Wessex Academic Health Science Network

NHS

Hampshire & Isle of Wight
Social Prescribing Network

Social Prescribing and Health & Wellbeing – Impact and Evaluation

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Session plan

1. Setting up an evaluation (10mins) - *please have your mobile phone ready for a quick mentimeter poll*
2. Enacting an evaluation (10mins) - *please have your mobile phone ready for a quick mentimeter poll*
3. Workshop activity – group work (20mins)
4. Workshop activity – group feedback (10mins)
5. General Q&A (10mins)

Setting up an evaluation

- Who needs to know and what do they want to know? (Service users, commissioners, providers, NHS England, others)

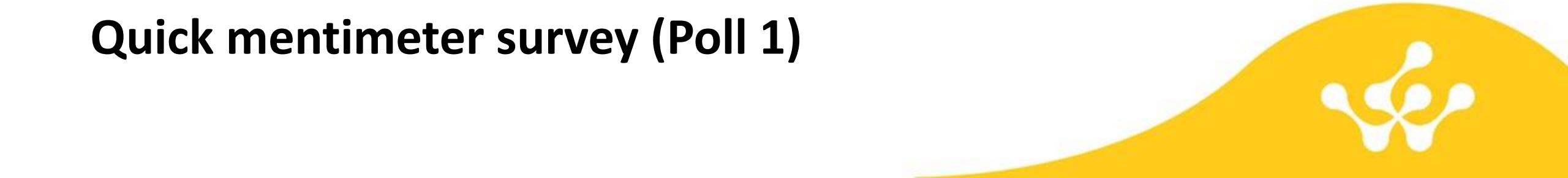
- Why ask? To understand **how to improve a service**, to decide **whether or not to continue funding a service**, to understand which models of care **work best** and which to spread

- What should we investigate about the intervention?
  - What has worked / not worked?
  - Why did it work / not work? (exploring active ingredients)
  - Importantly, nuanced questions deliver nuanced answers

Setting up an evaluation

- How developed is the intervention you wish to evaluate?
- To what extent has the intervention been implemented?
- What scope of evaluation do you wish to undertake?
- What financial and time constraints are there on the evaluation?
- How complex are the Information Governance arrangements to conduct the evaluation?

Quick mentimeter survey (Poll 1)



Conducting an evaluation - Mixed methods

Quantitative methods

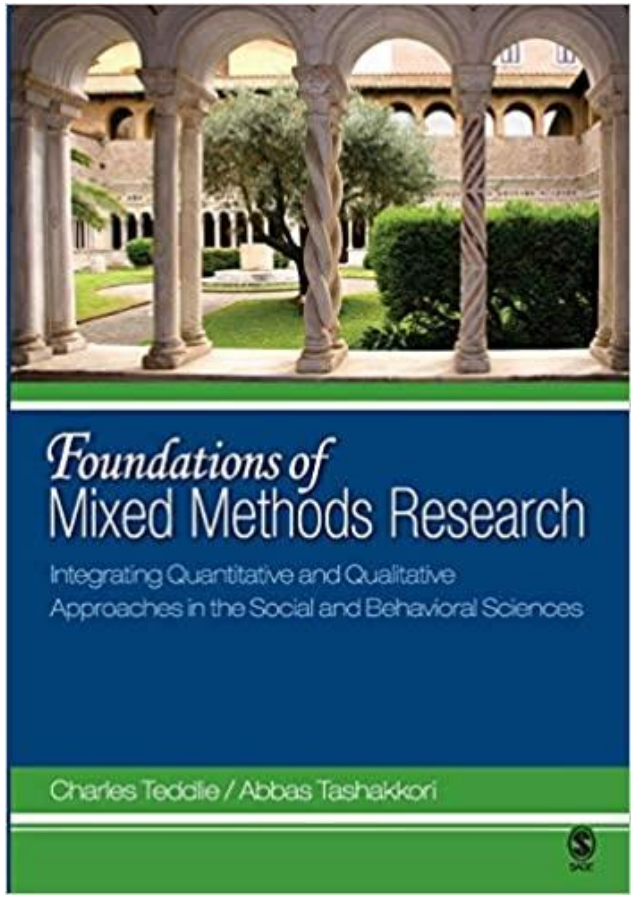
- Impact data
- Service level activity
- Surveys
- Audits

Qualitative methods

- Focus groups
- Interviews
- Non-participant observation
- Ethnography

Mixed methods designs

1. Concurrent triangulation design
2. Sequential triangulation design

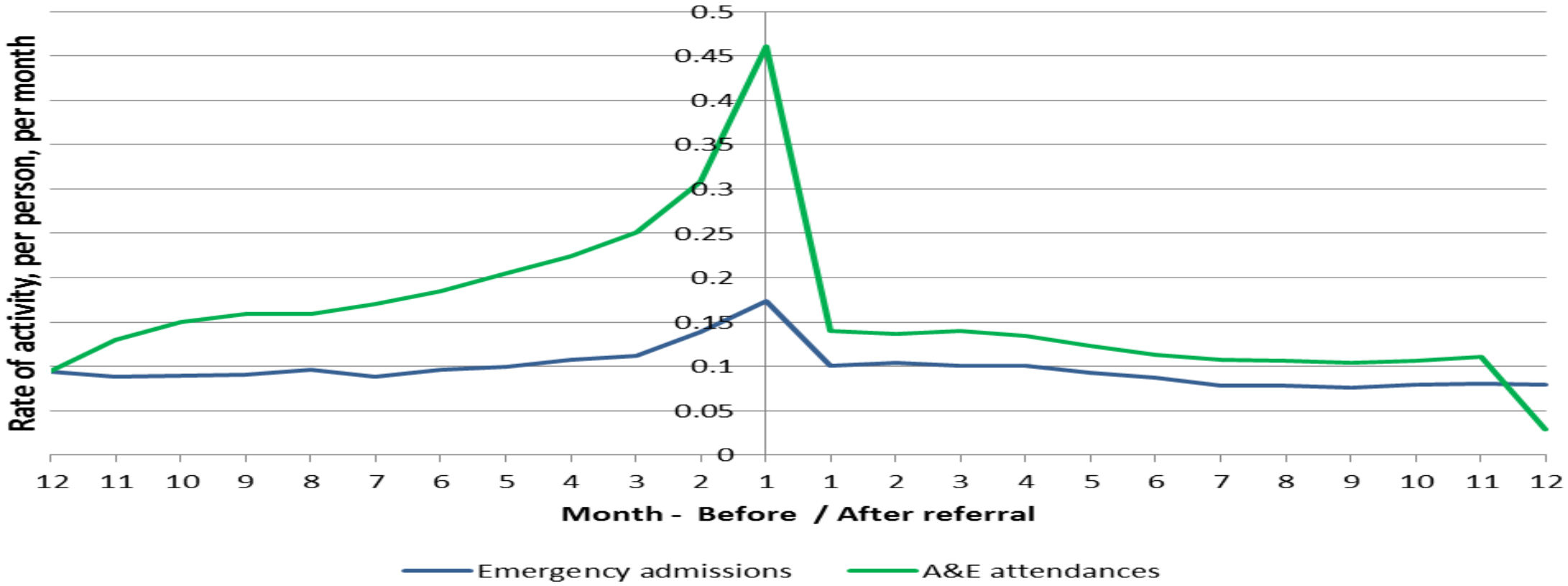


Tools and techniques

Methodologies	Examples of where information could be sourced from existing activities
Interviews	Existing 1:1s with staff, asking patients for feedback at existing appointments
Community Discussions	Using established MDT meetings or posters on staff room walls to capture people's thoughts
Exit polling	Ask a small sample (e.g. every third or fifth user or staff member of a service)
Transect walks	Think about physically walking a patient/user/staff journey or pathway
Focus Groups	Consider using existing team meetings
Mini surveys	Think about using online survey tools (e.g. MS Forms)
Community Mapping	Process mapping techniques (mapping the old and comparing it to the new)
Secondary Data Collection	Consider data that's been collected for other purposes but could provide useful information to triangulate, e.g. previous and current activity data
Group Discussions	Use existing networks, colleagues in different departments/trusts
Service Surveys	Regular, established surveys may provide new insights
Direct Observation	Think about visiting services/teams

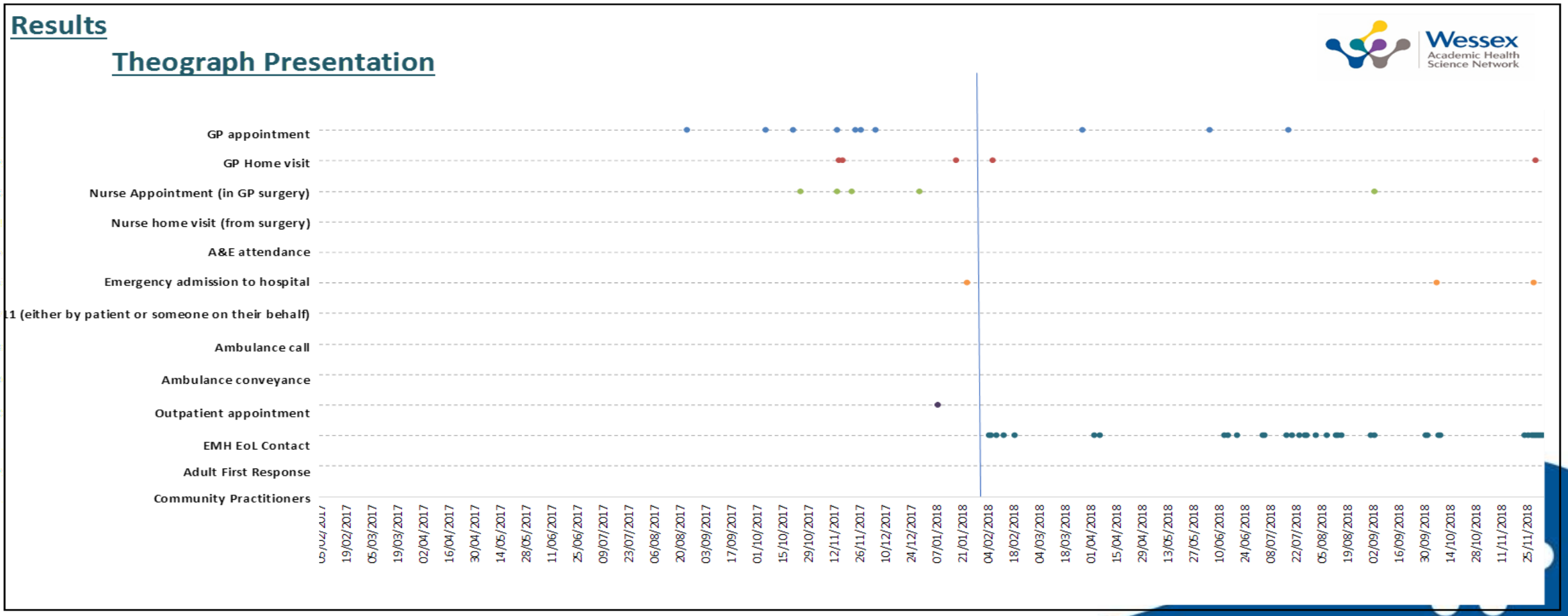
Service activity

- Take a long view of the impact on health and social care



Service activity

- Longitudinal audits are a good option if you can gain access to relevant data



Social Return on Investment

What is social value?

- Social value a way to quantify how different interventions affect people's lives – the overall impact on people's wellbeing, or their quality of life. It is a way of measuring the positive benefits your work has on both individuals and communities.
- Social Value UK and Housing Associations' Charitable Trust (HACT) have produced a **Social Value Bank** that can be used to assign proxy values for outcomes. The new UK Social Value Bank contains a suite of **88 outcomes** that speak to the business of social housing. Each outcome has a defined financial metric, which incorporates a wellbeing value, a health top up value and, where applicable, an Exchequer value (savings to the state).

https://hact.org.uk/tools-and-services/uk-social-value-bank/

1. **Identifying key stakeholders**
2. **Mapping outcomes** – what changes and for whom
3. **Giving outcomes a value** – measuring outcomes and applying proxy values where necessary.
4. **Establishing impact and attribution of impact**
5. **Calculating the SROI** - the SROI ratio is calculated by dividing the total value of outcomes by the total value of inputs across all stakeholders.
6. **Sharing** the results of the SROI analysis with stakeholders and responding to their feedback

Synthesising data / findings

- Synthesis can be used to **confirm** the robustness of different sources of data
- Synthesis can be used to have one set of data **explain / elaborate** on another
- Contribution Analysis

Mayne, J. (2008) Contribution Analysis: An approach to exploring cause and effect, ILAC methodological brief, available at https://web.archive.org/web/20150226022328/http://www.cgiar-ilac.org/files/ILAC_Brief16_Contribution_Analysis_0.pdf (archived link)

Quick mentimeter survey (Poll 2)

Workshop activity – Logic Model: Thinking one through

INPUTS	ACTIVITIES	OUTPUTS	OUTCOMES	IMPACTS
Identify the resources (inputs) required to undertake the **activities**. Inputs are the financial, human, and material resources used for the development intervention. • *Staff; Budget; Time; Equipment; Partners; Materials; Premises*	Specify actions needed to perform through which inputs, such as funds, technical assistance and other types of resources are mobilised to produce specific **outputs**.	The products and services which result from a development intervention; may include changes resulting from the intervention which are relevant to the achievement of **outcomes.**	The likely or achieved short-term and medium-term effects of an intervention's outputs that will influence overall goal **impacts**.	Positive and negative, primary and secondary long-term effects produced by an intervention or change, directly or indirectly.
Examples: Local programme co-ordinator, venue, protocols, toolkits, rehabilitation equipment	**Examples:** Health awareness courses, rehabilitation activities, stop smoking courses, multidisciplinary team meetings	**Examples:** Number of people attending clinic, number of people receiving training	**Examples:** Improved quality of health following attendance at rehabilitation course, Positive experience of GPs towards career their development and opportunities	**Examples:** Demonstrable impact at system level in emergency admissions for disease exacerbation, Overall impact on GP retention in the workforce

< IF > **< THEN >**

Workshop activity – Logic Modelling

- Breakout into maximum of 4 groups and develop the logic model sheet given to you
- **AIM: develop the inputs, activities, outputs (things to count, e.g. number of referrals), outcomes (short-term) and impacts (long-term) for your group-chosen social prescribing initiative**
- We're not expecting a finished article of course! Its just helpful to get some ideas down on paper. Suggest limiting it to just 3 factors per column.
- Discuss in your groups for 20mins
- Feedback back to the whole group (3mins per group)

Key messages & Q&A

Key messages:

1. Ask yourself what do commissioners of services need to know
2. Carefully consider your evaluation questions
3. Aspire to develop the most robust evaluation possible using mixed methods
4. Develop a logic model to support the intervention rollout and evaluation activities
5. Consider how to synthesize different data sources

General Q&A: Do you have any questions about setting up and / or conducting an evaluation of a social prescribing initiative?

Further information

- Wessex AHSN Insight library:

https://wessexahsn.org.uk/innovation-insight-library

- Email addresses:

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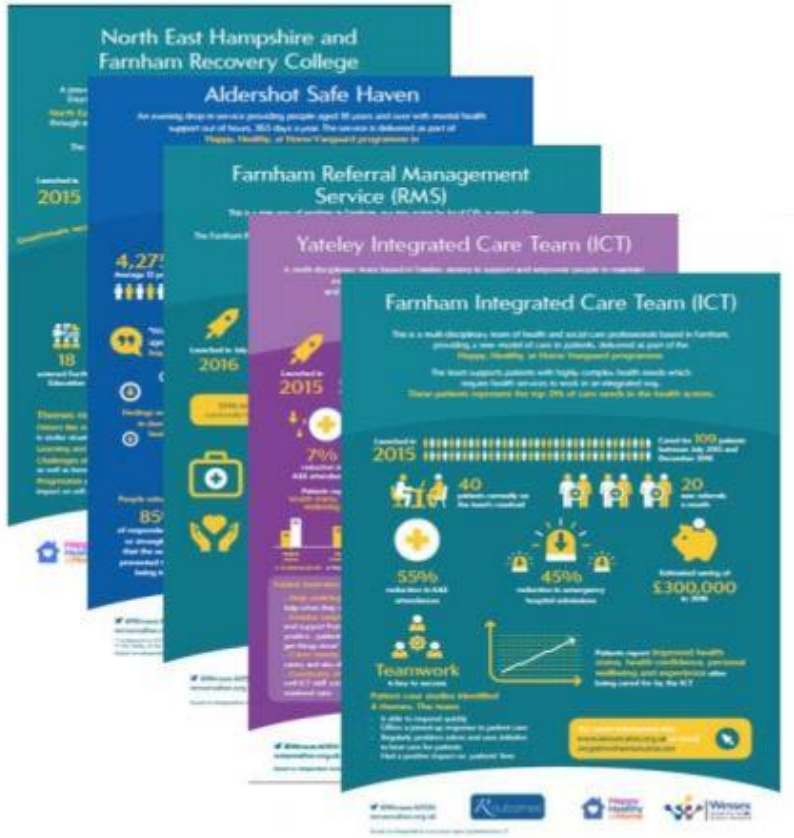


References and resources

Magenta Book:

- The Magenta Book - GOV.UK (www.gov.uk)

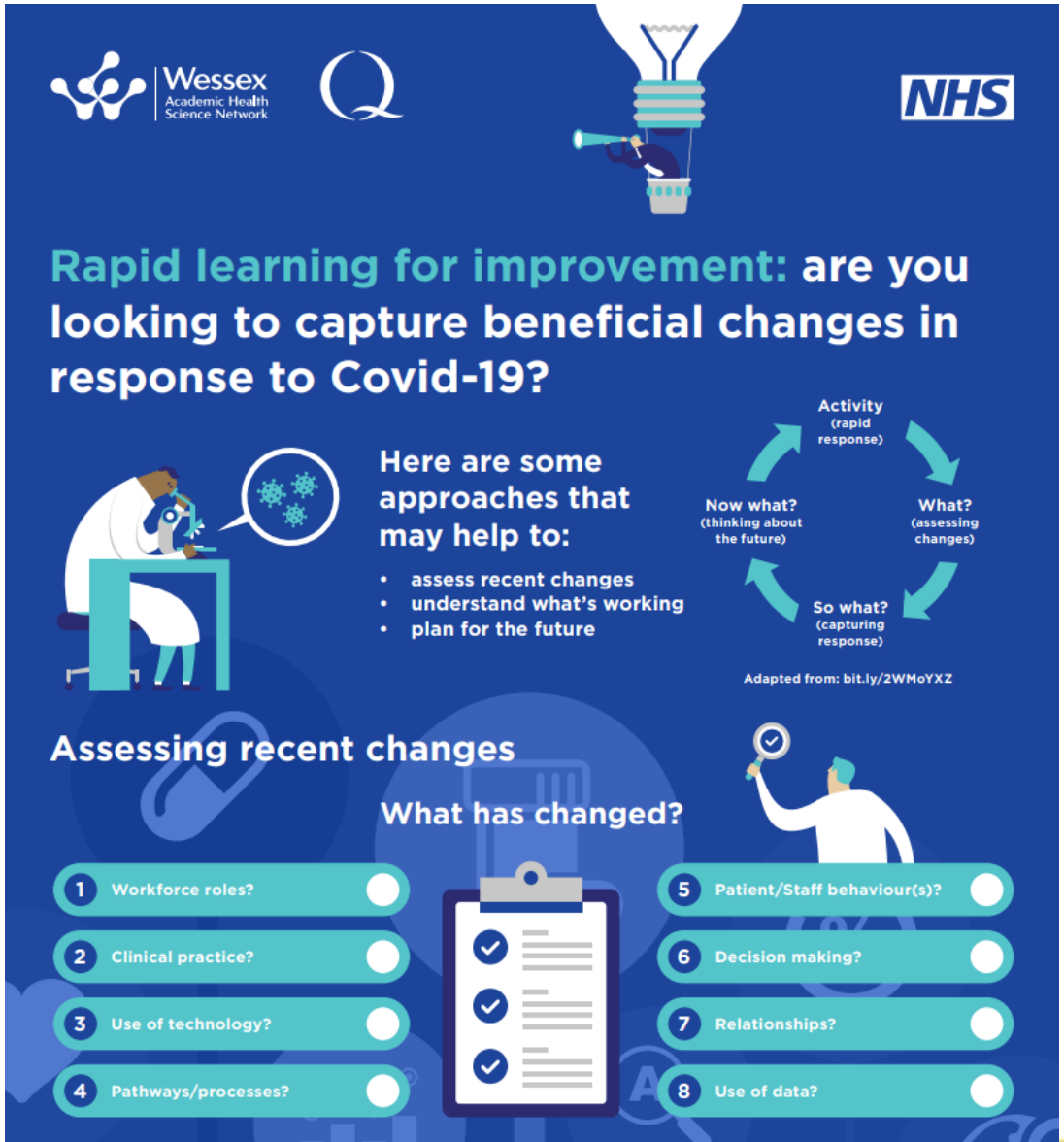
Health Foundation Toolkit:

- Evaluation: what to consider - The Health Foundation

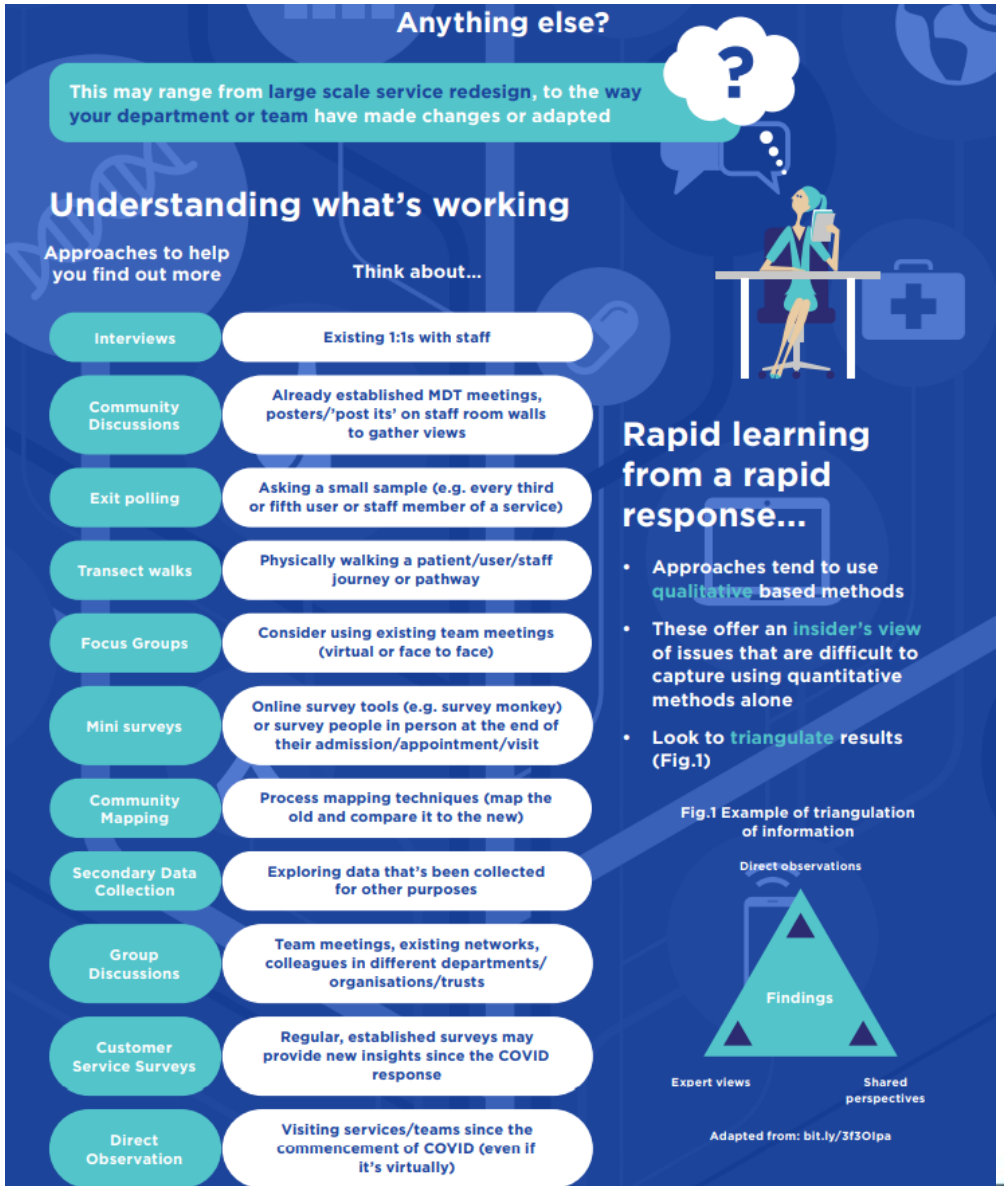
West of England AHSN resources:

- Evidence and evaluation | West of England AHSN (weahsn.net)
- Evaluation - West of England Academic Health Science Network (weahsn.net)

References and resources



References and resources



References and resources