

Making A Difference:

A Guide For Evaluating Your Work In The Community 2015



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Aims of the toolkit


This toolkit is designed to provide you with information about how to evaluate the services and projects that you offer. It illustrates why this is an important aspect of running a service, and aims to make the whole process easier to achieve.

What is evaluation?

Evaluation aims to find out whether what we offer makes a difference to the lives of the people we are trying to help. It can also tell us which bits work and are helpful to people, and which bits are not so helpful.

Preparing to do your evaluation

Planning for evaluation should begin before you start running your service. It is important to be clear about what you want to know and how you will measure it. Think about the following in planning your evaluation. The answers to these questions will help you decide what to evaluate.

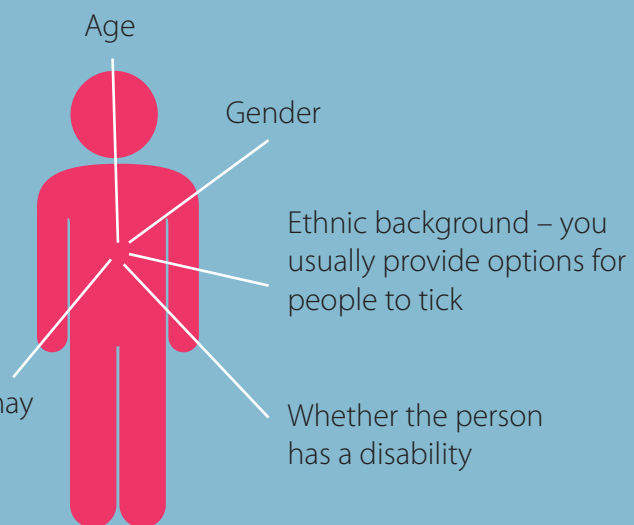
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- **Who needs to agree your evaluation plan?** Make sure you have agreed with your funders/management board how you will evaluate before you start.
 - **What is the area of need that you are targeting?** What are your aims? For example mental health awareness or encouraging people to exercise more.
 - **Who will use the service? Is it mainly women, or younger people?** This is also called your 'Demographic' information.
 - **What is it that you will be doing or offering?** Be as detailed here as you can, thinking about the '5 W's' will help you. For example, 'Who' is delivering and receiving the service? 'What' will you offer? 'Where' will you offer it? 'When' will it take place? and 'Why' are you offering it (what do you hope people will gain from it)?
 - **What do you predict or hope will happen and why do you think this?** How will you know when you have been successful? What will be different and how can you measure this? Please see Toolkit Figure 1 for a checklist to help you plan your evaluation.

The answers to all these questions will form your evaluation.

What information should I collect for an evaluation?

The first thing to collect is demographic information. This includes:

Depending on your project, you may want to ask about religion, sexual orientation, geographical location.



For examples see Toolkit, **Figure 2**. Please note the statement about confidentiality and sharing of information that you should include.

Can I just report outputs?

'Outputs' describe what your project or service delivers, how many people attend and so on. This is important information for your evaluation, however on its own it is not enough because it does not measure the impact of your service on the people who use it. Therefore you need to measure 'Outcomes' also, which show the changes that happened as a result of your project or service. Toolkit **Figure 3** describes in more detail the differences between 'Outputs' and 'Outcomes' and gives examples of how to plan your measures.

The main information you collect to measure the impact of your service will be your choice, and will depend on your service and what outcomes you hope to achieve. See Toolkit **Figure 4** for some examples of the different things you could measure and the questions you could ask. The information you collect depends on what your service is trying to achieve.

TIP: Rather than just thinking about the individual, consider the impact of your service for families, communities, organisations, policy and the environment also.



How should I collect the information?

There are two types of information you could collect – ‘Quantitative’ and ‘Qualitative’ information (see table below). Each method is beneficial for your evaluation so it is recommended that you collect both types of information if possible.

Quantitative information

number data, e.g. from surveys or questionnaires.

- Can collect information from a larger number of participants
- Relatively quick way to collect information
- Data is not usually very detailed

Qualitative information

beliefs, ideas and thoughts in the form of quotes

e.g. from interviews and focus groups. Used to understand people's experiences or explore ideas.

- More in-depth
- Smaller number of participants – harder to generalise to all service users
- Client stories

TIP: You do not have to use questionnaires, interviews or focus groups to collect information. See Toolkit [Figure 5](#) for other ideas of how you could do your evaluation.

When will you measure this information?

To know whether your service is having a beneficial effect, we need to see that there is a difference between what things were like before service users received the service and after. In order to do this you need to ask the same questions at two time points - the beginning and end, in order to compare. Data that is collected at the beginning is known as ‘Baseline data’. If the service you offer is provided in a finite time scale such as a 6 week program, then you would collect the second amount of information at the end of this time period. If it is on-going service then it is common to collect information at one month, and then again at 3 month or 6 month intervals.

Consider timing the collection of information to coincide with any forms people might fill in at the beginning, or utilise waiting times when people would be happy to complete something to pass the time. Some service users may not want to take part in your evaluation, and they have every right to decline. Consider the barriers to people taking part and try to address these. For example would people rather fill in a questionnaire at home? Would they prefer to use a different method to provide information? Are there some questions they would rather not answer that you could remove or change?

TIP: It may not always be possible to collect data at two time points. If your service is a drop-in service consider collecting ‘snap shot’ evaluation data. For example you could ask people who attend on a one-off basis to complete a brief survey on Facebook at a later date, or ask people to complete a survey about how they found a one off session. You could also get permission to contact them at a later date to collect information about the impact of your service and what they learned or are now doing differently.

Inviting service users to be involved

Ideally you will provide people with a 'Participant Information Sheet' explaining why you are collecting the information for your evaluation and what you intend to use it for. This helps people to decide if they want to be involved. See Toolkit **Figure 6.a** for example content.

Get permission to use what people say

If you intend to use direct quotes from audio recordings of what people said or from a questionnaire, it is good practice to get permission (consent) from those participating. See Toolkit **Figure 6.b** for an example consent form.

It is also good practice to include a statement about confidentiality and information sharing at the beginning of your questionnaire. See Toolkit **Figure 7** for an example questionnaire statement.

Designing a questionnaire

Designing questions for a questionnaire can be a daunting prospect; however there are a number of things you can do to make the process easier. See Toolkit **Figure 7** for an example questionnaire.

- Consider using a questionnaire that already exists (See Toolkit **Figure 8** for some examples).
- Ensure questions are short, simple and easy to understand.
- Ensure the questionnaire itself is short – 10 questions should be plenty.
- Avoid leading questions (see Toolkit **Figure 9**).
- Always explain the purpose of the questionnaire, explain that answers will be anonymous and information kept confidential. It should not be necessary to ask people to provide identifiable information. By keeping the questionnaire anonymous you help to collect more reliable information, and it helps to reassure those filling it in.
- Always give people the opportunity to add additional comments.
- Pilot the questionnaire with a small sample of people.
- Include the option 'Other' in a question where you have given a list of possible answers in case you haven't included all possibilities.
- Avoid abbreviations or acronyms.
- You can create free online surveys and questionnaires for people to access via a link on a website or Facebook page - www.surveymonkey.com is one option.



Conducting an interview

Interviews are useful ways of collecting detailed information from a small number of service users, usually on a one-to-one basis. Here are some tips for using this method:

- Before the interview, make sure people have been **provided with information about what the interview is about**.
- You should **remind people that they do not have to take part** and that if they do, their information will remain confidential, and anything used will be anonymous.
- Make sure people have signed a **consent form** to say they are happy for the interview to be recorded, if you intend to do this. See Toolkit **Figure 6** for an example.
- Try to make sure you **ask everyone roughly the same questions**.
- **Keep your questions open-ended.** This basically means using questions that do not encourage a 'Yes' or 'No' answer and are not leading.
- Use **prompts to gather more information**. For example '*Could you tell me more about that?*'; '*How did that make you feel?*'; '*Could you give me some examples please?*'
- Keep it simple – **Avoid asking too many questions.** Aim for around 6-10 questions with a few prompts in case people do not say much.



See Toolkit **Figure 10** for an example of a semi-structured interview schedule.



Running a focus group

A focus group is a group discussion about a particular topic. Participants can discuss their thoughts, beliefs and experiences of a product or service. The discussion is led mainly by the group, unlike an interview which is led mainly by the interviewer. Here are some ideas for running a focus group:

- Aim for 4-8 people in a group if possible.
- As previously mentioned, ensure people know what the focus group is about, that they have the right to decide not to take part at any time, and that information collected will be anonymous and confidential.
- Make sure people have signed a consent form to say they are happy for the focus group to be recorded, if you intend to do this (See Toolkit **Figure 6** for an example).
- Include some guidance or friendly rules at the beginning (for examples see Toolkit **Figure 11**).
- Include an 'Ice-Breaker Task' at the beginning (for example ask the group to talk about a favourite present they received or a recent holiday).
- Tell participants that they can have a break or withdraw from participation at any time.
- Have a few prompts to hand to encourage conversation and help bring people back to the topic (for examples see Toolkit **Figure 9**).

See Toolkit **Figure 11** for an example focus group session.

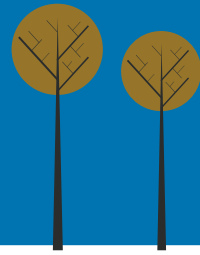
Recording information from interviews and focus groups

If you chose not to record the interview or focus group, we suggest that you involve someone from the team who can take notes throughout the process as recalling what was said after the session is unlikely to be accurate. You could still record the session but when listening back, choose the odd quote to illustrate your findings. You can then take notes from the remainder of the recording to be used in an evaluation report.



Case studies

Although most evaluation techniques seek to gather information from as many people as possible, there are times when it is useful to look at the effectiveness of your service in detail with one or two individuals. Case studies enable you to gather detailed information about one person's experience, taking into consideration what happened over time.



What do I do with the information?

Once you have collected your questionnaire, interviews or focus groups, you are left with the question of what to do with the 'raw data'. Raw data just refers to the data as you collect it, before you have done anything to it.

Condensing questionnaire data into a manageable form

If you have collected questionnaire data, you need to decide how to use it. Being left with a vast amount of numbers is overwhelming so you need to be able to condense the information down into a manageable form. All the quantitative (number data) can be reduced down in this way using a program such as Microsoft Excel. In this program, you input the number scores that people gave for questions and you can then create a graph or work out the overall average scores.

For free training in how to use Excel to create graphs (charts) and calculate averages [click here](#)

Using qualitative information (*interviews and focus groups*)

Interview and focus group data also needs to be reduced down, as you can end up with a lot of information. Read through your quotes and conversations several times looking for common themes in the data. You can then group these into categories to summarise your data. For example, for each question asked, read all the responses and summarise this in a paragraph. You can bring together common views with statements such as 'some participants said X' or 'most participants discussed Y'. For statements that only one person has made, make it clear that it was the view of one person only.

Example:

Interview question: 'What could be done to improve the service?'
Your summary of the findings: A number of service users felt that offering the groups more regularly would help to improve the service. One service user suggested holding them in the evenings once a month for mums who work. Another service user suggested having an email group to contact each other in between sessions.

You can also include short direct quotes to back up your finding. It is good practice to have written consent from service users to ensure they are happy for you to quote them- see Toolkit **Figure 6.b**. It is better to say the service users 'stated' or 'reported' something; and the service 'appears' or 'seems' to be benefiting people. This is better than saying 'service users found the service useful' or 'the service is benefiting people', as it takes into account that it is difficult to be 100% certain about what people's views are – you are making an assumption based on what they said.



Economic Evaluation and Return on Investment

It is increasingly common for researchers and policy makers to evaluate improvement programs (interventions) using two key approaches: i) Economic Analysis and ii) Return on Investment. These approaches gather information to help choose the best service or intervention for a particular need.

Knowing whether the service or intervention benefits health and wellbeing is only one part of the picture. It is also useful to know what costs and benefits the service incurs. Examples include financial costs and savings, a reduction in the use of healthcare services and benefits to health. Some interventions may also have a cost to health (for example the negative side effects of medication).

We do not expect you to do a health economic evaluation as part of your service evaluation; however you may find the following information useful as an introduction to these popular approaches.

What is economic evaluation?

Economic evaluation is a type of service evaluation interested in how well a service is doing in terms of maximising productivity (e.g. benefits to health) and minimising waste or expense (e.g. time or resources lost).

What does a health economic evaluation measure?

Economic evaluation compares two or more interventions looking at the costs and benefits of each. These can include financial savings and costs and benefits to health. It can help in decision making about which intervention to choose. For example we might compare intervention A and intervention B, taking into account how effective each one is at increasing exercise and also considering the cost to run them and so on. The aim is to find an intervention that offers the best possible outcomes with the least costs. An economic evaluation might show that intervention B is a lot cheaper to run, but it is not as effective at improving health as intervention A, so we weigh up the costs against the gains. Analysis of these costs and consequences can be used to help improve the efficiency of certain interventions. Alternatively it may be used to establish a good mix of interventions across the health sector as a whole.





What is Return on Investment (ROI)?

Return on Investment is a performance measure looking at the outcomes (return) that follow a financial investment or investments. To calculate ROI, the benefit (or return) of an investment is divided by the cost of the investment, and the result is expressed as a percentage or a ratio.

ROI calculations have many benefits including measurement of profitability and a potential to produce a figure which can be compared against other initiatives.

The following information provides a more detailed summary about economic evaluation that you may find useful, however we realise that this is quite complex. For further information please see

http://www.who.int/choice/publications/p_2007_economic_evaluation_JME.pdf.

Writing a report of your findings

The following headings provide an idea of the possible layout and content that you might include in a report for your commissioners, stakeholders or potential funders:



Introduction

In this section it is useful to provide a brief background about why and how the service was set up.

- The reasons for setting it up
- Who the service is for
- The aims of the service (your evaluation should be based on these aims and will aim to show whether you achieved them)
- Who runs it, how is it run, when it runs, what you do
- The partnership organisations and stakeholders



Methods used to evaluate your service

In this section, describe how you collected your evaluation data. For example you might say, 'questionnaires were given to all service users before they started using the service (baseline), at one month and at 3 months'.

Discuss what you did and when you did it. If you involved other team members or service users in the development of a questionnaire, try to mention this, as it shows you have spent time preparing your evaluation. If you chose not to give the questionnaire to everyone, how did you decide who to give it to? If you conducted interviews or focus groups, how many people did you invite to take part and how did you invite them?





Results

- **Demographic Information** - In this section start by describing the characteristics of the people who completed your questionnaires or interviews, (e.g. the demographic information). Include the range of ages, gender, ethnicity, whether people have a disability and so on.
- **Outputs/Activity** - Next report your outputs – e.g. how many people attended the service, how many sessions you did etc.
- **Outcomes & Impacts** –Start by listing the aims of your service and then include the relevant results from your evaluation under each heading to show whether or not this aim has been achieved. For example if your question is – ‘Does participating in the service lead to an increase in exercise related activities?’ your results section might include the reporting of means or percentages to illustrate your results.

For example:

At baseline 68% of service users reported exercising ‘rarely’, with 12% never exercising. 18% reported exercising once a week, and only 2% exercised three times a week or more. Following the service intervention (post intervention) most of the participants had increased their level of physical activity. 16% reported exercising three times a week or more, 61% reported exercising once a week, with only 23% reporting that they exercised rarely. No participants reported that they never exercised. This indicates that the intervention had a positive effect on increasing the amount that participants exercise.



Conclusions

- What do your findings suggest?
- What have you learnt?
- Are there any limitations to the methods you used e.g. not enough people filling in the questionnaire, you didn’t ask certain questions, the questions were misunderstood.



Future direction

- How will you use this information?
- Do you intend to make any changes to the service?
- What developments do you intend to make and how will you do this?



Glossary

Baseline – Information and data collected at the start of a new service or at a set point in time. This enables comparison of 'before and after' information, to test whether a service has had a beneficial effect.

Demographics – Information which describes your participants, for example their gender, age and ethnic origin.

Focus Group – A method of collecting evaluation data in which service users are invited to attend a group and discuss key themes together. Facilitators provide themes for discussion rather than direct questions so that the conversation can be guided by the participants rather than the facilitators.

Impacts – The longer term effects of the service on society in general.

Inputs – What goes in to creating and running a service, such as staff, funding and resources.

Intervention – A technique or service that aims to make a beneficial change.

Open and Closed Questions – Closed questions generate a yes or no answer, for example 'are you a smoker?' Open questions are more open-ended in that they encourage more in- depth answers, for example 'what are your thoughts about the youth project?'

Outcomes – The differences that a service makes to the lives of the service users who use it. These differences should be measured to check the service is doing what it aims to do.

Outputs – Describes what your service or project delivered e.g. how many sessions you ran, what they included and how many people attended.

Qualitative – Information that cannot be represented as numbers, such as text or the spoken word. Includes views, attitudes and experiences. For example interview data or an open text box in a questionnaire might ask people to discuss their experience of visiting a service.

Quantitative - Information that is represented as numbers. For example questions such as how often, what, where, and when. For example a question might be 'How confident do you feel to make a change?' Answers could range from 1 (not at all) to 10 (very).

Semi-Structured Interview – A type of interview, whereby the interviewer has a set of questions and prompts, but the conversation can be guided to some degree by the interviewee and therefore interviews may vary slightly.

Toolkit of Examples & Templates



Figure 1.

Evaluation checklist – What to include













-  Agree your evaluation plan with funders, stakeholders and management board during early stages when planning the initiative/intervention.
-  Provide a brief history of the service and summary of the work.
-  Be clear on your aims & desired outcomes (impact on service users).
-  Gather qualitative (e.g. interviews and focus groups) as well as quantitative (questionnaire) data if possible.
-  Include your positive achievements but don't be afraid to discuss your weaknesses, every service has room for improvement.
-  Include baseline collection of information (collected before people started to use the service).
-  Talk about what you do (outputs), but also include the impact it has on people and the changes that have occurred (impacts/outcomes).
-  Include examples of materials used, photos and any promotional work.
-  Provide a summary of the results of the evaluation.
-  Include case studies if you have them.
-  Discuss what you have learnt and future plans.
-  Acknowledgements – It is nice to include a section where you acknowledge those who took part in the evaluation – e.g. staff, service users and funders.

Figure 2.

Example demographic information collection sheet

About You

Our organisation is committed to promoting equality and fairness for all our customers, so it would be helpful if you could answer a few questions which will help us ensure we are reaching out to all sections of the community. The information requested below helps us monitor and understand who we deliver services to and will be used to improve our services to you and other customers. It is confidential and kept anonymous. *Thank you.*

Please indicate your gender (*circle one*): Male Female

Please indicate your age group (*circle one*):

Under 18 years	18-24 years	25-34 years	35-44 years	45-54 years
55-64 years	65+ years			

Please indicate your ethnic origin (*please tick one box only*):

White: English/Welsh/Scottish/ Northern Irish/British	<input type="checkbox"/>	Asian or Asian British: Pakistani	<input type="checkbox"/>
White: Irish	<input type="checkbox"/>	Asian or Asian British: Bangladeshi	<input type="checkbox"/>
White: Gypsy or Irish traveller	<input type="checkbox"/>	Asian or Asian British - Chinese	<input type="checkbox"/>
White: Any other background	<input type="checkbox"/>	Asian or Asian British: Any other background	<input type="checkbox"/>
Mixed: White and Black Caribbean	<input type="checkbox"/>	Black or Black British: Caribbean	<input type="checkbox"/>
Mixed: White and Black African	<input type="checkbox"/>	Black or Black British: African	<input type="checkbox"/>
Mixed: White and Asian	<input type="checkbox"/>	Black or Black British: Any other background	<input type="checkbox"/>
Mixed: Any other background	<input type="checkbox"/>	Arab	<input type="checkbox"/>
Asian or Asian British: Indian	<input type="checkbox"/>	Any other ethnic group <i>Please state.....</i>	<input type="checkbox"/>

Do you consider yourself to have a disability? Yes/No

If yes, please give details below:

--

Do you consider yourself to be...? (*Please tick one box only*)

Heterosexual/ Straight	<input type="checkbox"/>	Other	<input type="checkbox"/>
Homosexual/Gay/Lesbian	<input type="checkbox"/>	Prefer not to say	<input type="checkbox"/>
Bisexual	<input type="checkbox"/>		<input type="checkbox"/>

Figure 3a.

The difference between ‘Outputs’ and ‘Outcomes’

Inputs (Your Resources)

E.g. What goes into the service such as staff, volunteers, funding, and resources?



Outputs (Your Activities)

E.g. What your service is, what you do, and who attends.

For example 27 people attend a group supporting them to reduce their alcohol intake



Short-term Outcomes

E.g. What changes do you hope will happen straight away when people use the service e.g.? increased knowledge or confidence.

This is the information you need to collect for your evaluation.



Longer term Outcomes

E.g. What happens as a result of these changes in the longer term? For example a reduction in drinking or improved mental health?

This is known as ‘Follow-up’ data collection. You usually collect it 3-6 months after service users have finished using the service.

Ideally you would also collect this information, but this is not always possible for practical or financial reasons.

Figure 3b.

Planning your output and outcome measures (Example version)

Outputs (What does your service do and who is it for?)	Outcomes (Short and long term)	Outcome measures to see if outcomes are achieved (How can you measure if achieve this?)
E.g. A one-off workshop for young people about healthy eating	E.g. i) To increase knowledge & awareness about healthy eating and meal planning (short-term) ii) To support people to buy more fruit and vegetables, to practice cooking healthy meals and choose more healthy options (longer term changes in behaviour)	E.g. Questionnaires that look at: i) a change in knowledge and awareness before and after the workshop; and ii) an increase in confidence to cook healthier meals after the workshop. Interviews with 4 -6 participants could also be conducted to explore in depth whether people found the workshop useful, what bits they liked and did not like, what could be improved and what they will take away with them what changes they will make.

Planning your output and outcome measures (Blank Version)

Outputs (What does your service do and who is it for?)	Outcomes (Short and long term)	Outcome measures to see if outcomes are achieved

Figure 4.

Planning your questions – outcomes and question examples

Service led to a change in:	How could you measure this?
Attitudes and beliefs	<p>Questions about what people think about a certain subject and also the service itself.</p> <p>Examples include: To what extent do you agree or disagree with the following: 'I don't think healthy eating is important' 'I should stop smoking' 'I am able to get a good education' 'It is difficult to get debt support' 'The service met my needs'</p>
Confidence and ability to change	<p>Questions about how able people feel to make changes.</p> <p>Examples include: To what extent do you agree or disagree with the following: 'I do not feel able to make changes to my diet' 'I think I can keep exercising twice a week' 'I feel more able to take charge of my life now' 'I do not feel confident in my ability to apply for a job'</p>
Motivation	<p>Questions that look at how ready and eager people feel to make changes.</p> <p>Examples include: To what extent do you agree or disagree with the following: 'I want to start making changes' 'It's not the right time to target my drinking' 'Making a change is not a priority right now'</p>
Knowledge	<p>Questions that look at factual knowledge about a subject.</p> <p>Examples include: To what extent do you agree or disagree with the following: 'Eating a diet high in saturated fat is associated with heart disease' 'Alcohol affects my mental as well as physical health'</p>
Beliefs about what others think are important	<p>Questions about what people believe others close to them think about a certain subject.</p> <p>Examples include: To what extent do you agree or disagree with the following: 'Those who are close to me think it is important for me to eat healthily' 'Exercise is not a priority for my family'</p>

Service led to a change in:	How could you measure this?
Intentions	<p>Questions about whether people have plans and believe they will make changes.</p> <p>Examples include: To what extent do you agree or disagree with the following: 'I intend to start eating healthily in the next week' 'I intend to self-refer myself for counselling this week'</p>
Mood	<p>Questions relating to low mood or depression, anxiety, sleep etc.</p> <p>Examples include: To what extent do you agree or disagree with the following: 'I feel hopeful about my life' 'I have had difficulty sleeping in the last week' 'I have felt low or hopeless in the last week' 'I have felt agitated or unable to relax in the last week'</p>
Self esteem	<p>Questions about how positive someone feels about themselves.</p> <p>Examples include: To what extent do you agree or disagree with the following: 'I feel good about myself' 'I do not think that I am good enough'</p>
Overall well-being & Quality of Life (QoL)	<p>This includes questions about functioning and satisfaction relating to physical, social, psychological and emotional functioning across a range of areas e.g. tiredness, relationships, ability to engage in activities of daily living.</p>

Figure 5.

Alternative ideas for collecting evaluation data

Evaluation Activity	What it Involves
Post it notes	Provide service users with post-it notes and ask them to write their responses to key questions and stick them on large pieces of paper around the room.
Thumbs up, thumbs down	Ask service users to indicate how much they agree with statements, with thumbs up, a thumbs down or a thumbs horizontal to indicate if unsure. You can then count the numbers of each.
Room scales	Print off or write numbers from 1-10 individually on sheets of paper. Then stick each number around the room consecutively so you have a scale from 1-10 or 1-5 if easier. Ask people to rate out of 10 to what extent they agree with statements by standing by the numbered piece of paper. For example if 1 is 'not at all' and 10 is 'very', 'how confident do you feel to do X?'. Then count how many people stand by each number.
Spiders web	Everyone sits in a circle and a facilitator holds the end of a ball of string. Whilst holding on to the end, he throws the ball to a service user asking them to name something they found useful about the service. This person then holds on to a part of the string but throws the rest of the ball to the next person who again answers the same question. At some point the facilitator can change the question to what was less helpful, what could we do to improve the service and so on. Another facilitator can write down all the comments and ideas. You end up with a big spider web of string!
Card sort	If you are interested in establishing what aspects of a service people found most and least useful, one thing you can ask them to do is a card sort. As a group, or individually, give people cards, each with an aspect of the service written on it. Ask them to think of any aspects that you might have missed. Next ask them to work together to decide on the most useful aspects, through to the least, and to place them one after the other in order. This way you can clearly see what is most helpful and what is least helpful.
Disposable cameras	Take 2 disposable cameras, labelled 'like' and 'don't like'. Ask service users to take pictures of all the aspects of the service that they like and don't like. Be careful not to get them mixed up!
Graffiti wall	Cover a wall with or part of a wall with large sheets of paper and encourage people to write and draw their likes, dislikes and ideas for improvement with coloured marker pens. This can be left up for a while for people to do as and when they like anonymously. You could change the sheet at key points to see how the ideas change.

Body exercise	Draw a person on a large piece of paper. The person needs to be holding a carrier bag, and standing next to a dustbin. Ask service users to add post-it notes around the image. Next to the head ask for 'something you have learned/gained'. Next to the heart ask for 'something you have felt/experienced'. Next to the carrier bag ask for 'something they will be taking away from the service'; and next to the dustbin, something 'they would like to lose/don't like about the service'.
Suggestions box	Simply label a box and leave it out for people to put suggestions in. They are more likely to use it if there is paper/card and a pen there too.
Blogs, Facebook, Twitter & web chats	Consider the use of social networking sites to gather information. For example you could ask for comments about how to improve the service on a Facebook wall or set up a discussion forum.

Figure 6a.

Example Participant Information Sheet *(for an Interview)*

We are asking if you would consider taking part in a short interview. Please read the following information sheet and if you have any questions, please talk to X.

Why are we interviewing service users?

We are inviting people who use our service to take part in a short interview that will be recorded. We are doing this because we are really keen to hear about your views and experiences of using our service. We can then use this information to help us to improve and develop the service. The information will be used in reports and in developing and raising awareness about the service.

How long will it take?

The interview should take no more than about 30 minutes.

Do I have to take part?

Not at all, it's absolutely fine if you would rather not and this will not affect the service that you receive in any way.

What will happen if I do?

We will book in a good time for you and then just ask you a few questions and record it. You don't have to answer anything that you don't want to. The questions are about how you've found using the service. Everything that you say is confidential and we won't use your name at all. The reason we will record it is so that we can accurately remember what you said. We may use some quotes too but again no names will be used.

Consent form

A consent form is something we ask people to sign just to say they understand what we are doing, are happy to take part, and for the interview to be tape recorded (if applicable).

Figure 6b. Example consent form

(If Interviews or focus groups will be recorded)

A consent form is something we ask people to sign to say they understand what we are doing to evaluate our service and are happy for the interview/focus group to be recorded. This is a standard procedure to check that you give permission for us to use the information collected

Please initial Box

1. I agree to the interview or focus group being audio-taped

☐
2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason

☐
3. I agree to my views and opinions being used as quotes in reports that support the development of this service. I understand that this will be anonymous, and my name or any identifying information will not be used.

☐

_____	_____	_____
Name of Participant	Date	Signature
_____	_____	_____
Name of Participant	Date	Signature

Figure 7.

Example Questionnaire (*Pre and post questions*)

Your views and opinions are really important to us and we would be very grateful if you could take a few minutes to complete this short questionnaire. The following questions are to help us to understand your needs a little better and also to look at how we can improve the service. There are no right or wrong answers, and you do not have to fill in anything you do not want to. Your answers will remain anonymous and confidential.

About you

(please complete the boxes below)

[Insert demographic information questions]

Thoughts about physical activity and exercise

(Please tick one box for each question).

1. How often do you exercise for 30 minutes or more? (This includes walking)

Never	Rarely	1-2 times a fortnight	2-3 times a week	Every day

2. Exercising regularly is a good thing to do

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

3. I feel able to exercise regularly

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

4. My friends and family think it is important for me to exercise regularly

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

5. I intend to start exercising regularly

Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree

6. What are you hoping to gain from this service

7. Where did you hear about us?

Thank you!

Example additional questions to ask after people have used the service:

The following are rated on a scale from 1 to 10, with 1 being the lowest and 10 being the highest.
(Please circle one for each)

1. Please evaluate how useful you found the workshop/group/service:

1	2	3	4	5	6	7	8	9	10
<i>Very poor</i>									<i>Very good</i>

2. What did you find most useful or helpful?

3. What did you find least useful or helpful?

4. How useful did you find the booklets you were given:

1	2	3	4	5	6	7	8	9	10
<i>Very poor</i>									<i>Very good</i>

5. Please indicate the extent to which questions and queries were answered effectively:

1	2	3	4	5	6	7	8	9	10
<i>Very poor</i>									<i>Very good</i>

6. What have you learned, if anything, from this workshop/group/service?

7. What else do you feel should have been included?

8. Please indicate the overall rating that you would give this workshop/service:

1

2

3

4

5

6

7

8

9

10

Very poor

Very good

9. Would you recommend this service to friends and family?

Yes

Not sure

No

10. Please use the space below to provide any other comments:

Thank you!

Figure 8.

Examples of existing questionnaires that are free to use

Here is a list of questionnaires that you can download and use to measure a range of outcomes. Please note that some require permission to use, even though there is no cost. We suggest that you put the questions into your own user-friendly questionnaire if the format is not suitable for your needs.

WEMWBS – The Warwick-Edinburgh Mental Wellbeing Scale

This scale is used to measure overall wellbeing. There is a standard version (*14 questions*):

<http://www.healthscotland.com/documents/1467.aspx>

and a short version (*7 questions*):

<http://www.healthscotland.com/documents/5238.aspx>

It can be used with adults and teenagers aged 13 years and above. WEMWBS is free to use but it is copyright protected so you need to get permission for use (Frances.Taggart@warwick.ac.uk). Guidance on using WEMBS can be found here:

<http://www.healthscotland.com/documents/2702.aspx>

The Companionship Scale

Public Health Warwickshire has developed a short 'Companionship Scale' to measure social isolation and loneliness. Please contact Public Health if you would like a copy.

Quality of Life – WHO-5 (*The WHO-5 Wellbeing Index*)

The WHO-5 measures mental wellbeing using 5 key questions.

It can be accessed here: <http://www.who-5.org/>

Figure 9.

Leading and non-leading questions

Example of a leading question	Example of a non-leading alternative question
Do you agree that the service improves people's confidence? <i>[Encourages a 'yes' answer]</i>	What effect do you think the service has, if at all, on people's confidence?
How beneficial do you think the coffee mornings are for mums? <i>[Suggests they are beneficial to some extent]</i>	Tell us your thoughts about the coffee mornings for mums...
Many people made changes to their diet after the sessions, how about you? <i>[Makes people want to say they also made changes]</i>	What effect have the sessions had on you, positive or negative? <i>(Prompt: Has anything changed?)</i>
Experts believe that providing training will help people's wellbeing. How much do you agree? <i>[Encourages a 'yes' answer because people trust 'Experts']</i>	To what extent might providing training help people's wellbeing, if at all?
The new programme teaches people new skills. How often are you using these new skills? <i>[Assumes new skills have been learnt]</i>	Did you learn any skills from the new programme? If so, how often are you able to use them?

Figure 10.

Example of a semi-structured interview schedule

N.B. Demographic Information to be collected first.

Before starting the interview:

- Interviewer to remind participants that interview data will be anonymous and all information is confidential
- Briefly explain aims of interview

1. Could you start by telling me a little about your experience of using the service?

- What made you access the service?
- What were you hoping to gain?
- How many sessions did you attend?

2. Was there anything that you found useful about the sessions?

- Why was that?

3. Was there anything that you found less useful or unhelpful about the sessions?

- Why was that?

4. What could we do to improve the service further?

5. Did the service meet your expectations?

- In what way?

6. Is there anything you have learnt?

- Can you give some examples please?

7. Is there anything that you will take away with you?

- Is there anything that you will now do differently in the future?

Figure 11.

Example focus group session

- Interviewer to remind participants that interview data will be anonymous and all information is confidential.
- Briefly explain aims of interview.
- Introductions & Ice breaker task.
- Discuss the aim of the focus group (if participants were not given an information sheet).
- Set rules for the session (examples include):
 - Please try not to talk over one another
 - Please try to respect the views of others
 - Please feel free to leave at any point if the subject matter is distressing
 - You do not have to talk if you do not want to, but equally everyone has a right to express their thoughts
- Themes/prompts to help steer focus group:
 - What are your thoughts about the service we offer young people?
 - What was your experience of using the service? Did it help you? In what ways?
 - What improvements could we make?
 - What aspects did you find helpful/less helpful?
 - What did you learn? What will you take away with you?