



**Greater Manchester
Public Health Practice Unit**

Evaluation: Top Tips for Commissioners and Practitioners

Introduction

This is the first in a series of papers aimed at assisting healthcare professionals. This paper aims to give users, through a series of straightforward and simple steps, a framework to enable a more efficient method of carrying out evaluation.

Evaluation can be used to assess a range of projects and studies with a whole wealth of documents in existence that outline and guide individuals and services who wish to undertake service evaluations. This paper aims to signpost users to relevant documents to ensure high quality and consistency across Greater Manchester when evaluations are being planned, implemented, carried out and acted upon. It is hoped this document will provide an easy reference guide as well as a benchmark to which users can measure the quality of their evaluations.

At the heart of the new NHS strategy is world class commissioning. This aims to give staff competencies in the knowledge, skills, behaviours and characteristics that, when put into practice, give the capability for staff to transform people's health and well-being at the local level, while reducing health inequalities and promoting inclusion. The core task for PCTs is to invest locally to achieve the greatest health gains and reductions in health inequalities, at best value for current and future service users. Evaluation can be used to ensure that PCTs are getting the best value for their investments.

By linking these competencies to the approaches to evaluation described in this paper those undertaking evaluations should be able to deliver first class evaluations capable of informing service delivery and future development of services and demonstrate world class commissioning.

Key documents:

World class commissioning competencies, Department of Health, December 2007.

NHS next stage review final report – summary, Department of Health, June 2008

The operating framework for 2009-10 for the NHS in England, Department of Health, December 2008

What is evaluation?

The purpose of evaluation is not to prove, but to improve.

Evaluation is the formal process of judging the 'value' of something.

The purpose of an evaluation is to assess the effects and effectiveness of something, typically some innovation, intervention, policy, practice or service.

Evaluation is indistinguishable from other research in terms of design, data collection techniques and methods of analysis. But it must be remembered that:

- There is a need for systematic information collection
- Evaluation can be applied to a wide range of topics and for a wide variety of purposes
- To be effective, evaluation has to be used by someone.

Any evaluation should meet the following criteria:

<i>Utility</i>	There is no point in doing an evaluation if there is no prospect of its being useful to some audience.
<i>Feasibility</i>	An evaluation should only be done if it is feasible to conduct it in political, practical and cost-effectiveness terms.
<i>Propriety</i>	An evaluation should only be done if you can demonstrate that it will be carried out fairly and ethically.
<i>Technical adequacy</i>	Given reassurance about utility, feasibility and proper conduct, the evaluation must then be carried out with technical skill and sensitivity.

Examples of evaluation reports

- Formative – guides the development of the intervention
Sitzia J, Cotterell P and Richardson A. 2004. [Formative evaluation of the cancer partnership project](#). London: Macmillan Cancer Relief.
- Process – documents the process of the implementation of the intervention
Public Health Practice Unit. 2009. *An evaluation of the role of the health trainer across Greater Manchester*. Greater Manchester Public Health Practice Unit.
- Impact / outcome – documents the impact / outcomes of the intervention
Nutbeam N, Macaskill P, Smith C, Simpson JM and Catford J. 1993. Evaluation of two school smoking education programmes under normal classroom conditions. *BMJ* 306:102-07.
- Participatory – using the involvement of stakeholders beneficiaries

Danielle Papineau D and Kiely MC. 1996. Participatory evaluation in a community organization: Fostering stakeholder empowerment and utilization *Evaluation and program planning* 19(1):79-93

The following describes the main characteristics of four types of evaluation. These are: formative, process, impact (outcome) and participatory evaluations.

Formative evaluation

Formative evaluation focuses on the *process*.

- It is intended to help in the development of the programme, innovation or whatever is the focus of the evaluation.
- Needs to be carried out, and reported on, in time for modifications to be made as a result of the evaluation.
- Usually involves stage-by-stage comparison between stated objectives or criteria and what is actually happening.
- Helps to ensure interventions are developed in accordance with stakeholder / community needs.
- Identifies how and why key decisions were made.

Example of formative evaluation

Sitzia J, Cotterell P and Richardson A. 2004. [*Formative evaluation of the cancer partnership project*](#). London: Macmillan Cancer Relief.

This report presents the findings from a formative evaluation of the Cancer Partnership Project, a three-year initiative to support the development of service user involvement in the 34 cancer networks in England. The report recommended that:

- Service commissioners identify and secure resources required to ensure sustainability of partnership groups
- A policy commitment should be made to place equal value on the priorities for service change identified by service users
- A clear understanding is needed of issues around diversity
- There was a clear need for dedicated training to support the role of those chairing meetings.

Process evaluation

A process evaluation focuses on what services were provided to whom and how. Its purpose is to describe how the program was implemented, who was involved and what problems were experienced. A process evaluation is useful for monitoring program implementation; for identifying changes to make the programme operate as planned; and, generally, for programme improvement.

- Concerned with answering a 'how?' or 'what is going on?' question.
- Usually involves feedback during the course of a project, when things are still taking shape.
- Process evaluation can be carried out at, or near, the end of a project, documenting the process of implementing the project.
- Components of process evaluation might include:
 - The number and type of people reached by an intervention;
 - What participants thought about the intervention;

- The quantity and type of activity / service provided;
- A description of how services are provided and the quality of the services provided (participant satisfaction).

Example of process evaluation

Public Health Practice Unit. 2009. *An evaluation of the role of the health trainer across Greater Manchester*. Greater Manchester Public Health Practice Unit.

This study aims to evaluate the role of the health trainer across the ten Primary Care Trusts that comprise Greater Manchester. Both qualitative and quantitative methods have been used to look at the process, cost and perceptions of the service. Questionnaires to both health trainers and their clients, along with semi-structured interviews with commissioners and basic financial questionnaires have all been utilised. It is envisaged these will inform the recommendations when the final report is published in September 2009 (anticipated).

Impact and outcome assessment

Impact and outcome evaluations are often called impact or outcome assessment. Impact assessment is the process of identifying the anticipated or actual impacts of a development intervention, on those social, economic and environmental factors which the intervention is designed to affect or may inadvertently affect. It may take place before approval of an intervention, after completion, or at any stage in between.

- Impact assessment should start with the decision on aims and objectives.
- It is common to speak of short-term outcomes and long-term outcomes.
- Identifies the main options for achieving the objective and analyses their likely impacts in the economic, environmental and social fields.
- In public health, outcome evaluations are usually linked to the achievement of the objectives of the intervention.
- Components of outcome evaluation include changes in:
 - Awareness
 - Knowledge
 - Attitudes
 - Behaviours
 - Policy
 - Social / physical environment
 - Morbidity / mortality rates
 - Cost effectiveness / cost benefit analysis.

Example of impact / outcome assessment

Nutbeam N, Macaskill P, Smith C, Simpson JM and Catford J. 1993. Evaluation of two school smoking education programmes under normal classroom conditions. *BMJ* 306:102-07.

This study aimed to assess the effectiveness of two school-based smoking education projects in delaying onset of smoking behaviour and in improving health knowledge, beliefs and values. The main outcome measures were the self-reported smoking behaviour (backed by saliva sample) and change in relevant health knowledge, beliefs and values. The authors found that more comprehensive interventions than school health education alone would be needed to reduce teenage smoking and recommended further restrictions on access to cigarettes and on the promotion of tobacco products.

Many evaluations incorporate both process and outcomes by having two aspects or phases, one focussing on the process (the way things are done) and the other on the outcomes (the consequences). Some evaluations are entirely concerned with process.

When an evaluation is primarily concerned with outcomes, decisions about timing will need to take into account questions about the short- or long-term nature of the outcomes. Then, the immediate effects of an intervention are described as the impact and longer-term effects as the outcomes. Decisions about the focus of the evaluation and, in particular, whether to concentrate on process, impact or outcome will depend on the resources and funding available, the underlying questions and the criteria guiding the evaluation.

Qualitative research methods are often used in process evaluation, whereas outcome evaluation often uses quantitative methods. Triangulation, using several different methods to get the most out of an evaluation, can bring together data from a number of different sources such that process and outcome evaluation can complement each other.

Participatory evaluation

Participatory evaluation involves the stakeholders and beneficiaries of a programme or project in the collective assessment of that programme or project. It is people-centred, as stakeholders and beneficiaries are the key factors of the evaluation process and not mere objects of it. Patton defined participatory evaluation as:

A process controlled by the people in the program or community. It is something they undertake as a formal, reflective process for their own development and empowerment.

Patton M. 1990. *Qualitative Evaluation Methods*. p.129.

To expand on this, Jackson and Kassam defined participatory evaluation as 'a process of self-assessment, collective knowledge production, and cooperative action' and then went on to state the difference between participatory and other methods of evaluation. They said that a participatory evaluation is one:

In which the stakeholders in a development intervention participate substantively in the identification of the evaluation issues, the design of the evaluation, the collection and analysis of the data, and the action taken as a result of the evaluation findings.

Jackson ET and Kassam Y. 1998. *Knowledge Shared*, p.3.

This method of evaluation looks to

- Provide stakeholders and beneficiaries with the opportunity to reflect on a project's progress and obstacles

- Generates knowledge in the application of lessons learned which, in turn, leads to improvements
- Provides tools for participants to transform their environments.

Participatory evaluation serves four key functions, some concern the stakeholders and beneficiaries and others relate to funding agencies:

- Helps build the capacity of stakeholders to reflect, analyse and take action
- Contributes to lessons learned which can lead to improvements
- Provides feedback to enable improvements to the implementation of a programme
- Helps to ensure accountability to stakeholders and managers by showing how project objectives have been met and how resources were used.

The strengths of a participatory evaluation are that it:

- Draws on local resources and capacities
- Recognises the wisdom and knowledge of end-users
- Demonstrates that end-users are creative and knowledgeable about their environment
- Ensures stakeholders are part of the decision-making process, and
- Uses facilitators who act as catalysts and who assist stakeholders in asking key questions.

Key text: [*Who are the question-makers? A participatory evaluation handbook*](#). 1997. Office of evaluation and strategic planning. UN Development Programme.

Example of participatory evaluation

Danielle Papineau D and Kiely MC. 1996. Participatory evaluation in a community organization: Fostering stakeholder empowerment and utilization *Evaluation and program planning* 19(1):79-93

Participatory evaluation methodology used in the context of a formative evaluation within a grass-roots community economic development organization. The evaluation was designed to promote the empowerment of stakeholders who became involved in the design and implementation of the evaluation. Participating stakeholders represented staff members, funders, community agencies and institutions, service users and students. Information was gathered through interviews with participating stakeholders and participant observation. Respondents reported increased self-efficacy within the organization as well as the acquisition of new skills and information. They also reported instrumental and conceptual uses of evaluation results.

The table on the next page shows commonly used data collection methods for evaluations and gives suggestions for analysing the results.

Commonly-used methods

Type of evaluation	Method	Definition	Why used?	How to analyse?
Formative (focuses on the process)	Focus groups	Unstructured interviews with small groups of people who interact with each other and the group leader	To get ideas on how to move a project forward	Thematic content analysis
Process (focuses on what services were provided to whom, and how)	Documentation review	Analysis of key documents from literature search and including those from policy and procedures for the intervention being evaluated	To find out who has done this before and what their findings were	Collate into study criteria
	Interviews with programme delivery agents	Semi-structured interviews which contain a mix of structured questions often to get factual data and more general open-ended questions which allow the respondent to elaborate on particular issues	To see how the project is delivered and managed and how perceptions differ from those of clients	Thematic content analysis
	Interviews / surveys of clients	Semi-structured interviews (see above) and surveys: the systematic collection of data from a number of people for the purpose of analysis, usually via a questionnaire	To find out how they work and their perceptions of the service under evaluation	Quantitative analysis using basic frequency and cross-tabulation counts
	Focus groups	Unstructured interviews with small groups of people who interact with each other and the group leader	To get feedback on the process as it happens	Thematic content analysis
Outcome (process of identifying the anticipated or actual impacts of a development intervention)	Population surveys	The systematic collection of data from a number of people for the purpose of analysis, usually via a questionnaire	To obtain numbers to back up findings	Quantitative analysis using basic frequency and cross-tabulation counts
	Client / user surveys	The systematic collection of data from a number of people for the purpose of analysis, usually via a questionnaire	To obtain feedback about what has happened	Thematic content analysis Quantitative analysis using basic frequency and cross-tabulation counts
Participatory (uses service user / stakeholder knowledge and experience to inform changes to a project)	User / stakeholder surveys	The systematic collection of data from a number of people for the purpose of analysis, usually via a questionnaire	To inform decisions about people's experiences and how these can make changes for improvement	Thematic content analysis Quantitative analysis using basic frequency and cross-tabulation counts

Key text: Bowling A. 2002. *Research methods in health. Investigating health and health services*. Open University Press, Maidenhead.

Definitions taken from www.resmind.swap.ac.uk (Accessed 15 May 2009)

Service user involvement

Involving those who use certain services in the process of their evaluation has become more commonplace, with the result that public engagement is now, more than ever, linked to evaluation. However, some confusion exists between including people in an evaluation and involving people in engagement – both differ in the ways they are set up. The process of stakeholder engagement is about raising the awareness of users and seeking their views on any proposed services.

Public engagement is defined as:

The active participation of patients, carers, community representatives and groups and the public in how services are planned, delivered and evaluated. It is an ongoing process of developing and sustaining constructive relationships, building strong, active partnerships and holding a meaningful dialogue with stakeholders.

In contrast, the process of evaluation looks at the services and occupations users were involved in and takes their knowledge and experience to evaluate them.

Methods of Engagement

Several methods are available to involve service users. A good way to design effective questions is to recruit people who can use their knowledge and experience to provide information on what makes a good question. A further stage involves bringing users together to discuss their opinions in a well-managed focus group. In order to make both of these methods work, good and effective facilitators are needed.

The rise of the free newspaper has meant the media can be used to get messages out to target groups. Community-based radio can be used reach deprived areas, and black and minority ethnic groups, and, by using phone-in sessions, can raise awareness and increase participation in various schemes.

Why engage?

Engaging people is how we get them involved in the planning, design and evaluation of services. The recently published NHS Constitution sets out a right for people to be involved, and states they have a right:

To be involved, directly or through representatives, in the planning of healthcare services, in the development and consideration of proposals for changes in the way those services are provided, and in decisions to be made affecting the operation of those services.

User involvement is integral to many recent national policies. In the World Class Commissioning Framework, competency three states that:

Commissioners must proactively seek and build continuous and meaningful engagement with the public and patients, to shape services and improve health.

By engaging both patient and public this helps to keep these users at the heart of the NHS and ensures services are more efficient and tailored to different and diverse communities. In turn this improves the public image of the NHS and focuses attention on the fact that people do have a part to play in their own help. Staff can also make a difference as designing effective services for patients is at the heart of what the organisation stands for and this, ultimately, helps the PCT to meet its statutory obligations.

Conclusion

There are a whole wealth of documents in existence that outline and guide individuals and services who wish to undertake service evaluations. This paper described, in brief, different types of evaluation and has signposted users to published examples of both evaluations and texts on how to undertake an evaluation. By using these resources and linking evaluation to world class commissioning, those carrying out evaluations will bring the highest levels of their ability to their work which will result in first class evaluation capable of informing service delivery and the future development of health services.

Further Information and Key contacts

The GM Public Health Practice Unit can be commissioned by Health and Social Care organisations to undertake a range of research and evaluation projects. For more information visit www.gmpublichealthpracticeunit.nhs.uk or contact Dr Soraya Meah, Lead GM Public Health Practice Unit: soraya.meah@bury.nhs.uk

For more information about the contents of this paper, please contact Simon Guest, Public Health Practice Unit: simon.guest@bury.nhs.uk

For further information regarding any links or references contained within this report, please contact, Lucy Anderson, NHS Bury Library Service: lucy.anderson@bury.nhs.uk

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Evaluation template – formative

1.

Why is the evaluation being done?

The answer to this question should be that it will develop whatever is the focus of the evaluation. If it does not, is this type of evaluation necessary and / or appropriate?

Who is it for?

Will this benefit the people actually doing the job? Or is it for others benefit?

Who will benefit from this evaluation?

Will the work show that work is progressing according to plan / expectation? Does it highlight better ways of doing things or does it show the way at the moment is not best practice?

Who will have the information it produces?

Are the findings destined for a manager's desk or will they be used to inform those carrying out the task? If an evaluation is to help people do better then it needs to be directed to those it evaluates.

2.

What kind of information do you need?

Spending time on the planning stage is vitally important as it allows you to direct the evaluation in a way that maximises resources. Decide who you need to approach to get information. Is it purely literature that you should consult? Questionnaires and interviews (which take time to compile, pilot, develop and administer), focus groups? How will the results be analysed? By whom and with what software (if appropriate)?

How will it be gathered?

Questionnaires and interview schedules / topic guides take time to produce. Are these the best ways to gather the information you need? Who will do the work? Internal method or buy in outside help? How much will your overheads add to your overall budget?

Who gathers it?

Do you have the time, staff members, finance to collect the information? If not, how do you adapt your evaluation to make best use of the monies available?

3.

How much time do you have to set aside for the evaluation?

Have you allowed enough time to thoroughly plan and think about your methods? What happens if there are problems or complications in the early stages? Have you the flexibility to extend the data collection / interviewing / report writing period? If not, have you made provision for terminating early? How will this affect the service overall? If you terminate early, can you be sure you will have collected enough data to make the evaluation worthwhile?

Is this enough to identify and gather the information?

Will you have the time to plan for which information you will need? Does this allow you the flexibility to make changes if things go wrong?

4.

How will the information be used?

Will the information be disseminated and will the recommendations be acted upon? If not, is there a point in doing this evaluation? If answers are already known, is this an appropriate use of resources? Will the recommendations be disseminated to the right people? Have the 'right people' been identified at the planning stages?

Who will make the changes if they are necessary?

Do resources exist to implement changes? Are there staff available who have the knowledge to make these changes? Is this covered by the budget for the evaluation?

Evaluation template – Process

1. Rationale

Why is the evaluation being done?

The answer to this question should be to describe how the program/service was implemented, who was involved and what problems were experienced. If it does not, is this type of evaluation necessary and / or appropriate?

Who is it for?

Will this identify any changes that need to happen to make the programme/service run as planned? Will it improve the programme/service?

Who will benefit from this evaluation?

Will the work changes that need to be made? Does it highlight potential areas for improvement?

2. Information Collection

What kind of information do you need?

Spending time on the planning stage is vitally important as it allows you to direct the evaluation in a way that maximises resources. Decide who you need to approach to get information. Commonly used methods for process evaluations are, documentation review, interviews with the service team, interviews with clients, focus groups at various stages of the implementation

How will it be gathered?

Questionnaires and interview schedules / topic guides take time to produce. Are these the best ways to gather the information you need? Who will do the work? Internal method or buy in outside help? How much will your overheads add to your overall budget?

Who gathers it?

Do you have the time, staff members, finance to collect the information? If not, how do you adapt your evaluation to make best use of the monies available?

3. Resources

How much time do you have to set aside for the evaluation?

Is this evaluation an integral part of the project implementation? If not, is the documentation available from the start of the implementation? What happens if there are problems or complications in the early stages? Have you the flexibility to extend the data collection / interviewing / report writing period? If not, have you made provision for terminating early? How will this affect the service overall? If you terminate early, can you be sure you will have collected enough data to make the evaluation worthwhile?

Is this enough to identify and gather the information?

Will you have the time to plan for which information you will need? Does this allow you the flexibility to make changes if things go wrong?

4. Dissemination

How will the information be used?

Will the information be disseminated and will the recommendations be acted upon? If not, is there a point in doing this evaluation? If answers are already known, is this an appropriate use of resources? Will the recommendations be

disseminated to the right people? Have the 'right people' been identified at the planning stages?

Who will make the changes if they are necessary?

Do resources exist to implement changes? Are there staff available who have the knowledge to make these changes? Is this covered by the budget for the evaluation?

Evaluation template – Outcome

1. Rationale

Why is the evaluation being done?

The answer to this question should be to identify the impact of a service or project. If it does not, is this type of evaluation necessary and / or appropriate?

Who is it for?

Will this identify the impact of the service/project under evaluation?

Who will benefit from this evaluation?

Does it highlight populations groups or service users who have benefited from this project/service?

2. Information Collection/Analysis

What kind of information do you need?

Spending time on the planning stage is vitally important as it allows you to direct the evaluation in a way that maximises resources. Decide who you need to approach to get information. Commonly used methods for outcome evaluations are surveys collecting both quantitative and qualitative data.

How will it be gathered?

Questionnaires and interview schedules / topic guides take time to produce.

Are these the best ways to gather the information you need? Who will do the work? Internal method or buy in outside help? How much will your overheads add to your overall budget?

Who gathers it?

Do you have the time, staff members, finance to collect the information? If not, how do you adapt your evaluation to make best use of the monies available?

Who analyses it?

3. Resources

How much time do you have to set aside for the evaluation?

Do you have access to the information you need? Has the information you need be routinely collected? What happens if there are problems or complications in the early stages? Have you the flexibility to extend the data collection / interviewing / report writing period? If not, have you made provision for terminating early? How will this affect the service overall? If you terminate early, can you be sure you will have collected enough data to make the evaluation worthwhile?

Is this enough to identify and gather the information?

Will you have the time to plan for which information you will need? Does this allow you the flexibility to make changes if things go wrong?

4. Dissemination

How will the information be used?

Will the information be disseminated and will the results be acted upon? If not, is there a point in doing this evaluation? If answers are already known, is this an appropriate use of resources? Will the recommendations be disseminated to the right people? Have the 'right people' been identified at the planning stages?