Evaluation Working Group Webinar

Evaluation in Population Health: What is it and how do we go about it?

22nd November 2021
1:00 – 2:30pm

East of England Population Health Research Hub
EoE PHResH
Introduction to PHResH and the Evaluation Working Group
Dr Helen Green, NHSEI Healthcare Public Health/DHSC Office for Health Improvement and Disparities (hosted by East Suffolk & North Essex NHS Foundation Trust)

Deciding on evaluation:
1:10 – 1:40
Why do we evaluate and when should we do it?
Prof Andy Jones, Norfolk County Council

Planning an evaluation:
1:40 – 1:55
In Conversation: Embedding evaluation in local authority work
Prof Wendy Wills, University of Hertfordshire & Dr Jo Mackenzie, Hertfordshire County Council

1:55 – 2:05
What are the key stages of evaluation?
Dr Yannis Pappas, University of Bedfordshire

2:05 – 2:10
Collaborative approaches to planning evaluations
Dr Judith Fynn, NHSEI Healthcare Public Health

2:10 – 2:20
Question and Answer Session

2:20 – 2:30
What’s next?
Resources, funding and future training and support opportunities through the East of England PHResH Evaluation Working Group
Introduction to EoE PHResH and the Evaluation Working Group

Dr Helen Green
NHSEI Healthcare Public Health/DHSC Office for Health Improvement and Disparities (hosted by East Suffolk & North Essex NHS Foundation Trust)
Introduction to EoE PHResH
Regional hubs of engagement will catalyse more structured, long-term and effective connection between practitioners and researchers, and ensure that health and social care is based on best available evidence.

Academy of Medical Sciences Report, Health of the Public 2040 Recommendation:
The story so far...

2016
Health of the Public 2040 Report
Recommended the development of regional hubs of engagement between public health practitioners and researchers

Regional Workshop
attendees at a regional workshop on public health research needs and priorities had great appetite to create a regional Hub, and for the East of England to be an exemplar of good engagement and practice across sectors

2017

Scoping of Academic and Practitioner Needs
A survey of 145 academics and service based public health specialists and practitioners:
- 78% of academics
- 75% with a service background
responded that they would benefit from a regional research and evaluation Hub

2018

Steering Committee and Position Paper
Steering Committee formed with representatives from academia, local authorities, PHE and regional research infrastructures.
A position paper was co-designed outlining the Hub’s purpose and core priorities.

2019

Hub Launch and COVID-19 Support
Programme Manager Role commenced
The Hub network was established and put into action to provide evidence and support for regional and national COVID-19 responses:
- >80 academics offered skills and capacity to support regional COVID-19 responses
- 120 subscribers to our network
- 406 academics and practitioners read our newsletter
- 422 academics and practitioners attended Hub events

2020

Sustainable Strategic Plan
Develop a sustainable strategic plan and secure funding to grow the Hub and its activities
Launch Evaluation Working Group to build evaluation capacity within the region
Foster collaborations for evidence generation and facilitated knowledge exchange at regional and national levels
The East of England Population Health Research Hub (EoE PHResH) is a collaborative network of population health practitioners, academics and regional research infrastructures in the East of England region.

**Our aims**

- Connect researchers, practitioners, decision-makers, local communities and funders to co-design, communicate and apply responsive research and population health evaluations.
- Leverage expertise, maximise collaboration and provide responsive, accessible evidence to guide local, regional and national population health approaches.

**Our partners**

- Map regional needs and assets
- Align and foster collaborations
- Facilitate knowledge exchange
- Disseminate and translate research
- Build evaluation capacity
- Support co-designed research bids
What we do

Map regional needs & assets
We are able to signpost to local research and evaluation expertise through our comprehensive mapping of regional public health research assets.

Align & foster collaborations
Facilitate collaborations by linking local authority and NHS practitioners and decision-makers with local academic expertise through our established network.

Facilitate knowledge exchange
We provide platforms to effectively share regional research and opportunities through our newsletters, seminars, webinars, workshops and summits.

Collate, disseminate & translate research
We gather and communicate regional research and support the translation of research findings and evaluations into policy and practice.

Support co-designed research bids
In partnership with the NIHR Research Design Service, we facilitate links and provide support for academics and service practitioners wishing to submit funding applications for joint research projects or evaluations.

Build evaluation capacity
We utilise expertise in the region to deliver training and workshops to build evaluation skills across the region and demonstrate the impact of local public health approaches.
Introduction to our Evaluation Working Group
2025 Vision

Regional research strategy
developed through deep insights of local needs and assets, co-designed with LAs, academia, PHE, NHS and representatives of the community which maximises impact of regional research and addresses research gaps.

Evidence informing policy & practice
Researchers communicate evidence in accessible ways for practitioner audiences; practitioners translate research into policy and practice; public health practitioners and researchers exchange knowledge, discuss challenges, problem solve and take action together to make progress.

Established research culture
within public health practice with a system which enables workplace exchange between practice and academia; public health apprenticeships and academic skill development across the region.

Excellence in evaluation
utilise expertise in the region to build evaluation skills within the region; demonstrate the impact of local public health approaches through research collaborations; enable findings to inform future interventions.

Sustainable, connected regional network
of public health practitioners and researchers who collaborate to provide an evidence-based approach to improve population health.
Purpose:

The EoE PHResH Evaluation Working Group are interested in drawing together existing evaluation expertise from across the region to promote learning and help build evaluation capacity in local authorities.

We plan to:

1. Understand regional evaluation assets and needs through surveys and mapping exercises
2. Deliver seminars, workshops and drop-in clinics to stimulate culture change and up-skill practitioners
3. Signpost to existing resources and developing practical resources
4. Identify opportunities for funding and resources to meet needs
5. Use Evaluation Working Group Meetings to review usefulness of previous activities and plan upcoming activities
Deciding on evaluation
Why do we evaluate and when should we do it?

Prof Andy Jones
Norfolk County Council
Why do we evaluate and when should we do it?

Andy Jones
What is evaluation?

The action of evaluating or determining the value of (a mathematical expression, a physical quantity, etc.), or of estimating the force of (probabilities, evidence, etc.).

*Oxford English Dictionary*

But….

Not everyone values the same things.

Everyone's views matter, but we can’t evaluate everything and we can’t include everyone.

Therefore an evaluation will be an abstract simplification of the complexity of real life.
How can we simplify reality?

Source: Scottish Government, 5-step approach to evaluation
Why might we evaluate?

- Because we want to find out how well an intervention works (effectiveness, fidelity (delivery process), value for money) in the absence of current evidence.
- Because we want to generate new evidence.
- Because we want to know what to spend money on.
- Because we have been told to.
What are the wrong reasons?

- Because we can’t do it properly (and are hence set to fail) but do something anyhow.
- Because we want to prove that something is good (or prove that it is bad!).
- When we already know the answer.
How much should we spend on evaluation?

- A 10-week communal physical activity programme for residents of 30 care homes

A) £0
B) £1,000
C) £100,000
D) £1,000,000
How much should we spend on evaluation?

1) £0
2) £1,000
3) £100,000
4) £1,000,000
How much should we spend on evaluation?

1) £0 - You’ve got to be joking
2) £1,000
3) £100,000
4) £1,000,000
How much should we spend on evaluation?

1) £0 - You’ve got to be joking
2) £1,000 – Qualitative process evaluation, output measurement
3) £100,000
4) £1,000,000
How much should we spend on evaluation?

1) £0  - *You’ve got to be joking*
2) £1,000 – *Qualitative process evaluation, output measurement*
3) £100,000 – *Waiting list control, outcome evaluation, process evaluation*
4) £1,000,000
1) £0  - You’ve got to be joking
2) £1,000 – Qualitative process evaluation, output measurement
3) £100,000 – Waiting list control, outcome evaluation, process evaluation
4) £1,000,000 – Fully-powered randomised controlled trial with pilot and feasibility stages, valuation, process evaluation
How do we decide how complex to go?

What’s the budget?
What’s the timescale?
What’s the need?
What’s the desire?
What’s the novelty?
What’s feasible?
What’s necessary?
Evaluability assessment can help

A systematic, collaborative approach to the planning of evaluation projects

• Engage stakeholders
• Clarify intervention goals
• Develop a theory of change
• Decide whether a useful evaluation can be carried out at reasonable cost

Source (Craig 2018)
What would you do?

- Option 1: Don’t evaluate, just get on with delivery.

- Option 2: Perform a light touch evaluation (monitoring): Monitor outputs and check on fidelity of delivery.

- Option 3: Perform a full evaluation: Use a robust method, measure outcomes, processes and value for money.
You have commissioned a weight loss intervention that is designed by a large commercial provider. A large randomised controlled trial undertaken in the USA has shown the intervention to be effective and cost effective for participants.
Scenario 2

A) No evaluation  
B) Light touch evaluation  
C) Full evaluation  

You have commissioned a community health trainer service from the same provider for 10 years. An evaluation undertaken 8 years ago suggested the service being provided was effective and cost effective. You commission the service for a further 3 years.
Planning an evaluation
In Conversation: Embedding evaluation in local authority work

Dr Jo Mackenzie
Hertfordshire County Council
and
Prof Wendy Wills
University of Hertfordshire
What are the key stages of evaluation?

Dr Yannis Pappas
University of Bedfordshire
The Key Stages of Evaluation

Dr Yannis Pappas
Director of Centre for Health Service Organisation and Delivery
University of Bedfordshire
Introductions

- Director, Research Centre for Health Service Organisation and Delivery
- Reader (Associate Professor) in Health Service Organisation and Delivery
- Head of PhD School, Institute for Health Research

Externally:
- Expert evaluator for the European Commission (EIT Health)
- Editorial Board Biomed Central
- Head Research a Exchange and Knowledge Exchange Faculty in BHSCA
- NIHR and other NHS Advisory Boards
- Trained Academic GPs with the London Deanery
- Other academic and clinical committees
Evaluation research is the systematic assessment of the worth or merit of time, money, effort and resources spent in order to achieve a goal.
A real-life guide to evaluation...
1. A wide audience is watching

Funders, donors, local and central government, senior management, client/user-groups, auditors, regulatory bodies, the media, staff...
Most importantly...

An inescapable need to understand ‘what is going on’ in your organisation and whether the plans you are making and interventions you are delivering are worth keeping as they are, discard them or improve them.
2. Where are you in the divide?

**Worst case scenario**
- Interventions are decided top down
- Designed around weak evidence
- Informed by personal agendas rather than national priorities
- Users are not consulted

**Best case scenario**
- Interventions are designed bottom up, informed by strong evidence and following a consultation with users and the extensive network of providers.
3. Impact and Process evaluation

• **Impact evaluation**
  To assess whether an intervention is effective in changing user outcomes (health & behaviour) as well as affecting efficient use of resources.

• **Process evaluation**
  Understand barriers and facilitators for change (communication, organisational readiness, support mechanisms, IT...).
What sort of impact evaluation?

- **Feasibility study**: to ascertain the likelihood of completing the project successfully.
- **Pilot study**: small-scale preliminary study conducted to evaluate, duration, cost, adverse events.
- **Observational study**: to assess the impact of an intervention normally compared to a baseline observation over time.
- **Trial** (randomised or not): impact of intervention on those who receive it compared to those who don’t.
What sort of **process evaluation**?

- Normally uses qualitative methods (interviews, focus groups, large group discussions) but also surveys to explore what may be affecting the implementation of an intervention. Matters of accessibility, usability, utility may come up too.
An evaluation snapshot

**Summative EVALUATION**

- **IMPACT EVALUATION**
  - Costs & Health economics
  - Health outcomes

- **PROCESS EVALUATION**
  - Patient, carer and practitioner perspectives
  - Strategy and Implementation

- **Formative evaluation**

- **Feedback mechanisms and quality improvement**
4. Evaluation anxiety
‘Does it mean that something is wrong with my programme’?
Respect and admire the established
Strive for constant progress
5. You need someone to do it

- Funding may be necessary
  - funding is available from a number of sources
- Some sort of resource is certainly necessary
  - resources available locally
- Highly specialised and skilled people available
  - local Universities may be a good place to start
Thank you

yannis.pappas@beds.ac.uk
Collaborative approaches to planning evaluations

Dr Judith Fynn
NHSEI Healthcare Public Health
Collaborative approaches to planning evaluations
Dr Judith Fynn, NHSEI Healthcare Public Health

NHS England and NHS Improvement
Developing an evaluation framework for the Regional Digital First Primary Care Projects

Aims:

1. To provide a generic framework to facilitate systematic evaluation and reporting to capture and share the learning from each funded project/system
2. To ensure learning is captured in a form that enables other systems to decide whether or not to implement a similar approach

Agreement of principles/requirements:

Evaluation plan & logic model to be included with each funding bid
Regular reporting at points during life of project
A final report that includes a logic model
Minimum data collection for maximum efficiency
Evaluation will be supported by regular EoE System Evaluation peer group sessions
“Evaluating Digital First Primary Care Projects - AN EVALUATION FRAMEWORK AND TIPS FOR BEST PRACTICE”
A Framework that will:

- Ensure intended outcomes, underpinning assumptions and factors that may influence a project, and feasible plans for measuring them, are clear at outset for each project

- Provide a useful working document as projects progress

- Enable projects to share findings in a consistent summary form to help other services, funders and relevant stakeholders make informed decisions

https://blog.jayyoms.com/
The process of developing and launching the guidance

Collaborative development of framework & logic model template

Testing with projects & gathering feedback

Delivery of workshop(s) on using logic models

Soft launch of to EoE Regional Team Managers & feedback

Launch to systems to inform planning, bids & funding

Use of guidance by funded systems – support available

Knowledge exchange across projects and systems, evaluation of implementation
Key points about the collaborative approach

• **Early engagement** from programme managers, academic partners, PH teams to agree aims, requirements & expectations

• Regular meetings & updates

• **Pragmatic/realistic approach** to develop an evaluation framework that can be embedded in practice

• Engagement with systems to test and revise framework

• **Flexibility** in the team to meet evolving needs & to support systems to **build capacity** for evaluation
Question & Answer Session
What’s Next?
Future plans:

Resources

- Signpost to existing resources
- Practical resource development (e.g. checklist, challenges and solutions guide)
- Identify opportunities for funding and resources to meet needs (e.g. Masters student projects)

What’s been delivered so far

Build evaluation capacity

- Ran evaluation workshops in Cambridge, Norfolk and Essex, working with the Universities of Cambridge, East Anglia and Essex.
- Facilitated and partnered on 2 regional evaluation projects.
- Co-hosted a regional social prescribing evaluation workshop with Hertfordshire County Council.

Learning opportunities

- Webinars and workshops
- Drop in clinics
Connect with us