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## CLAHC Evaluation Guide

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This guide has been developed for clinicians and NHS managers who are seeking to engage stakeholders in their area to evaluate a range of activities. The aim of this toolkit is to develop your knowledge of evaluation and aid you in the creation of evaluation plans and reports by using the toolkit's templates.

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# Evaluation Checklist

This checklist will help guide you in preparing your evaluation project. For further information please refer to the sections indicated.

<b>SCOPING (Section 1)</b>	<b>Yes</b>	<b>No</b>	<b>Not Applicable</b>
Is your project an evaluation?			
Has a similar evaluation been conducted elsewhere?			
Can the results be achieved without a full evaluation?			
Have you determined and agreed why are you conducting the evaluation?			
<b>PLANNING (Section 2)</b>	<b>Yes</b>	<b>No</b>	<b>Not Applicable</b>
<b>Stakeholders</b>			
Have you identified your stakeholders?			
Have you agreed your roles and responsibilities?			
Have you agreed how you will engage your stakeholders?			
Have you identified needs for training and support?			
Have you developed a steering group?			
<b>Who should evaluate/Expertise required</b>			
Have you agreed who will conduct the evaluation?			
Have you determined what expertise is available and required?			
<b>Designing your evaluation</b>			
Have you defined and agreed your evaluation questions?			
Have you agreed your aims and objectives?			
Have you agreed your evaluation methods?			
Have you agreed your data collection methods?			
Have you identified resources and associated costs?			
Have you obtained the relevant ethics/governance approval?			
Have you agreed on your timescales?			
Have you completed the Evaluation Plan Template?			
<b>CONDUCTING (Section 3)</b>	<b>Yes</b>	<b>No</b>	<b>Not Applicable</b>
<b>Data Collection</b>			
Have you determined what data collection sources you will use?			
Have you agreed who will collect the data?			
Have you collected your data?			
<b>Analysis</b>			
Have you agreed who will conduct the analysis?			
Have you analysed your data?			
Have you interpreted the results of your data analysis?			
<b>DISSEMINATING (Section 4)</b>	<b>Yes</b>	<b>No</b>	<b>Not Applicable</b>
<b>Compile report</b>			
Have you written a report?			
Have you written and agreed your recommendations?			
<b>Communicate findings</b>			
Have you agreed your audience?			
Have you agreed your key messages?			
Have you agreed your methods of communication?			
<b>IMPLEMENTING (Section 5)</b>	<b>Yes</b>	<b>No</b>	<b>Not Applicable</b>
Have you agreed how you will use your findings?			
Have you completed an action plan?			

# Introduction

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This guide has been developed for individuals and teams who are seeking to engage stakeholders in their area to evaluate a range of activities. The aim of this toolkit is to develop your knowledge of evaluation and aid you in the creation of evaluation plans and reports by using the toolkit's templates.

This toolkit is not a training package; however, the workbook can be used to guide your project group through the areas you need to consider throughout the process of planning and conducting an evaluation project.

Please remember that there is no magic formula to developing an evaluation plan. You will need to think about your objectives, the data you have available and the reporting you will be required to do. Done well, evaluation can improve your activity and give you a sense of achievement with a greater understanding of the impact evaluation can have on improving services.

# Using this Toolkit

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This guide has been split into five sections:

## **Section 1: Scoping for your Evaluation Project**

This section will define what is meant by evaluation and the various scoping work that needs to be done to ensure that work is not duplicated.

## **Section 2: Planning your Evaluation Project**

This section takes you through planning the stages of your evaluation and introduces you to the evaluation plan template.

## **Section 3: Conducting your Evaluation**

This section provides guidance on how to conduct your evaluation in an effective manner.

## **Section 4: Disseminating your Findings**

This section takes you through the various ways in which project findings can be disseminated it provides various templates that you can utilise.

## **Section 5: Implementing your Findings**

This section looks at how you can implement your findings/produce an action plan to ensure your recommendations are actioned upon.

These sections are supported by the accompanying Attachments:

### **Attachment 1: Evaluation Plan Template**

To be used to develop a plan for your evaluation project.

### **Attachment 2: Evaluation Report Template**

To be used to report the findings of your evaluation project.

### **Attachment 3: Evaluation Workbook**

To be used with teams to talk through evaluation.

# Section 1: Scoping for your Evaluation Project

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This section covers:

Section	Sub-sections
1.1 What is evaluation?	What is evaluation? How do you determine if its research, evaluation or audit? What can an evaluation tell you?
1.2 Sharing information	Has a similar evaluation been conducted elsewhere?
1.3 Is a full evaluation required?	Can you achieve the results without a full evaluation?
1.4 Define purpose	What are the reasons for conducting the evaluation?
1.5 Funding for evaluation	What funding is available for evaluation?
1.6 Checklist	Scoping checklist

## 1.1 What is evaluation?

### What is evaluation?

Evaluation is:

**“...a process that takes place before, during and after an activity. It includes looking at the quality of the content, the delivery process and the impact of the activity or programme on the audience(s) or participants. It is concerned with making an assessment, judging an activity or service against a set of criteria. Evaluation assesses the worth or value of something.”**

(Research Councils UK, 2011)

Evaluation is not a test, it is an activity that allows you to look at whether you have achieved your original aims and objectives and to reflect critically on your activities and processes. Evaluation projects ultimately lead to benefits through the knowledge gained and this knowledge can be used internally to inform change and externally to demonstrate achievements and challenges.

### How do you determine if it's research, evaluation or audit?

There is often some confusion as to whether a project falls within the realms of audit, research or evaluation. Many of the methods used in evaluation are also used within research, however, the focus is different.

It is very important that you clearly distinguish what your project is to ensure that your work adheres to ethical and governance standards. Table 1 displays some characteristics that can be applied to determine if your project is clinical audit, research or evaluation as well as examples of each. It is also worth getting a second opinion. Contact your relevant Research and Development or clinical audit teams within your organisation for advice.

**Table 1: Research, evaluation or audit?**

Activity	Characteristics	Example
<b>Clinical Audit</b>	Measures existing practice against evidence based clinical standards. All clinical audit must comply to clinical audit governance requirements.	Does our current practice comply with the NICE guidelines for the management of type 2 diabetes?
<b>Research</b>	Generates new knowledge that has the potential to be generalisable or transferable. All research must comply with research governance requirements.	Comparison of a structured education programme with prescribed medication for the management of type 2 diabetes.
<b>Evaluation</b>	Designed to support service improvement and it should always be well connected to action. It will not produce new generalisable or transferable knowledge.	How effective is NHS Leicester City's the structured education programme for type 2 diabetes at improving patient outcome?

Further guidance to help determine whether or not your project is research, evaluation or audit can be found on the Healthcare Quality Improvement Partnership website. A guide "Guide for Clinical Audit, Research and Service Review: An educational toolkit designed to help staff differentiate between clinical audit, research and service review activities" can be downloaded here <http://www.hqip.org.uk/assets/Downloads/Audit-Research-Service-Evaluation.pdf> [Accessed 19 December 2011]

## What can an evaluation tell you?

The kinds of questions that can be answered by evaluation include:

- Are we meeting the needs of our users/patients?
- How are people responding to a specific service, can we improve the programme?
- What happens to our users/patients as a result of following the programme?
- What is actually going on during a specific programme?
- Are we making the best use of our resources in delivering specific programmes?
- What is needed?
- What are the outcomes?
- How do costs and benefits compare?
- Does it meet required standards?
- Should it continue?
- How can it be improved?

## 1.2 Sharing information

### Has a similar evaluation been conducted elsewhere?

Utilise your library service for help to conduct a literature search for previous evidence to inform your evaluation. Also look at similar services/organisations (locally and nationally) that may have already looked at this area and are willing to share methodology tools and outcomes. Table 2 will help you to record this activity.

**Table 2: Has a similar evaluation been conducted elsewhere?**

Organisation/Area	Details	Person Responsible	Contacted/Date	Outcome
University Hospital Leicester (UHL)	Contact Dr Smith to see if educational programme has been implemented and evaluated.	Anne Garland	Yes	Programme used but not yet evaluated. Would like to be included in the dissemination plan.
University Hospital Coventry and Warwickshire (UHCW)	Contact Dr Brown to see if educational programme has been implemented and evaluated.	Anne Garland	Yes	Programme not implemented.

### 1.3 Is a full evaluation required?

#### Can you achieve the results without a full evaluation?

You may be able to answer your question and achieve the results you require in another, perhaps more cost effective, way. Full scale evaluation aims to look at all aspects of a service and this may not always be necessary. It may be more appropriate to focus your project on one area which will provide you with enough information to answer your question. Some examples of how you could do this are below:

1. Could you add a local audit to existing research findings to avoid a full-scale evaluation? This would still provide local data and give greater credibility.
2. Less structured feedback may be sensible in some situations including having discussions with individuals or groups of staff.

### 1.4 Define purpose

#### What are the reasons for conducting the evaluation?

There may be many factors involved that lead you to believe that conducting a particular evaluation is a priority, these may include;

- The level of NHS priority that is being addressed;
- Patient or public pressure for better services in this area;
- The 'newness' of the service;
- Consideration of expansion of a service.

Whatever your driving forces, having a clear evaluation question that addresses a clear aim will help you to start the process of developing your evaluation project.

## 1.5 Funding for evaluation

### What funding is available for evaluation?

Funding for evaluation (as opposed to research) is limited. Evaluation doesn't set out to generate generalisable new knowledge so most often only clearly applies to the service being evaluated.

Usually, the service itself funds an evaluation or sometimes organisations that buy or commission a service will fund an evaluation. Since evaluations help services to establish such things as quality, perceived effectiveness, appropriateness, accessibility and value, the service will also benefit.

This leaves us with funders being the NHS trusts delivering the services or maybe purchasers, such as the NHS or Department of Health. Very occasionally, groups like The Health Foundation ([www.health.org.uk](http://www.health.org.uk) accessed 19 December 2011) or other charities will fund evaluations too.

## 1.6 Checklist

<b>SCOPING</b>	<b>Yes</b>	<b>No</b>	<b>Not Applicable</b>
Is your project an evaluation?			
Has a similar evaluation been conducted elsewhere?			
Can the results be achieved without a full evaluation?			
Have you determined and agreed why are you conducting the evaluation?			

# Section 2: Planning an Evaluation Project

This section covers:

Section	Sub-sections
2.1 Benchmarking and baselines	<ul style="list-style-type: none"> <li>▪ Benchmarking and baselines</li> </ul>
2.2 Types of evaluation	<ul style="list-style-type: none"> <li>▪ Types of evaluation</li> </ul>
2.3 Evaluation project plan	<ul style="list-style-type: none"> <li>▪ Example template</li> <li>▪ Complete example template</li> </ul>
2.4 Identify stakeholders	<ul style="list-style-type: none"> <li>▪ The need to involve others</li> <li>▪ Who are the stakeholders?</li> <li>▪ Project Team</li> <li>▪ Things to consider</li> <li>▪ Select an Evaluation Team</li> <li>▪ Stakeholder analysis</li> <li>▪ Who are the stakeholders?</li> <li>▪ Stakeholder assessment and engagement</li> <li>▪ Motivation and support</li> </ul>
2.5 Who should evaluate/develop expertise?	<ul style="list-style-type: none"> <li>▪ Who should conduct the evaluation?</li> <li>▪ Role of the evaluator</li> <li>▪ Developing expertise</li> <li>▪ Examples</li> </ul>
2.6 Develop the evaluation questions	<ul style="list-style-type: none"> <li>▪ How to formulate questions</li> <li>▪ Example questions</li> <li>▪ What are your aims?</li> <li>▪ What are your objectives?</li> <li>▪ Evaluation tools</li> </ul>
2.7 Evaluation methods	<ul style="list-style-type: none"> <li>▪ Advantages, limitations and considerations of methods</li> <li>▪ Types of evaluation</li> <li>▪ Evaluation strategies</li> </ul>
2.8 Identify resources	<ul style="list-style-type: none"> <li>▪ Do you have the time to conduct the evaluation?</li> <li>▪ Useful help and guidance</li> </ul>
2.9 Ethics and governance	<ul style="list-style-type: none"> <li>▪ Consent</li> <li>▪ Privacy and confidentiality</li> <li>▪ Risks and related benefits</li> </ul>
2.10 Checklist	<ul style="list-style-type: none"> <li>▪ Checklist</li> </ul>

## 2.1 Benchmarking and baselines

It sounds obvious, but before trying to change something you should establish baseline measures so that you can see if there has been a change for the better. Benchmarks and baselines are similar but both have distinct activities.

Figuratively speaking a *baseline* is a 'line in the sand'. It measures important performance characteristics for future reference. After a baseline is established, we can then take other measurements and compare them to the baseline.

A *benchmark* is best understood by way of the original derivation of the word itself:

Tradesmen engaged in repetitive tasks, such as sawing lumber to consistent lengths, often placed notches on their workbenches to indicate placement of boards prior to cutting. Literally, a benchmark became a standard for comparison and an indicator of past success.

e.g. in the NHS best clinical practice should be considered the benchmark to which all services should be compared and success measured from. In this context a NICE guideline would be considered an example of a benchmark.

## 2.2 Types of evaluation

An evaluation project can support any of the following three aims:

- To support the development of your activity (formative evaluation).
- To ensure you manage it better next time (evaluation of your processes).
- To assess the final impact of your activity (summative evaluation).

**Table 3: Types of evaluation**

Type	Description	Example
<b>Formative evaluation</b>	You should use formative evaluation during the development of the activity to test ideas, concepts, venues, timings and prototypes on representatives of the audience.	Collecting continuous feedback from patients who are attending an educational session and amending the session during the period of the evaluation project.
<b>Evaluation of your process</b>	You should evaluate the process of managing and delivering your activity. This will help you to do it better next time. This information is useful to peers and colleagues, and where possible should be shared with the wider public engagement community so that they can learn from your experiences.	Evaluation of a referral process to identify bottlenecks etc and using these to inform improvements in the process.
<b>Summative evaluation</b>	Summative evaluation is the type of evaluation with which people are most familiar. This looks at outcomes and measures, whether or not you have met your aims and had any impact on the audience. You should ask questions such as: <ul style="list-style-type: none"> <li>• How much did the audience benefit from your activity?</li> <li>• Did it change people’s understanding/knowledge or attitudes?</li> <li>• Has it influenced their actions/behaviour?</li> <li>• How big an impact did it have on those who engaged?</li> </ul>	Agreeing a set of outcome measures that will demonstrate success of introducing a structured education programme with prescribed medication for the management of type 2 diabetes.

## 2.3 Evaluation project plan

When planning your evaluation it is useful to complete an evaluation plan. A template for this can be found in Attachment 1. This can be used in conjunction with this guide, which provides detailed information that will assist you in completing the evaluation plan template. An example of an evaluation plan structure can be found in table 4.

### Example template

**Table 4: Evaluation plan structure**

Section	Details
Evaluation team	Include the members of your evaluation team; their time, availability, their skills and experiences and what their role will be in the evaluation project.
Introduction	The introduction introduces the major sections of the plan this should include: Evaluation question, summary and stakeholders.
Background	Identify how the evaluation builds on previous work, what was achieved and why this evaluation is necessary. Include information regarding the context within which this project is taking place.
Aims and objectives	<p>Aims - In this section list the aims of your evaluation project, your aims will address what you want to achieve by conducting this evaluation and the purpose of the evaluation.</p> <p>Objectives - List your objectives in this section, your objectives are the things that you need to do in order to achieve your aims.</p>
Ethics and governance	Address any ethical considerations that there may be e.g. the protection of the identity of participants.
Methods	This section should include details of the following: sample, evaluation design, methods, data collection and data analysis.
Resources and Cost	A detailed description of the resources that are required to complete this evaluation and any associated costs required.
Benefits of Evaluation	Identify the potential clinical impact and benefits to patients/carers or staff of conducting this evaluation. Highlight if there are any benefits in terms of cost-effectiveness.
Dissemination	Detail your plans for disseminating the findings of your evaluation to your stakeholders and wider if applicable e.g. a report, presentation, workshop, poster etc. Include what the implications of your evaluation may be for future practice, your plans for using the findings of your evaluation. And, who will act on these findings?
Timeline	In this section detail when each of your evaluation activities will occur. It may be helpful to include a table or a Gantt chart.

## 2.4 Identify stakeholders

### The need to involve others

**‘People are more likely to accept and use information, and make changes based on information, when they are personally involved in and have a personal stake with decision making processes aimed at bringing about change’**

(Patton, 1982)

Stakeholders can offer important insight into services and activities and can offer a number of benefits to your evaluation project:

- The resources for conducting evaluation may expand
- The evaluation results will have more credibility
- The evaluation is more likely to lead to change, if necessary
- It is easier to define relevant evaluation questions
- You may find gaining access to information easier

### Who are the stakeholders?

A stakeholder is anyone who has an interest in your evaluation project and who may be involved in or affected by it. Potentially this could be a very wide audience but can include the following (please note that this list is not exhaustive):

- Policy-makers and decision-makers with responsibility for the service
- Commissioners/funding bodies responsible for setting up/funding the service/evaluation
- Managers/directors with responsibility for the service
- Staff/practitioners/volunteers responsible for the delivery of the service
- Patients/clients/users of the service
- Carers/relatives who have a friend or relative using the service

Stakeholders are sometimes divided into two groups, primary and secondary stakeholders:

*Primary stakeholders:* People who are directly affected by the service (benefiting or adversely affected) such as service users and staff.

*Secondary stakeholders:* all others who have a stake or interest in the service such as commissioners.

Generally those who are most likely to have an interest in evaluation are commissioners, management, staff, service users and carers: Commissioners because they provide finance, management and staff as they may in some sense be judged by the findings or be required to make appropriate changes to the service; service users and carers because they are likely to be affected by decisions made as a result of the evaluation. From the point of view of making the evaluation ‘useful and used’ these key stakeholders should be actively involved in shaping and focusing the evaluation. Developing good working relationships between stakeholders can also develop potential for future collaboration and facilitate wider networking.

### Stakeholder analysis

When planning an evaluation it can be useful to carry out a stakeholder analysis to consider who your stakeholders are, and how important and influential they are to your service. One way to do this is to list all your stakeholders and then analyse the list in terms of power, influence and the extent to which they are affected by the project or change. Each name is inserted into a four sector table as shown below:

**Table 5: Stakeholder analysis**

<b>High power</b>	<p style="text-align: center;"><b>Satisfy</b></p> <p>Opinion formers. Keep them satisfied with what is happening and review your analysis of their position regularly.</p>	<p style="text-align: center;"><b>Manage</b></p> <p>Key stakeholders who should be fully engaged through full communication and consultation.</p>
<b>Low power</b>	<p style="text-align: center;"><b>Monitor</b></p> <p>This group may be ignored if time and resources are stretched.</p>	<p style="text-align: center;"><b>Inform</b></p> <p>Patients often fall into this category. It may be helpful to take steps to increase their influence by organising them into groups or taking active consultative work.</p>
	<b>Low impact/stake holding</b>	<b>High impact/stake holding</b>

When considering the matrix you need to think about people who may be very important to your evaluation but who may typically have very little influence. If this is the case, you may want to think about how you can involve them and give them more influence.

**An example in use**

An evaluation project is being designed to evaluate the introduction of source coding by consultants. A list of stakeholders has been compiled and as the list is a long one, their relative power and influence within the system is analysed and the following table is produced:

<b>High power</b>	<p style="text-align: center;">Chief Executive Finance Director BMA rep</p>	<p>Consultant medical staff Clinical Coding Manager Finance creditor staff Medical Director Primary Care Trust Clinical Governance Lead</p>
<b>Low power</b>	<p style="text-align: center;">Medical records staff Medical secretaries</p>	<p>Clinical coding staff Clinical audit Junior doctors IT systems manager</p>
	<b>Low impact/stake holding</b>	<b>High impact/stake holding</b>

Further information and guidance on stakeholder analysis can be found at the NHS Institute for Innovation and improvement website:

[http://www.institute.nhs.uk/quality\\_and\\_service\\_improvement\\_tools/quality\\_and\\_service\\_improvement\\_tools/stakeholder\\_analysis.html](http://www.institute.nhs.uk/quality_and_service_improvement_tools/quality_and_service_improvement_tools/stakeholder_analysis.html) [Accessed 19 December 2011]

## The role of stakeholders

It is important to remember that stakeholders can be involved in evaluation in a number of ways. The table below shows stakeholders participation in evaluation, an illustration adapted from McNeish (1999) adapted by Marsh and Glendenning (2005) for the Primary Care Evaluation Toolkit.

**Table 6: The role of the stakeholder**

Role of Stakeholder	Role of evaluation/nature of evaluation
Stakeholder as non-participant	Evaluator develops evaluation focus, designs and implements study and does not involve stakeholders at any stage.
Stakeholder as 'evaluation objects'	Evaluator develops evaluation focus and designs study which involves stakeholders in a passive capacity e.g. observational study.
Stakeholders as passive respondents	Evaluator develops evaluation focus, designs study which involves people as respondents (e.g. of structured interviews/survey). Participation is limited to giving consent and responding within interview confines.
Stakeholders as active respondents	As above except stakeholder is given greater freedom to express views and influence the questions. A wide variety of methods may be used e.g. focus groups, semi-structured interviews, creative techniques. Evaluator may invite comment on findings.
Stakeholder as consultants	Evaluator develops focus but involves stakeholder in shaping the design and implementation of the evaluation. Stakeholder may also be involved in other aspects e.g. dissemination, steering group member.
Stakeholders as evaluators	Stakeholder involved in design and implementation and has varying degrees of direct involvement in carrying out the evaluation

The table below will help you to identify who the stakeholders are and how they can be engaged in your evaluation project.

**Table 7: Stakeholder assessment and engagement**

Stakeholder category	Interest or perspective	Role in the evaluation	How and when to engage
Diabetes Research Network	Possible new need for further research to be conducted.	Feedback of the results	On completion of the report and possible presentation/workshop

## Project Team

It is important to ensure that you identify who needs to be included in the project team. The table below will help you to identify who needs to be represented, how they will be involved and enable you to identify what resources you have and what is lacking.

**Table 8: Identification of the project team**

Who?	How will this member be identified?	Time available	What skills/experience do they have?	Role within project	Identified?
Service User Representative	Trust Membership Manager	1 hr per month	Experience of diabetes services, working on evaluation/research projects. Connections to Service User Groups	Steering group member, help guidance	Yes

## Motivation and support

### Service user/ carer motivation and support

Where service users and carers are key stakeholders they can be involved at every stage of the process; setting the outcome measures, developing ways of collecting data, carrying out the evaluation, helping in the analysis and dissemination. It is important to consider what will motivate people to get involved, what their role and responsibility will be, and how they will receive feedback.

You may also need to consider what training and support may be needed by those who get involved. Remember to reimburse service users and carers for any travel expenses they might incur as a result of their involvement. Contact your local Patient and Public Involvement (PPI) networks or your Trust Membership/Involvement Manager for further information.

### Persuading clinicians/managers to be involved

As with service users, practitioners and their managers may need to be persuaded that there is a good reason to be involved. There are many reasons that they may not want to be involved such as the stress and tension of being away from their normal duties and the time required to participate.

Robson (2000) gives five broad suggestions about what might be done to avoid some likely problems when staff act as participants:

- Deliver on promises about what will happen and when
- Allow for release time from normal duties (this time tends to be underestimated in many evaluation studies)
- Recognise that practitioners may be seen by their colleagues as in some way 'privileged' and avoid this by ensuring some general organisation benefit flows
- Avoid really problematic organisation settings unless the evaluation is about 'problematic settings'

### Vulnerable and/or hard to reach groups

Stakeholder involvement is central to good evaluation, it needs care and attention, and it particularly needs careful consideration when there are vulnerable and/or hard to reach groups involved. Your local PPI groups will be able to provide help and advice on how to approach this.

## 2.5 Who should evaluate/develop expertise?

Not all projects will have an independent evaluator. Evaluation is a critical thinking process, and successful project leads and staff do not readily delegate their thinking to someone outside the project. Still, there are times when it is appropriate to utilise people with evaluation expertise that are not part of the project team to remain impartial or when you do not have capacity internally to conduct the evaluation. There are three types of evaluators: external evaluators, internal evaluators, and internal evaluators with an external consultant. You and your project team must agree what type of evaluator would be most beneficial to your project.

### **External evaluator**

External evaluators are contracted from an outside agency or organisation to conduct an evaluation. Often these are found at universities, colleges, other hospitals/departments, or consulting firms. Although external evaluators maintain their position within their own organisation (e.g. continue to work as a researcher at a university) they often have access to more resources than internal evaluators (i.e., computer equipment, support staff, library materials, etc.). They may have broader evaluation expertise and will have conducted evaluation or research in a similar area.

While external evaluators can offer a certain amount of objectivity to the project there are several drawbacks that need to be taken into account. Their lack of affiliation with the organisation can often leave them detached from the daily operations of the project, and thus have limited knowledge of the project's needs and goals, as well as limited access to project activities. Staff may also be reluctant to discuss activities with the evaluator, providing less accurate information for evaluation. This is why it is important to write a detailed service specification when commissioning an evaluation and also ensure an appropriate staff/team is commissioned.

*E.g.* A commissioning manager wants to evaluate a new educational intervention being used by a GP surgery to address patient's diets. He decides to commission a university professor and his team to conduct the evaluation.

### **Internal evaluator**

An internal evaluator refers to a person that is already a member of staff within your organisation. This internal evaluator could serve as both an evaluator and a staff member with other responsibilities. Because an internal evaluator works within the project, he or she may be more familiar with the project and its staff and community members, have access to organisational resources, and have more opportunities for informal feedback with project stakeholders. However, an internal evaluator may lack the outside perspective and technical skills of an external evaluator.

*E.g.* A diabetes nurse leading and conducting an evaluation on an education intervention being used by a colleague to address patient's diet.

### **Internal evaluator with an external consultant**

A final option combines the qualities of both internal and external evaluators. An internal staff member would be responsible for conducting the evaluation, and an external consultant assists with the technical aspects of the evaluation and helps gather specialised information. With this combination, the evaluation can provide an external viewpoint without losing the benefit of the internal evaluator's knowledge of the project.

*E.g.* A diabetes nurse leading and conducting an evaluation in collaboration with a university professor with a specialist interest in diabetes.

It is important to be aware that internal evaluators are likely to have a vested interest in particular outcomes. This might impact negatively on the perceived credibility and objectivity of the findings.

(W.K. Kellogg Foundation, 1998)

## Role of the evaluator

Whether you decide on an external or internal evaluator or some combination of both, it is important to think through the evaluator's role.

The primary goals of evaluation are that stakeholders are engaged as active participants in the process and that the evaluation process and findings will be meaningful and useful to those ultimately responsible for improving and assessing the service or activity.

It is acknowledged that all evaluation projects are different however there are a number of critical skills of an effective evaluator which include the ability to:

- Listen;
- Negotiate;
- bring together multiple perspectives;
- analyse the specific situation;
- assist in developing a design with the evaluation team that will lead to the most useful and important information and final products.

It is important that you discuss the evaluation with your staff and stakeholders, think through all of the potential evaluator roles and relationships and determine which configuration makes the most sense given your particular situation, the purpose of the evaluation, and the questions you are attempting to address.

One important aspect to think through is the relationship between the evaluator and the primary stakeholders or the evaluation team. Questions to consider include:

- Should this relationship be distant or highly interactive?
- How much control should the evaluator have over the evaluation process as compared to the stakeholders/evaluation team?
- How actively involved should key staff and stakeholders be in the evaluation process?
- Who has overall responsibility for the evaluation?

Depending on the purpose of the evaluation and with whom the evaluator is working most closely (funders vs. programme staff vs. programme participants or community members), an evaluator might be considered a consultant for service improvement, a team member with evaluation expertise, a collaborator or an evaluation facilitator. You might look for an evaluator with methodological expertise and experience. If the evaluation is focused on facilitating programme improvements, you might look for someone who has a good understanding of the services and is reflective.

If the goal of the evaluation is to design a new service based on what works, an effective evaluator would need to be a strong team player with analytical skills. However, the most important overall characteristics to look for in an evaluator are the ability to remain flexible and to problem solve.

## Developing expertise

Once you have identified your stakeholders, project team and evaluator you may find that you are lacking some skills to be able to carry out your evaluation. If you are, then one solution, if you have a budget that allows it, is to find or commission some expertise to help you. This could link with the importance of

involving patients and the community, as it may be possible to do this via patient groups or community organisations.

You are likely to find some resources and expertise to help you with your evaluation within your organisation, for example the Research and Development or Service Improvement teams. You will need to be in touch with Research and Development staff for governance purposes and they may also connect you to various forms of help. Below is a list of web sites that will help you to consider your evaluation and research methods skills.

Full details of a very wide range of research training courses, throughout the UK, and updated regularly can be found on the Department of Health research training website: <http://www.rdlearning.org.uk> [Accessed 19 December 2011]

#### **The Centre for Reviews and Dissemination**

Based at the University of York has useful definitions and further information under 'Review Methods and Resources' and a page of relevant Links. <http://www.york.ac.uk/inst/crd/> [Accessed 19 December 2011]

#### **NIHR Research Design Service – East Midlands**

A series of resource packs addressing a range of research skills and processes including interviews, statistics, questionnaire and survey design have been developed.

[http://www.rds-eastmidlands.nihr.ac.uk/resources/cat\\_view/13-resource-packs.html](http://www.rds-eastmidlands.nihr.ac.uk/resources/cat_view/13-resource-packs.html) [Accessed 19 December 2011]

#### **NHS Institute for Innovation and Improvement Research and Evaluation Service**

The Research and Evaluation Service offer a number of resources to help develop evaluation and research projects.

[http://www.institute.nhs.uk/research\\_and\\_evaluation/general/research\\_and\\_evaluation\\_home.html](http://www.institute.nhs.uk/research_and_evaluation/general/research_and_evaluation_home.html) [Accessed 19 December 2011]

## **2.6 Developing the evaluation questions**

A well considered and succinct evaluation question is very important for the success of your evaluation. Your evaluation question will provide a useful framework for planning your evaluation.

### **How to formulate questions**

Your evaluation questions are essentially the questions that your evaluation project will answer. When developing your evaluation question you need to consider;

- Your intended outcomes
- Who you are reporting to
- The time and resources available

### **Example questions**

Examples of some typical evaluation questions are:

- What is needed?
- Does what is provided meet user/patient/client need (relevant to a proposed service)?
- Does it attain its goals or objectives?
- What are the outcomes?

- How do costs and benefits compare?
- Does it meet required standards?
- Should it continue?
- How can it be improved?

Although you may wish to answer all of the above questions time and resources may not allow this. It is therefore advisable that you have one key focus. If your evaluation question is too broad you will need to refine it in order to make it achievable within the time and resources that are available to you.

**You will need to ensure that your evaluation question is clear, answerable, specific and relevant but your question must not be determined by a pre-decided evaluation method or technique.**

## What are your aims?

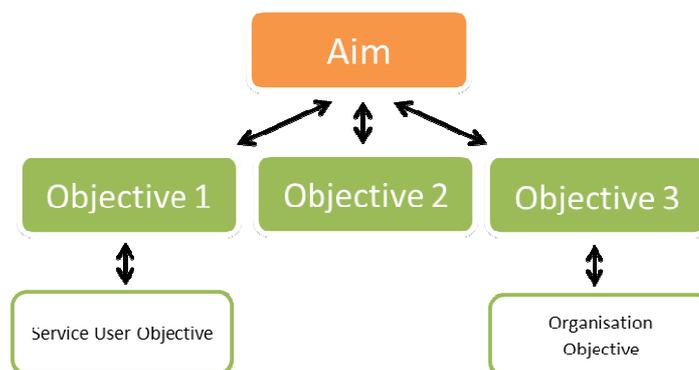
Before you conduct your evaluation you will need to consider and clarify your overall aims. Your aims are closely linked to your evaluation question. To set your aims you will need to consider;

- What do you want to achieve?
- What is the purpose of your evaluation?

## What are your objectives?

Once you have set your aims you will need to set your objectives, these are the things that you need to do to in order to achieve your aims. Objectives may be informed by many different groups including service users and the organisation as a whole. Objectives should be realistic as the outcome of your evaluation will be measured against your objectives. Figure 1 demonstrates the relationship between aims and objectives.

**Figure 1: The relationship between aims and objectives**



Objectives should be;

- Specific**
- Measurable**
- Achievable**
- Relevant**
- Time-bound**

SMART has become a well-known acronym, but working through the list in this order may not be the best way to set about developing your objectives. Table 9 provides further information on SMART.

**Table 9: The SMART acronym**

<b>Specific</b>	What exactly do you want to do, who with and for whom?
<b>Measurable</b>	Can you actually measure whether or not you have achieved your objectives?
<b>Achievable</b>	Is the objective achievable? In particular within your time frame, resources and organisational context?
<b>Relevant</b>	Will achieving this objective contribute to your overall aim?
<b>Time-bound</b>	When do you want to achieve this objective and when do you think you will be able to achieve this?

When you have completed planning your aims and objectives you will need to inform your evaluation project team of these. From your list of stakeholders look at what they would like to know, what evidence they would find credible and whether they are represented on your evaluation project team.

Table 10 below will help inform the project group of the aims and objectives of the evaluation and what potential information could be collected. This table will also help you to plan what information the project group would find useful and credible and will help ensure that there is representation from your stakeholders on the evaluation project team. This table can then be used when you are planning your evaluation methods, please see section 3 of this guide.

**Table 10: Developing the evaluation question**

<b>Who wants to know</b>	<b>Representation on Project Group</b>	<b>Interests, expectations, evaluation questions and what they want to know</b>	<b>Type of evidence they would find credible/useful</b>
Carers	John Smith, Carer Group Representative	Does the structured education programme for type 2 diabetes help my husband control his diabetes?	Patient reported feedback, incident reporting.

## Evaluation tools

It is important that you spend a substantial amount of time planning what methods and tools you are going to use to carry out your evaluation, carefully considered aims and objectives will facilitate this process. Completing an evaluation table is a helpful way of supporting you're planning. Please see table 13 section 3.1 for an example of an evaluation table.

## 2.7 Ethics and governance

Your evaluation should be ethical and adhere to your organisation's governance standards. When conducting an evaluation you will not normally need to have a full ethical review. If you are unsure, contact your Research and Development of Governance Department for clarification. There is a number of research and clinical governance issues that you will need to consider. The key message of this section is to contact people with responsibility in these areas to make sure you receive the best advice and make appropriate plans for your work.

## Consent

Before beginning your evaluation you will need to decide whether it is necessary to acquire voluntary, written informed consent from participants (whether staff, patients or public). Written informed consent will involve an information sheet and a consent form. The information sheet must clearly define the purpose of the evaluation, what involvement the participant will have and also any possible risks and benefits that may arise from participation. The consent form should be explicit regarding what the participant is consenting to and be signed and dated by the participant and the person taking consent. The National Research Ethics Service provides comprehensive guidance and templates for the development of consent forms and information sheets which can be adapted for your evaluation <http://www.nres.npsa.nhs.uk/applications/guidance/consent-guidance-and-forms/> [Accessed 19 December 2011]

You will need to consult the Mental Health Act (2007) if you are involving participants who may be unable to consent for themselves.

## Privacy and Confidentiality

Statutes (e.g. Data Protection Act 1998, Human Rights Act 1998, Health and Social Care Act 2001) and guidelines (e.g. GMC Confidentiality (2009), Caldicott Committee (1997), NHS Confidentiality Code of Practice (2003)) are in place to ensure protection of privacy and maintenance of confidentiality. Care should be taken to ensure that your evaluation is in line with these statutes and guidelines regardless of whether it is conducted by an internal or external evaluator. Issues to consider include:

### **Confidentiality**

- Data processed only by staff bound by confidentiality agreement (all NHS staff)
- Do not share information inappropriately – do not discuss identifiable participant information outside of the evaluation team.

### **Anonymisation**

- Identifiable information should only be used when absolutely necessary (e.g. name, date of birth, NHS number, address)
- Each participant can be given an ID number and a separate key can be used to identify participants with their ID number and name. The key and the data collected with the participants ID number should be stored completely separately.

### **Data storage**

- If data is going to be stored electronically it should be password protected on an encrypted computer or memory stick
- If data is to be stored as hard copies then it should be locked in a filing cabinet in a locked office
- Think carefully about who really needs access to your collected data and restrict access to the specified individual/s
- Data should be destroyed when no longer needed.

## Risks and related benefits

Some groups of people may be particularly vulnerable or at risk e.g. those without power or diminished power (those in hospital or prison), children and those who are unable to speak for themselves, those in the public eye or who may be placed in the public eye as a result of your evaluation, or those who may be adversely affected by your evaluation.

The associated risks of carrying out your evaluation must not outweigh the potential benefits of carrying out the evaluation.

## 2.8 Checklist

PLANNING	Yes	No	Not Applicable
<b><i>Stakeholders</i></b>			
Have you identified your stakeholders?			
Have you agreed your roles and responsibilities?			
Have you agreed how you will engage your stakeholders?			
Have you identified needs for training and support?			
Have you developed a steering group?			
<b><i>Who should evaluate/Expertise required</i></b>			
Have you agreed who will conduct the evaluation?			
Have you determined what expertise is available and required?			
<b><i>Designing your evaluation</i></b>			
Have you defined and agreed your evaluation questions?			
Have you agreed your aims and objectives?			
Have you agreed your evaluation methods?			
Have you agreed your data collection methods?			
Have you identified resources and associated costs?			
Have you obtained the relevant ethics/governance approval?			
Have you agreed on your timescales?			
Have you completed the Evaluation Plan Template?			

# Section 3: Conducting an Evaluation Project

This section covers:

Section	Sub-sections
3.1 Collect Data	<ul style="list-style-type: none"> <li>▪ Types of Methods</li> <li>▪ Data sources (e.g. new or existing data)</li> </ul>
3.2 Analyse /Interpret Data	<ul style="list-style-type: none"> <li>▪ Types of analysis</li> <li>▪ Who will do the analysis?</li> <li>▪ Collate and check</li> </ul>
3.3 Checklist	<ul style="list-style-type: none"> <li>▪ Checklist</li> </ul>

## 3.1 Collect data

### Types of methods

There are two types of data collection, quantitative and qualitative. Table 11 provides a description of these two data collection methods.

**Table 11: Quantitative and qualitative data**

Type of data	Description	Data collection methods	Advantages	Disadvantages
Quantitative	Numerical data e.g. percentage, frequency	<ul style="list-style-type: none"> <li>• Experiments</li> <li>• Questionnaires</li> <li>• Interviews</li> <li>• Surveys</li> </ul>	<ul style="list-style-type: none"> <li>• Allows for a broader study with a greater number of participants</li> <li>• Can allow for great objectivity and reduce personal bias</li> <li>• Studies can be more easily replicated and compared</li> <li>• Provides data that is reasonably easy to analyse using statistical tests</li> </ul>	<ul style="list-style-type: none"> <li>• Limited in providing information on human perceptions</li> <li>• The research is often carried out in an unnatural environment - results may not be generalisable to 'real world' situations</li> <li>• Preset answers may not reflect the true opinion/feelings of the person but may just be the closest match</li> <li>• The development of structured answers may lead to 'structural bias' where the answers reflect the opinion/feeling of the researcher and not the participant</li> </ul>

Type of data	Description	Data collection methods	Advantages	Disadvantages
Qualitative	Non-numerical data e.g. transcripts from interviews, narrative records, written information from articles, newspapers etc.	<ul style="list-style-type: none"> <li>• Interviews</li> <li>• Observation</li> <li>• Focus group</li> <li>• Written documents</li> <li>• Questionnaire /surveys (requiring free text or open responses)</li> </ul>	<ul style="list-style-type: none"> <li>• Provides in-depth and detailed recording of attitudes, feelings and behaviours</li> <li>• Encourages people to expand on their responses</li> <li>• Can provide a detailed picture of a participant's experiences</li> <li>• Can be used to avoid pre-judgements</li> </ul>	<ul style="list-style-type: none"> <li>• Much smaller sample size due to time and resources required</li> <li>• Difficult to generalise from the data collected</li> <li>• Difficult to make comparison within participants and with previous studies' results</li> <li>• Results obtained may be dependent on the skills of the researcher</li> </ul>

There are advantages and disadvantages of both types of data collection, as demonstrated in table 11. Often a combination of both qualitative and quantitative methods will be necessary to answer your evaluation question. The type of method and techniques that you decide to use will be guided by your evaluation aims and objectives.

### Data sources (e.g. new or existing data)

Data for your evaluation may be collected from new sources e.g. questionnaires, face-to-face interviews or it may be collected from existing data sources, e.g. previously published data. To focus your ideas and aid your decisions around data collection methods and techniques, an evaluation table can be used. An example of an evaluation table is given in Table 12.

**Table 12: An example of an evaluation table**

Question	Data required	Method of data collection	Data Source	Who would collect the information?	How would it be collected	Issues for consideration
Do patients view that the structured education programme was effective in helping them to manage their type 2 diabetes	Patient feedback	Quantitative	Questionnaire	Practice Manager	Posted to patients	Confidentiality, response rate, postage costs, permission to distribute questionnaire

## 3.2 Analyse /interpret data

### Types of analysis

The data analysis techniques that you use will depend on the type of data collection method (quantitative/qualitative) that you use. You will need to plan how you are going to analyse your data before you begin your evaluation, and the time that it will take. This will ensure that you will obtain the type of data that you require to achieve your aims and objectives. It also helps to reduce the introduction of bias into your results i.e. that you are not manipulating your data analysis to obtain the results that you would like rather than the true results of the evaluation project. It is important that you consult a statistician before conducting any data analysis if you are not confident in doing so yourself. Below is some guidance on types of data analysis techniques and some considerations.

#### Quantitative data analysis

There are many different methods for analysing quantitative data; the type of statistical test that you perform will depend on the data collection method that you are using. The British Medical Journal has some excellent resources that are freely available on statistical analysis and choosing a statistical test for example please see:

<http://resources.bmj.com/bmj/readers/readers/statistics-at-square-one/13-study-design-and-choosing-a-statistical-test> [Accessed 19 December 2011]

You will need to ensure that you are collecting a large enough data sample to perform the specific data analysis tests that you are planning. You can use a sample size calculator to do this for example G\*Power, this is freely available from <http://www.psych.uni-duesseldorf.de/abteilungen/aap/gpower3/> [Accessed 19 December 2011]

#### Qualitative data analysis

As with quantitative data, there are many different methods for analysis that can be used for qualitative data. The data analysis technique that you choose will depend on the type of data that you are collecting. Qualitative data analysis: A user friendly guide for social scientists (Dey, 2005) is a freely available book with lots of useful information [http://drapuig.info/files/Qualitative\\_data\\_analysis.pdf](http://drapuig.info/files/Qualitative_data_analysis.pdf) [Accessed 19 December 2011]

### Who will do the analysis?

Be clear from the planning stages of your evaluation who will have responsibility for the data collection and analysis tasks to ensure that there are adequate resources and skills within your evaluation project team. Table 13 provides an example of planning your data analysis.

**Table 12: Planning data analysis**

Question	Method data collection	Method for data analysis	Who will interpret the results?
<i>Do Patients feel that the structured education programme was effective in helping them to manage their type 2 diabetes?</i>	<i>Quantitative</i>	<i>Excel Spreadsheet</i>	<i>Mr Black to attend course Excel and to undertake analysis.</i>

## Collate and check

### Data entry

Data entry can be a tedious and time consuming activity. Accuracy of data entered is important to ensure validity of your results. When planning your data analysis techniques it is sensible to begin to consider what type of database you will be using to enter your data, regardless of whether it is quantitative or qualitative.

Microsoft Excel has a data analysis package (version 2007 onwards) which is adequate for small data samples and basic analysis techniques (please see: Pace, 2007). However if you have a larger data set or you are planning more sophisticated quantitative data analysis techniques using a data analysis package is advisable. SPSS is the most widely used in healthcare but is not freely available so you may need to enquire within your Trust if this is available.

If you are conducting qualitative data analysis you may consider using a qualitative data analysis package such as NVivo. This will make analysis easier and timelier. However, if you decide to do this you will need to ensure that you have access to this package and someone in your team is skilled in its use or willing to attend training. Before data collection it is advisable that you decide on the type of qualitative data analysis that you will use as different methods require different formats and information.

### Data checking and cleaning

Despite your best efforts, when entering data there will be the occasional human error. To 'clean' your database and ensure that the data entered is reliable and accurate a few checks are essential. To do this you can;

- Look at minimum and maximum data points for variables, this will show up any unusual entries.
- Produce graphs to highlight any obvious errors
- Select at random 10% of your participants' data (e.g. if you have data for 100 participants randomly select 10 participants) and re-enter these data. You can then check for any data entry errors between the original and the re-entered data

## 3.3 Checklist

CONDUCTING	Yes	No	Not Applicable
<b>Data Collection</b>			
Have you determined what data collection sources you will use?			
Have you agreed who will collect the data?			
Have you collected your data?			
<b>Analysis</b>			
Have you agreed who will conduct the analysis?			
Have you analysed your data?			
Have you interpreted the results of your data analysis?			

# Section 4: Disseminating your Findings

This section covers:

Section	Sub-sections
4.1 Compile report and make recommendations	<ul style="list-style-type: none"> <li>▪ Reporting and how to structure an evaluation report</li> <li>▪ Reflecting and making recommendations</li> <li>▪ Learning Points</li> <li>▪ Referencing</li> </ul>
4.2 Communicate findings	<ul style="list-style-type: none"> <li>▪ Communicating evaluation results</li> <li>▪ Methods of communication</li> <li>▪ Adapting to your audience</li> <li>▪ Key messages</li> </ul>
4.3 Checklist	<ul style="list-style-type: none"> <li>▪ Checklist</li> </ul>

## 4.1 Compile report and make recommendations

### Reporting and how to structure an evaluation report

The most traditional and common way of communicating your evaluation results will be through a written formal report. Table 14 provides an example of an evaluation report structure. This structure can be flexible depending on the requirements of your stakeholders and the NHS organisation.

**Table 14: Evaluation report structure**

Section	Contents
Executive Summary	An executive summary may not be required for all evaluation projects but can be a useful way, either as part of the full report or a stand-alone document, of presenting the relevant data in a quick and easy to read manner for a chief executive, medical director, director of nursing, operational manager, practice manager, etc.
Introduction	<p>Aims - In this section list the aims of your evaluation project. Your aims will address what you want to achieve by conducting this evaluation and the purpose of the evaluation.</p> <p>Objectives - List your objectives in this section, your objectives are the things that you needed to do in order to achieve your aims.</p>
Methods	This section should include details of the following: Sample, Evaluation Design, Data Collection Methods and Data Analysis.
Results	Report the results of your data analysis. Follow a logical order and use tables and figures where appropriate. Do not duplicate the data reported. If it is reported in a table refer to this table in the text and indicate in the text the key trend or results that the data convey. Ensure that all tables and figures are labelled in numerical order with a clear, explanatory title e.g. the evaluation question being addressed.
Discussion	In this section refer to the objectives of your evaluation in turn, describe whether each objective was met and how the data supports this. Include a discussion about why the outcome occurred and refer to empirical evidence from you introduction if applicable. Also include any unexpected outcomes, lessons learnt, conclusions

Section	Contents
References	Include all references used in your report.
Action Plan	Complete an action plan outlining any recommendations, actions for these to be implemented and details of progress.
Appendices	Include copies of any questionnaires and interview schedules.

A template to help you to report the findings of your evaluation project can be found in Attachment 2.

## Reflecting and making recommendations

Recommendations are generally included at the end of evaluation reports and may propose changes to services or activities, or further considerations. More specifically, recommendations may suggest follow-up or future work that remains to be done, or advise caution on problems or weaknesses of the service or activity.

When making recommendations it is important to ensure that you:

- Focus each recommendation around one particular topic, issue, or problem.
- Give a concise background of the problem or issue.
- Provide a rationale--why is this change important? What will the impact be if the recommendation is put in place or not put in place?
- Include information about the various solutions the project team discussed, including implications and pros and cons.
- Prioritise the alternative solutions and explain their rationale.
- Include the key players and desired time frame for actioning recommendations.
- Use a written format.

You should always ensure that you identify areas for improvement and suggest ways that these can be achieved. Here are examples of some questions you could ask:

- What are the major areas of agreement in the evaluation?
- What are the main differences in people's perceptions of the service/activity?
- What can be done differently so that there is less discrepancy between planned outcomes and observed outcomes?
- What aspects of the service/activity have potential for development or change? What changes are suggested and what improvements could be achieved?
- What is the priority order for your recommendations?

Recommendations should be made and based on your evaluation findings and observations. Incorporate SMART (Specific, Measurable, Achievable, Realistic, Timely) principles in all recommendations (see section 2.6).

e.g. By 31st May 2012, the lead consultant for diabetes will have updated the local guidelines for the diet management of patients with type 2 diabetes.

Ensure that all recommendations detailed in your evaluation report are numbered and mirrored in the action plan along with the appropriate additional information.

## Learning points

Identify any learning points identified related to methodology and the process of the evaluation project which may need to be addressed or considered before undertaking further evaluation projects.

e.g. difficulties with identifying the patient sample; required updates to the questionnaire

## Referencing

All sources of information that you refer to in your report must be fully referenced in the reference section of the evaluation report. This includes journal articles, books, websites etc. Two common types of referencing system are Harvard and Vancouver. The Harvard system includes the surname of the author and the date that the source of information was published enclosed in brackets and embedded within the text

e.g. A recent study found that chocolate is good for you (Jones, 2010).

The full reference will then be reported in the reference section of the document arranged in alphabetical order of first author. The 'University library guide to the Harvard style of referencing' (Anglia Ruskin University, 2011) contains detailed information on how to reference using the Harvard style.

[http://libweb.anglia.ac.uk/referencing/files/Harvard\\_referencing\\_2011.pdf](http://libweb.anglia.ac.uk/referencing/files/Harvard_referencing_2011.pdf) [Accessed 20 December 2011]

The Vancouver system uses a numbering system, the first source of information to be referred to in the text will be given the number 1, the second number 2 etc.

e.g. A recent study found that chocolate is good for you<sup>1</sup>

The full reference for the source of information is then included in the reference section of the report next to its corresponding number in the order that it appears in the document. For more information on how to reference using the Vancouver style the University of Southampton's 'Citing and referencing guide: Vancouver style' (University of Southampton, 2009) is a useful resource.

<http://www.soton.ac.uk/library/resources/documents/vancouverreferencing.pdf> [Accessed 20 December 2011]

## 4.2 Communicate findings

### Communicating evaluation results

As we identified earlier during our stakeholder analysis (section 2.4) not all stakeholders have the same information needs. Some stakeholders, particularly those internal to the organisation, are interested in information about how services/activities can be improved. Other stakeholders are more interested in the overall effectiveness of the service/activity. Nor do all stakeholders want their information in the same format. Some stakeholders want information in abbreviated formats, with major findings highlighted. Others need more complete reports therefore you may need to repurpose your report for different audiences or stakeholders.

Developing a plan to disseminate your evaluation project results may involve three basic steps:

1. Review the list of stakeholders developed earlier. For which of these stakeholders will you develop a communication strategy? Which groups need or expect a report?
2. Decide which information would be of greatest interest to each stakeholder group. Again, revisit the list of stakeholder information needs developed earlier.
3. Decide on how you will present the information to each stakeholder group. Consider slide presentations, printed reports, executive summaries, newspaper articles, and oral reports. Include charts, graphs, photographs, and other graphics if appropriate.

You can use the following table to try and plan your dissemination to ensure that all stakeholders receive the appropriate key messages (please refer to ‘Key Messages’ in section 4.2) in the appropriate format.

**Table 15: Planning dissemination activities**

Target Audience	Information Needed	Key Messages	Dissemination method								
			Event/Workshop	Committee	Exec Summary	Report	Newsletter	Presentation	Article	Leaflet	Press Release
Nurses	Changes to treatment	<ul style="list-style-type: none"> <li>▪ Patients should now have the option of education session.</li> <li>▪ Referral process</li> </ul>	✓	✓		✓		✓			

## Methods of communication

Methods of communication can include:

### Reports/executive summaries

A brief written report is a valuable record of the evaluation and its findings. Key points from the report should also be shared with your identified stakeholders. Details of what should be included in an evaluation report can be found in section 4.1.

An executive summary is not required for all projects but can be a useful way, either as part of the full report or a stand-alone document, of presenting the relevant data in a quick and easy to read manner for a chief executive, medical director, director of nursing, operational manager, practice manager, etc. This will help the reader to identify whether they need to read the full report.

### Oral presentations

Presentations at conference, existing meetings, seminars or workshops can be a good way to disseminate your findings and generate discussions on the implementation of your recommendations.

### Posters, web pages,

Including information in posters and on internet/intranet sites can be a useful means of disseminating information such as guidelines, new services and changes to policy.

### Events/workshops

Organising specific events and workshops to communicate your findings can be a good way to target specific groups. This can be a good way to physically take people through new tools etc.

### Press releases

Press releases can be an effective way to communicate your findings to the wider population. Please remember that all external communications needs to go through your organisations communications team and ensure that you contact them prior to any press releases being publicised.

## Articles/leaflets

You may consider including articles in local journals or newsletters that are disseminated to your target audience or producing a leaflet that can be made available in key areas such as reception, outpatients etc.

## Adapting to your audience

Whether consciously or not, audiences greet most incoming messages with a question: “What’s in this for me?” If your intended audience thinks a message does not apply to them or doesn’t meet their needs, they’ll be far less inclined to pay attention to it. By adapting your communication to the needs and expectations of your audiences, you’ll provide a more compelling answer to the “What’s in this for me?” question and improve the chances of your message being successful.

To adapt your message to your audience, try to be sensitive to your audience’s needs, build a strong relationship with your audience, and control your style to maintain a professional tone. Try to remain ‘jargon free’ by ensuring that all abbreviations and acronyms are either clearly explained within your presentation or you provide readers with a glossary.

## Key messages

### What are key messages?

Key messages are the most important things to say on a specific subject to audiences. Your audience will have been determined by your stakeholder analysis and stakeholder engagement plan (section 2.4).

They are:

- Clear, concise, bite-sized chunks of information that **may** stand alone, but more likely are used to develop other materials, such as an evaluation report.
- Easy to read and easy for the audience to understand and remember. Say too much and you may lose your audience.
- Specific, and written in the active voice
- Memorable and persuasive – the audience should remember the key message and **in certain instances** be moved to action.

Key messages are **not** “spin” and they are **not** “dumbing-down.” They boost our overall communication effort by providing clarity, focus and precision. By being brief and simple, they can be understood by people who don’t have a scientific or technical background – and that’s usually your audience.

Key messages are not our **only** messages, merely the most important.

### Why are they important?

- Key messages help focus the target audience’s attention.
- They help us stay organised and in control.
- They keep everybody on the same page.
- Others can use key messages to fill in when the evaluator is unavailable and can maintain continuity.
- They help target audiences better understand the findings and improved understanding usually translates to improved support when recommendations need to be addressed.

We don’t develop key messages just to say something. They have a clear purpose.

## 4.3 Checklist

<b>DISSEMINATING</b>	<b>Yes</b>	<b>No</b>	<b>Not Applicable</b>
<b><i>Compile report</i></b>			
Have you written a report?			
Have you written and agreed your recommendations?			
<b><i>Communicate findings</i></b>			
Have you agreed your audience?			
Have you agreed your key messages?			
Have you agreed your methods of communication?			

# Section 5: Implementing your Findings

This Section Covers:

Section	Sub-sections
5.1: Use results	<ul style="list-style-type: none"><li>▪ What should be done with the results?</li><li>▪ Action Plans</li><li>▪ Integrating into a business case</li></ul>
5.2 Checklist	<ul style="list-style-type: none"><li>▪ Checklist</li></ul>

## 5.1 Using your results

### What should be done with the results?

Evaluation is often designed to support service improvement and it should always be well connected to action (for example in providing good quality evidence for its stakeholders within given timescales that can help support evidence based decision making). These issues can not only affect your decision about the need for an evaluation (section 2.2), the resources your need (section 3.6) and the methods that you use (section 3.5) but should also be reviewed when looking to implement your findings.

The Knowledge-to-Action Cycle (Graham et al., 2006) provides a theoretical framework for the implementation of knowledge into action. The NIHR CLAHRC for LNR has produced a practical Implementation Toolkit that will provide you with the information and tools to utilise your evaluation findings. These can be found at [www.clahrc-lnr.nihr.ac.uk](http://www.clahrc-lnr.nihr.ac.uk) [Accessed 1 February 2012]. The knowledge to action cycle includes 7 phases;

1. Identify review and select knowledge
2. Adapt knowledge to local context
3. Assess barriers to knowledge use
4. Select, tailor and implement interventions
5. Monitor knowledge use
6. Evaluate outcome
7. Sustain knowledge use

Further information on the knowledge to action cycle can be found on the KT Clearing House Website <http://ktclearinghouse.ca/knowledgebase/knowledgetoaction> [Accessed 19 December 2011]

The example below demonstrates how this model can be used practically to implement service improvement or change.

### Example

**Evaluation question:** Is the structured education programme effective in helping to improve the patient's management of type 2 diabetes?

**Results:** You have found that the educational programme for the management of type 2 diabetes has had a significant impact on patient's management of their illness in combination with their regular prescription of medication in 10 GP practices within Leicestershire.

**Implementation:** You wish to roll-out the programme to GP practices across NHS Leicester City.

**Table 16: The KTA Cycle, an example**

Phase of the KTA Cycle	Example
Identify, review and select knowledge	Identify the gap between the knowledge that you have gained from your evaluation and rolling out the educational programme to further GP practices. During this stage you will need to identify the GP practices that would be suitable and willing to implement the educational programme.
Adapt knowledge to the local context	The educational programme will need to be tailored or customised to the particular GP practice. You would need to consider the individual differences between the GP practices e.g. resources, patient population.
Assess barriers to knowledge use	This will include the knowledge, attitudes and behaviours of the staff and patients at the GP practice. Identification of the potential barriers can be through the use of interviews, questionnaires and focus groups with GPs and patients. Identification of barriers will enable interventions to try and overcome these to be put in place.
Select, tailor and implement interventions	This stage may include training workshops and materials for the use of the educational programme, dissemination of the evaluation results highlighting the effectiveness of the educational programme, outreach visits to address barriers related to knowledge, attitudes and behaviours etc
Monitor knowledge use	You will need to monitor whether there has been successful uptake of the educational programme in combination with medication. This could be achieved using interviews with practitioners – use of the educational programme, changes in attitudes and practice.
Evaluate outcome	Evaluation of the outcome of using the new educational programme is essential during the implementation process. You will need to assess whether there has been an improvement in patients management of their type 2 diabetes in line with the original evaluation results.
Sustain knowledge use	Sustain the use of the educational programme, this may include training and workshops to refresh knowledge, and ‘train the trainer techniques’.

### Action plans

When planning the implementation of service changes an action plan is very useful. Table 16 below provides an example of an action plan table.

**Table 17: Example action plan**

Recommendation	Action Required	Completed By	Person Responsible	Comments	Action Status
<i>The introduction of a structured education programme to help manage type 2 diabetes to be rolled out to local GP Practices.</i>	<ol style="list-style-type: none"> <li><i>Identify willing GP practices to implement the intervention.</i></li> <li><i>Arrange training workshops and materials to enable roll out.</i></li> </ol>	<i>October 2011</i>	<i>Dr Black</i>	<i>Presentation to be given at Clinical Commissioning Group to identify GP practices</i>	<i>2.</i>

**KEY (Change status)**

- 1 Recommendation agreed but not yet actioned
- 2 Action in progress
- 3 Recommendation fully implemented
- 4 Recommendation never actioned (please state reasons)
- 5 Other (please provide supporting information)

**Integrating into a business case**

If the implementation of your evaluation results requires the use of resources, such as funding or staff time, you will need to write a business case. The business case is generally in the form of a formal document and will capture the reasons for initiating your implementation project, the expected benefits, risks and costs.

Your NHS organisation will have its own specific guidance and template for completion of a business case.

**5.2 Checklist**

<b>IMPLEMENTING</b>	<b>Yes</b>	<b>No</b>	<b>Not Applicable</b>
Have you agreed how you will use your findings?			
Have you completed an action plan?			

# Glossary

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<b>Active Voice</b>	Writing in the active voice means constructing sentences where the subject “acts” e.g. <u>I</u> threw the ball, <u>You</u> are making too much noise.
<b>Analysis</b>	Data analysis involves examining and processing (data analysis) data, in order to answer the questions that the project is trying to address. It involves identifying patterns and drawing out the main themes.
<b>Clinical Audit</b>	Measures existing practice against evidence based clinical standards. All clinical audit must comply to clinical audit governance requirements
<b>Collaboration</b>	Collaboration involves active, on-going partnership of stakeholders in the evaluation process. For example, stakeholders may take part in a project group for a project, or collaborate with the evaluator to design, undertake and/or disseminate the results of project.
<b>Consultation</b>	Consultation involves asking stakeholders for their views about research, and then using those views to inform decision-making. This consultation can be about any aspect of the evaluation process.
<b>Commissioner</b>	A commissioner is the person (or organisation) who asks for a piece of evaluation/research to be carried out.
<b>Empirical Evidence</b>	Evidence relating to or based on experience or observation. This type of evidence is necessary for a theory to be confirmed.
<b>NICE</b>	National Institute for Health and Clinical Excellence.
<b>NIHR</b>	National Institute for Health Research.
<b>Outcome Measure</b>	Outcome measures are measurements of the effects of a treatment or service. They might include physical measurements – for example measuring blood pressure, or psychological measurements – for example measuring people’s sense of well-being.
<b>Patient and Public Involvement (PPI)</b>	The active involvement of people in research processes so that research is carried out ‘with’ or ‘by’ members of the public rather than ‘to’, ‘about’ or ‘for’ them
<b>Primary Data</b>	Data observed or collected directly from first-hand experience.

<b>Research</b>	Generates new knowledge where there is no or limited research evidence available that has the potential to be generalisable or transferable. All research must comply with research governance requirements
<b>Secondary Data</b>	Primary data that was collected by someone else or for a purpose other than the current one.
<b>Service User or User</b>	A service user is someone who uses or has used health and/or social care services because of illness or disability. Some people do not like this term because they feel it has negative connotations.
<b>Systematic Review</b>	Systematic reviews aim to bring together the results of all studies addressing a particular research question that have been carried out around the world. They provide a comprehensive and unbiased summary of the research.
<b>Qualitative Data</b>	The term qualitative data is concerned with describing meaning which often involves describing things in terms of categorizations or qualities.
<b>Quantitative Data</b>	The term quantitative data is used to describe a type of information that can be counted or expressed numerically. This type of data is often collected in experiments, manipulated and statistically analysed. Quantitative data can be represented visually in graphs, histograms, tables and charts.

## Further Reading

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### **Evaluation: Practical Guidelines, Research Council UK**

This guide is designed for those who lead projects intended to engage general audiences in science, social science, engineering and technology and the social, ethical and political issues that new research in these areas raises. <http://www.rcuk.ac.uk/Publications/policy/Pages/Evaluation.aspx> [Accessed 19 December 2011]

### **HQIP, A Guide for Clinical Audit, Research and Service Review**

An educational toolkit designed to help staff differentiate between clinical audit, research and service review activities. <http://www.hqip.org.uk/guide-for-clinical-audit-research-and-service-review/> [Accessed 19 December 2011]

### **Primary Care Service Evaluation Toolkit Version 1.5**

Marsh, P., & Glendenning, R (2005). *Primary Care Service Evaluation Toolkit Version 1.5*. Available at [http://www.camstrad.nhs.uk/documents/Researchers/evaluation\\_toolkit.pdf?preventCache=08%2F08%2F2005](http://www.camstrad.nhs.uk/documents/Researchers/evaluation_toolkit.pdf?preventCache=08%2F08%2F2005) [Accessed 19 December 2011]

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## Attachments

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### Attachment 1: Evaluation Plan Template

To be used to develop a plan for your evaluation project.

### Attachment 2: Evaluation Report Template

To be used to report the findings of your evaluation project.

### Attachment 3: Evaluation Workbook

To be used with teams to talk through evaluation.