start of a project / an evaluation



Several workstreams within the programme are delivering **training**. One of the most established models for evaluating training interventions is the Kirkpatrick model; it relates very closely to the Logic Model approach we are suggesting:

### Evaluating training: the Kirkpatrick Model & its relationship to Logic Models

The Kirkpatrick Model looks at the effects of training on four levels (shown below). These range from participants reactions to / satisfaction with training (which our Logic Model treats as a measure of implementation / an output); to their gains in knowledge / skills (which we regard as a short-term outcome); to the application of that knowledge (our medium term outcome); through to the ultimate results of that behaviour (treated as an impact on our model).

Results	Has this led to improved outcomes?
Behaviour	Have they applied that learning?
Knowledge & Skills	What did they learn?
Reaction	How well did participants react to training?

Having shown that projects contain propositions that can be set out in Logic Models, we are now in a position to show how evidence can be gathered to test these propositions. This is the subject of the next section.

## 4 How do I collect the information?

*“Programmes chart out a perceived course whereby wrongs might be put to rights, deficiencies of behaviour corrected, inequalities of condition alleviated. Programmes are thus shaped by a vision of change and they succeed or fail according to the veracity of that vision. Evaluation, by these lights, has the task of testing out the underlying programme theories. When one evaluates realistically one always returns to the core theories about how a programme is supposed to work and then interrogates it - is that basic plan sound, plausible, durable, practical and, above all, valid?”<sup>4</sup>*

*Ray Pawson & Nick Tilley*

Once you have decided where it is you are going - and how it is you intend to get there – you can then say what you need to do to track progress. The quote above, from two of the UK’s leading evaluation methodologists leads us onto the next step in the evaluation process: gathering evidence to test the propositions you set out in your Logic Model.

This information is often – but not always - collected in the form of a performance indicator, which enables you to present **quantitative information**. These indicators can be attached to any element of your Logic Model - e.g. 60% of training participants gained new skills (an outcome indicator), or 170 people accessed online learning modules (an output indicator).

You can also use your Logic Model to structure the collection of **qualitative information**. For example, you might want to use in-depth interviews with staff to find out what they learnt from sessions you provided, whether they have put their learning into practice (and why / why not) etc. As noted previously in this Guide, using a range of different sources of different types helps increase confidence in your findings; it also enhances the explanatory power of your evaluation.

The Planning Template asks you how you will be collecting evidence for your evaluation. The Table below shows some of the most common ways of doing so:

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<sup>4</sup> Ray Pawson and Nick Tilley – quote taken from their 2004 paper for the Cabinet Office ‘*Realist Evaluation*’, which summarises the main arguments of their book of the same name.

Table 4.1 There are a wide range of methods for gathering evaluative information

<b>Method</b>	<b>Advantages</b>	<b>Disadvantages</b>	<b>Things to consider</b>
Case studies	Can examine a situation in greater depth than other methods and show the context and process of change. Useful to illustrate specific points and providing a 'human' element to reporting. Can be used to combine various sources of data on a specific case	Generally tells individual / single organisational stories, difficult to generalise findings	Use to illustrate specific points, e.g. to show an improvement in a particular setting. Case studies are often best used in combination with other methods that can provide broader quantitative information.
Community / large group consultations	Get the views of large numbers of people, e.g. by voting on issues. Can raise awareness of your project amongst wider stakeholders	Can be dominated by vocal minorities. Can be hard to 'manage' so that feedback is useful	Consider your location and timings. Be clear about what you want – perhaps have specific options to choose from. Give feedback wherever possible and provide refreshments!
Creative expression	Can be an interesting way of engaging specific groups of beneficiaries, e.g. using art, photographs, video diaries. Useful where people may have literacy / communication problems	Interpretation may be difficult and relies on subjective judgements	Consider combining this approach with methods that will provide quantitative data – such as surveys of relatives
Diaries	Records information as people go through your services. Collects good information at individual level to show change in people's lives – a good source for case studies	Could be time consuming. Can be hard to interpret / pull out relevant information	Perhaps use with a sample of beneficiaries. Again, useful to combine with other approaches that provide quantitative data
Document review	The information already exists. Does not require primary research and so often cheaper. Can be useful for exploring the context of a project – e.g. policy developed in this area / previous research	The documents you'd like may not exist! Some documents may be sensitive and therefore difficult to gain access to	You need to think carefully before you ask for any documents – often you can end up with a great deal of information and no way of prioritising. Using a set series of questions can help this
Focus groups	Can allow for better input from people with poor literacy skills. Can be used to explore areas of agreement and divergence / also to allow groups to come to a consensus on ways forward	Needs good facilitation and may not gain individual feelings. Can be difficult to arrange	Think about the numbers involved (typically 6-8 is ideal) and likely group dynamics. Have a set of key issues to work on and try to end by discussing ways forward. Having another person to take notes is helpful

<b>Method</b>	<b>Advantages</b>	<b>Disadvantages</b>	<b>Things to consider</b>
In-depth interviews	Can get a lot of rich and detailed information. It is possible to clarify and probe issues. Excellent where topics might be sensitive / difficult	Time consuming. Interviewers need appropriate skills. Sometimes hard to interpret a lot of qualitative information	Clarify what the interviewee means in responses. Give the interviewee feedback on results. Be very clear about confidentiality and the basis and purpose of the interview before you begin
Internet message boards	Can provide anonymity and allow people to share feelings that they may not do in a group or one-to-one setting	Relies on computer access. Need to ensure that the people writing on the message board are the target audience.	Use a moderator to ask relevant questions to the target audience. You could also use a traditional comments box(!)
Observations of activities	Looks at actual behaviour rather than interpretations of it	Observer has to make some subjective judgements. Risks of observer influencing the activities being observed	Use a checklist for observations: what is it you want to know? What specific things / behaviours are you looking for?
Project administrative records	Systematic and readily available. Useful for monitoring project activities	Will not capture qualitative changes and so unable to answer key evaluation questions	Keep information in a standard way wherever possible e.g. use Census categories to record ethnicity
Standard administrative data	Is being collected already. Data are generally robust and will cover a number of years	The changes you are trying to achieve may be too small to show up in these figures	Be realistic, e.g. will your project really increase life expectancy? Combine with measures of smaller changes
Surveys / scales / feedback forms	Cheap and easy to administer and analyse. Good for 'before and after' comparisons. Provides quantitative information. Can be done in a number of ways – face-to-face, phone, post, email (depending on questions asked). Scales have often been devised and tested to measure exact things / conditions (e.g. PROMS)	May be inappropriate for certain groups. Need for careful design to ensure accessibility. Surveys may have poor response rate. Literacy and interpretation of questions may be an issue	Explain why the information is needed. Limit the number of questions - what will each answer really tell you? Use a mix of tick and comment boxes. Pilot the survey before use. Maybe provide incentives for completing. If using scales, consult any guidance / instructions for administration and scoring

Other points to consider when deciding which methods to use include:

Can you use information you are already collecting for monitoring and evaluation purposes? Very often, projects are keeping things such as case notes that are useful sources of information and require no additional effort to collect;

- Initial assessments – carried out by many projects when someone first accesses a service – are an excellent source of baseline information and should form a key part of your evaluation system;
- Can you use information that is already collected by other people? Are there any services already working with your beneficiaries that may have useful information?
- Don't rely too heavily on one source of information. A proven approach is to mix more creative methods – e.g. video diaries, poems and stories, photo-journals etc – with more established methods, such as using administrative data or surveys.
- It would be useful to follow up with some people after you have finished working with them, e.g. take a small sample of people you worked with and contact them six months or a year later to see how their situation has changed in the longer-term.
- Test the methods you decide upon (using a small number of people) to make sure that they are appropriate. For example, if you use a survey with young people then make sure that the language is clear and questions are written in a way that they understand.
- Make it someone's job to collect the information. This need not be a mundane requirement – you could use this to develop job roles to include responsibilities for research, monitoring and evaluation. The Table below shows a useful way of allocating responsibility for collecting the information set out in your Planning Template:

Element of project	Indicator / information required	How is this collected?	When is it collected?	Who is responsible?
<b>Inputs</b>	£ spent by quarter	Financial records	Each month	Finance officer
<b>Outputs</b>	No. of people attending workshops % of people 'satisfied' with workshops	Feedback sheet after workshops	After each session	Joanne Blogs
<b>Etc</b>				

Having shown a range of ways in which information can be gathered, we are now in a position to examine ways in which results can be collated and reported. But before we do so, we present a brief aside on the subject of value for money. This is the subject of the next section.

## 5 (A brief aside) What is value for money?

Value for money is a simple concept. Whenever we think about buying something – a car, a book, a holiday, a T-shirt – we ask ourselves: is this good value for money? In doing so, we are deciding from a range of alternatives. For example, if someone buys a T-shirt for £15 then they are implicitly suggesting that using these resources in this way gives them the most benefit – more so than any other possible choice they could have made at that time.

This is one of the most fundamental insights of economics. We have limited resources at our disposal; we must therefore make choices such that we maximise the benefits derived from their use. In short, we must trade off alternative uses to get the most value from available resources.

What begins as a simple concept becomes more complex when we move from a situation where an individual is trying to maximise value to themselves, to a situation where the concern is maximising public value using public resources. Here, the decision maker – typically a commissioner / funder – is trying to use collective resources to generate the maximum collective benefit.

This is a more complex undertaking. If we took the UK government as an example, there are a broad range of areas where investment might bring about benefits. Options here include education, crime prevention, health, defence, social care, pensions, infrastructure and street cleaning.

Yet resources are scarce (especially at the time of writing) and choices must be made as to which balance of investments represents the best value for the public purse. This relates closely to the issues set out in the introductory section of the Guide – resource constraints are an ever-present and critical element of achieving better End of Life care.

One of the main sources of additional complexity (when comparing an individual trying to maximise value and a public agency doing the same) is the role of information. In the case of an individual, they only have to know: what resources they have, what choices they have, and, what they prefer. For government, the information requirements are far greater. Here the decision maker needs to know: what resources are available; what investments are possible; and – most challengingly – what the relative costs and benefits of each of these investments is likely to be.

This is where economic evaluation and an assessment of value for money comes in. This analysis can generate information that enables decision makers to make a more rational allocation of resources. At their strongest, the arguments in favour of economic evaluation are therefore ethical, since better health can be achieved through the use of this information.

The starting point of all value for money assessments is a weighing of the relative costs and benefits of possible courses of action. Although decisions can almost never be made with full and perfect information, economic analysis can help decision makers to make better informed decisions. As we shall see, there are more or less robust methods of analysis available to us<sup>5</sup>, but at some point it becomes a judgement.

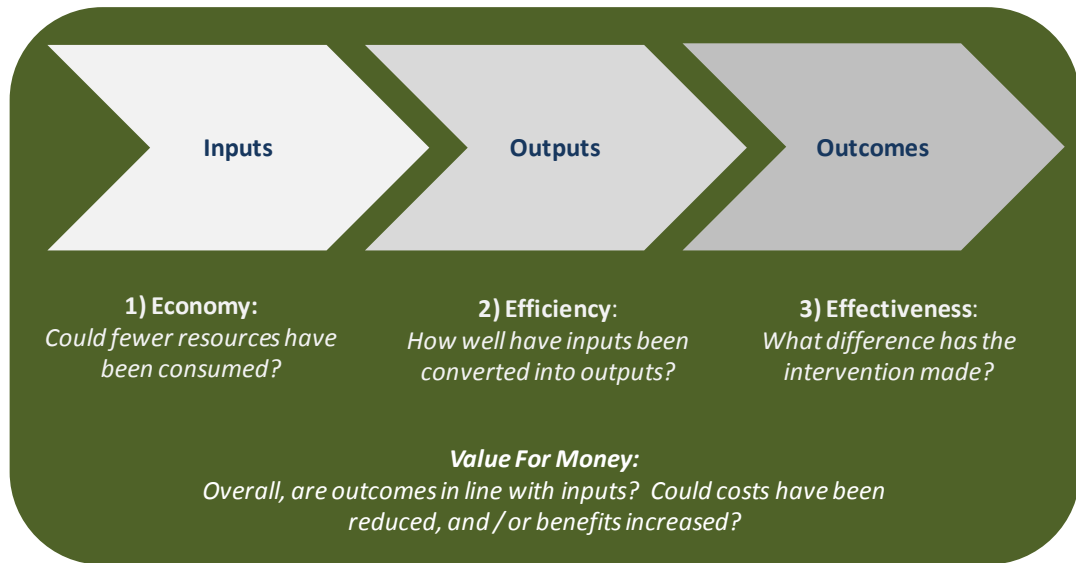
The Figure below shows the main components of such an assessment in terms of the main elements of an intervention – inputs, outputs and outcomes – and three tests of the relationships between them – economy, efficiency and effectiveness.

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<sup>5</sup> Readers wanting more in-depth guidance here are referred to:

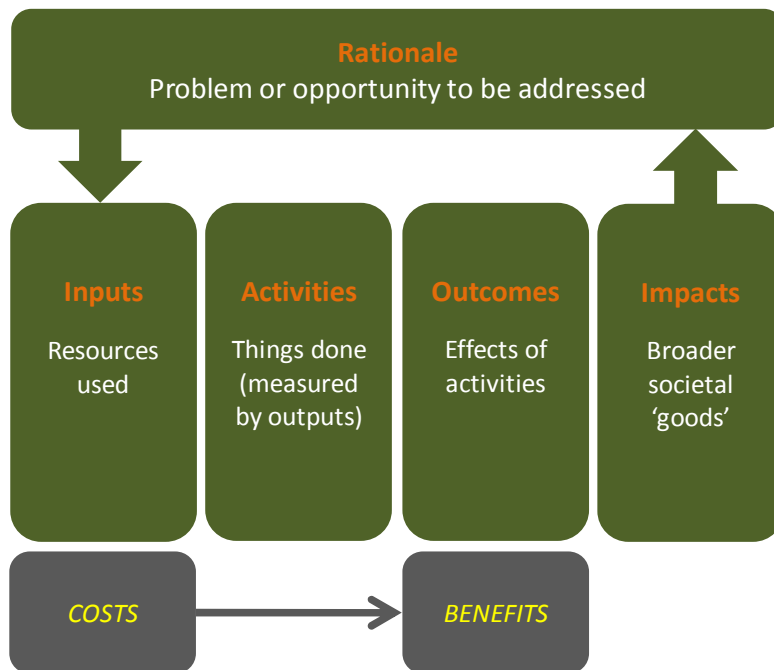
- Phillips, C (2005) *Health Economics: An Introduction for Health Professionals*
- Drummond et al (2005) *Methods for the Economic Evaluation of Health Care Programmes*

Figure 5.1 The Value for Money framework has three main elements and three main tests



The three elements in the value for money framework are also contained in the Logic Model described elsewhere in this guide (and that forms the basis for workstreams’ evaluation plans). The relationship between the value for money framework and Logic Models is shown in the Figure below:

Figure 5.2 Logic Models contain the same elements as the VFM framework



The production of a Logic Model therefore gives us a starting point for comparing costs and benefits. The exact way in which these costs and benefits are measured and compared then varies depending upon the type of analysis being undertaken (see below); but, whichever type of analysis selected, two central considerations will always be the:

1) Perspective

We need to ask: costs and benefits to whom? For example, should we undertake the analysis from one commissioner’s perspective, or should we consider the NHS as a whole? Should we be broader than this and look from the perspective of all public services or the state as a whole? At one extreme we might consider the effects on a single budget line of a

single organisation; at the other we might consider the effects at a broad societal level (including the patient perspective). Radically different answers can be obtained by varying this perspective. The answer that is appropriate will depend on the needs of the user.

## 2) Period

It is equally important to consider the time period over which costs are incurred and benefits are reaped: how many years should the analysis cover? This may be difficult to determine. In longer-term preventative interventions the costs will be incurred in current budgets but benefits might not be seen for many years. In such circumstances, an analysis with a short horizon would yield a different result from one that looked further out. A further issue here is that uncertainty increases as time goes on: we can be more certain about benefits arising in year 1 of a project than in year 21 for example.

Having set out a broad framework for economic analysis, we now consider the specific forms it might take. There are a range of different types of analysis that can be used to inform an assessment of value for money. At heart, each one compares costs to benefits. Primarily, the differences come in the way that benefits are measured; this is shown in Table 5.1 below:

**Table 5.1** Each type of economic analysis compares costs to benefits

Type	Summary
<b>Cost-Effectiveness</b>	<p>Results are presented as a 'cost per outcome' (e.g. 'cost per improvement in staff skills') and decision makers have to compare alternatives to find the cheapest means of achieving the desired outcome.</p> <p>The challenges here are: firstly, to decide which outcome is most appropriate (interventions may have several); and secondly for decision makers to compare interventions with very different types of outcome – i.e. how to compare better mental health to gains in life years to symptom-free days to improvements in diet (etc)?</p>
<b>Cost-Utility</b>	<p>To get round the problem of comparability, in Cost-Utility analysis, the measurement of outcomes is standardised (typically to a Quality Adjusted Life Year – QALY) and results are expressed as a 'cost per QALY'. Comparisons can then be made across different types of intervention. This is the favoured approach of NICE in its health technology assessments.</p>
<b>Cost-Minimisation</b>	<p>In Cost-Minimisation, the benefits of the interventions under consideration are assumed (ideally known) to be equivalent, so the analysis focuses on costs only. The aim is to find the cheapest intervention. This is very closely related to Cost-Effectiveness, except there is no explicit measurement of outcomes.</p>
<b>Cost-Consequence</b>	<p>Here costs and benefits are not combined to any significant degree; instead, they are presented to the decision maker 'as they are', so that they see a set of costs and benefits (e.g. '<i>The investment was x and this has bought benefits a, b, c, d and e</i>'). This is especially useful where benefits are very diverse, but again the problem of comparability is present.</p>
<b>Cost-Benefit</b>	<p>Both costs and benefits are measured monetarily. This type of analysis therefore has several important strengths: it allows the comparison of a very wide range of possible interventions; and, it is also the only type of analysis that does not necessarily require comparison, since if costs exceed benefits then we can conclude that it would be irrational to proceed. The central challenge here is the monetary valuation of benefits.</p>

Having completed a brief description of the concept of value for money, we are now in a position to return to the main process of evaluation and to consider the reporting of results. This is the subject of the next section.

## 6 How should I report my results?

In Annex 2 you will see that we have taken the main elements from the evaluation Planning Template and included it in the Reporting Template. This means that the information you have collected can be brought together under each of these headings. The headings follow logically through from what you did and the resources used to do it, to the effects this had and the lessons you have learnt by doing so. Completion of this template is the main reporting requirement (alongside your monthly 'Highlight Reports'). This section therefore offers more generic guidance on project reporting.

As noted in section 4, one of the criteria for thinking about what types of information to collect is to consider the ways in which it can be analysed and reported on. Ideally you should have a mix of quantitative information (which can be used for tables and figures) and qualitative information (which can provide narrative and explanations).

Most evaluations have some sort of written report; the main sections typically include:

- **Introduction & Method.** An explanation of what is contained in the report and the process / methods you used to gather the information. You should also explain the context for your work (what was the problem / opportunity you set out to address) and the services you provided.
- **Results.** Here you should set out the information you have collected. It is usual to start with your outputs: showing the scale of what you did (e.g. numbers of events / sessions held; beneficiaries by age, gender, ethnicity and disability), before moving on to your outcomes: the effects of your project.
- **Conclusions & Recommendations.** You should use this section to reflect on what your results mean: what have you learnt by doing this work? What seems to be effective in addressing the problem you originally identified? Does the original problem still exist? If so, (how) has it changed? What recommendations would you make to others in considering the best ways of addressing these issues?

Other, more general, points to consider at this stage include:

- Use the analysis / reporting stage to *develop your organisation*. Producing your results can give you a really good opportunity for getting together with staff, partners (and beneficiaries?) and reflecting on what went well and what needs to change.
- Consider the level of *resources* needed. Remember that you will have to devote resources (money, staff and time) specifically to reporting – especially if you are planning to run events to spread your message.
- Consider a range of *products*. A written report may not always be the most powerful way of conveying your message. There are other methods – e.g. video, website, large event or conference, press releases, community newsletters – that you may also want to use.
- Think about your *audience*. What you produce must be suitable for the people you are targeting and the impact you want to have on them. For example, senior policy makers will want very concise key messages so that they can make a decision, whereas practitioners will need more detailed information about how you actually did the work.
- Consider the *timing* of your reporting. This is especially important if you are looking to influence other people working in the same area – are there any key conferences/ government papers/ consultations that your reporting could influence? What are the opportunities for you to share what you have learnt?

Lastly, and to finish with our (by now exhausted) analogy, reporting is a good place to reflect on the journey of your work and to offer pointers as to possible routes and pitfalls for others thinking of attempting similar efforts.

# ANNEXES

## Annex 1 Planning Template

### 1. Your details

- Workstream Name & Reference Number:
- Lead Organisation:
- Project Manager:
- Email Address:
- Telephone Number:
- Date this Template was Completed:

### 2. Your plan

For each of the questions below, please refer to Figure 3.2 on page 10 of the main report for definitional guidance.

#### Context & Rationale

Please describe the main elements of the context to the project (e.g. how it relates to national policy / specific problems) and the rationale for the approach you have taken

Inputs, activities / outputs, outcomes and impact

Please describe these elements of your project in the table below, specifying how you intend to measure each one (e.g. what indicators you propose to use):

Element	Description of your project	How will you measure this?
Inputs		
Activities / outputs		
Outcomes (short and medium term)		
Impacts		

## Annex 2 Reporting Template

1. What did you do? What (*outputs*) did your project produce?
2. What issues arose in implementation & how did they affect the work?
3. What resources (*inputs*) did you use?
4. What were the results (*outcomes & impact*) of your activity?
5. What are the main lessons you draw from the work?

## Annex 3 Jargon Buster

Every area of practice has its jargon and evaluation is no different (if anything it may be worse than other areas!). We have therefore provided some quick definitions of key terms used in monitoring and evaluation:

- **Activities** - The things your project does, e.g. provide a training service.
- **Baseline** - The situation at the start of your project, e.g. rates of people dying in hospitals. Usually compared with the situation at the end of the project to show a change.
- **Context** – The general economic, social and policy conditions within which your project operates.
- **Evaluation** - An in-depth study which takes place at a discrete point in time, and in which recognised research procedures are used in a systematic and analytically defensible fashion to form a judgement on the value of an intervention.
- **Indicator** - A sign that a change has taken place, e.g. older people can name local health services would be an indicator of increased knowledge of these services. (Smoke is an indicator of fire).
- **Inputs** – The resources at your disposal to run the project. Wherever possible, inputs should be given a monetary value.
- **Logic Model** - An illustration of how the impacts of a project or programme are achieved. Logic Models show the links between inputs, activities, outcomes and impacts within the context in which the project or programme operates.
- **Milestone** - A means of tracking the progress of your project by setting a date for achieving a specific target. This can either relate to outputs (e.g. ‘we will deliver seven sessions by June’), or outcomes (e.g. ‘120 people will have improved their skills by August’).
- **Monitoring** - The process of recording your activities in a systematic way, e.g. the number of sessions you ran, how many people took part, their gender/ age/ ethnicity/ postcode. Monitoring typically records Outputs (see below).
- **Outcome** - The changes that you want your project to achieve. This might be at a range of levels, e.g.: for individual people, organisations, families, local services. Outcomes typically describe changes in knowledge, skills, outlook, attitudes and behaviour, e.g. increased knowledge of social care services.
- **Outputs** - A quantitative measure of your activities, e.g. the number of people you have worked with, the number of reports produced, number of sessions run, number of posters produced etc. Typically recorded by monitoring systems.
- **Qualitative** – Narrative information, typically giving people’s views, opinions, ideas or attitudes. Qualitative information is often used to answer questions about why and how things have happened they way they have.
- **Quantitative** - Numerical information, describing things using facts and figures, e.g. the number of people accessing a service; the percentage of people who die in a setting of their choice etc.
- **Rationale** – The justification for your project. This is typically described in terms of a problem to be addressed but may also be described in terms of an opportunity.
- **Stakeholder** - Individuals, groups or organisations with an interest in, and / or influence over, your project.
- **Sustainability** – Refers to the continuation of the project’s activities, or the outcomes achieved, once the funding has ended.
- **Target** - A means of keeping your project on track by making a statement about progress about one or more of your Indicators. Targets should be S.M.A.R.T – Specific, Measurable, Achievable, Relevant and Time-bound.

## Annex 4 Blank Logic Model Template

