About this resource

This guide signposts resources that are recommended by King’s Improvement Science for evaluating health and social care service initiatives, including quality improvement projects and programmes. The guide includes:

- resources that can help you learn about evaluation and answer frequently asked questions;
- step-by-step evaluation ‘toolkits’ that can help you design an evaluation from start to finish;
- resources for evaluating patient and public involvement;
- resources about economic evaluation of health and social care initiatives;
- inspiration for writing your evaluation report, including examples of published evaluation reports and resources on report writing;
- our top tips for evaluation.

We have chosen, reviewed and listed resources that we think are accessible, clear, relevant and useful, and which may be applied when evaluating different types of programmes and initiatives. Resources are ‘open access’ (freely available) unless otherwise indicated.

We do not promote a single guide or toolkit as different evaluations will require different methods and approaches.

There is a wealth of evaluation resources out there, but we hope this guide may help you start planning the evaluation of your programme or project more quickly, instead of spending your time searching for useful or relevant resources.

If any of the links within this resource do not open straightaway, please copy them into your browser.

Who is this resource for?

This guide is primarily intended for health and social care professionals, managers, patients, service users, members of the public, quality improvement and transformation leads and other staff working within health and social care services who wish to evaluate a programme or project. It may also be of interest to researchers, students and others who are looking for easy-to-access evaluation guides or ‘ready-made’ evaluation ‘toolkits’.

How to cite this resource


Collaboration with, and support from, King’s Improvement Science

Other organisations can commission the King’s Improvement Science team to evaluate improvement/implementation programmes or projects, or to help set up ongoing evaluation procedures to ensure the impact of an initiative is constantly monitored. We are also happy to discuss the possibility of collaborating as an evaluation partner on a grant application. For more information, or to informally discuss a potential commission, contact us at kis-team@kcl.ac.uk.
Learning about evaluation (easy-to-read style)

The resources in this section will help you to learn about evaluation and some of the different approaches and methods that may be used.

The following resources are simple and accessible; they are presented in an ‘easy-to-read’ style.

**Evaluation: what to consider**
Commonly asked questions about how to approach evaluation of quality improvement in health care (The Health Foundation, 2015)

| www.health.org.uk/publication/evaluation-what-consider |

This compact guide by the Health Foundation addresses many of the frequently asked questions people involved in quality improvement may have, about evaluation. This guide does not have a specific audience in mind; rather it is suitable for anyone new to evaluation as it outlines some essential methodological and practical considerations and provides links to resources for further learning.

**Evaluation Support Scotland**

| www.evaluationsupportscotland.org.uk/ |

Evaluation Support Scotland is a charity that helps charities, voluntary organisations and community groups – and their funders – develop the knowledge and skills to measure, evaluate and report on their impact. The website contains a host of resources including guides on different evaluation methods and tools.
Better Evaluation

www.betterevaluation.org/en/start_here

This website currently operates form the Evidence and Evaluation Hub at the Australia and New Zealand School of Government. It is a rich source of information on evaluation of many different kinds, with a plethora of evaluation approaches, options and resources to choose from, catering to many different contexts.

Evaluation Works

A toolkit to support commissioning of health and care services

www.nhsevaluationtoolkit.net/

This website, created by Avon Primary Care Research Collaborative and the West of England Academic Health Science Network, is primarily for people who are involved in commissioning and providing health and social care services. It provides guidance for developing service evaluation plans, including an evaluation planning checklist and frequently asked evaluation questions. The website has a number of resources about different evaluation methods and tools.
Learning about evaluation (‘academic’ style)

The following resources have a detailed focus on theory and methods. They are presented in an ‘academic’ style.

Challenges, solutions and future directions in the evaluation of service innovations in health care and public health
(Raine R. et al. Health Services and Delivery Research, 2016)


King’s Improvement Science programme manager Lucy Goulding is one of the authors of this e-book about evaluation that summarises presentations and discussion at Evaluation London 2015, an event organised by the Health Foundation, the Medical Research Council (MRC) and the National Institute for Health Research (NIHR), working in collaboration with Universities UK. The book comprises a number of essays on different types of approaches and issues regarding evaluation, covering topics such as randomised controlled trials, qualitative research and implementation science.

How to study improvement interventions: a brief overview of possible study types

http://qualitysafety.bmj.com/content/24/5/325

This article gives a comprehensive overview of different study types that could be used for evaluation of quality improvement activities, including different trial designs, quasi-experimental designs, systematic reviews, programme evaluations, process evaluations, qualitative studies and economic evaluations.
Methods for evaluation of small-scale quality improvement projects
(Harvey G and Wensing M, Quality and Safety in Healthcare, 2003)

[www.ncbi.nlm.nih.gov/pmc/articles/PMC1743722/pdf/v012p00210.pdf]

This paper highlights why evaluating small-scale quality improvement (QI) projects is important for generating learning about how to do quality improvement well. It also includes a short section on conducting case studies to draw together learning across QI projects. This could be useful for anyone who wishes to evaluate quality improvement programmes that comprise a number of small projects.

Criteria for the evaluation of quality improvement programs and the use of quality improvement data
(American Psychological Association, 2009)

[www.apa.org/pubs/journals/features/criteria-for-evaluation.pdf]

This paper provides a set of criteria to be used in evaluating quality improvement programmes. Although developed for psychologists, the criteria are applicable across all sorts of health services and roles. They cover four areas: programme design; implementation; indicators used to measure quality; and privacy and confidentiality issues.

Performance Audit Handbook: routes to effective evaluation
(RAND, 2009)

[www.rand.org/content/dam/rand/pubs/technical_reports/2010/RAND_TR788.pdf]

This comprehensive document may be of interest to those who are engaged in conducting performance audits. The numerous chapters range from ‘benchmarking’ and ‘Delphi exercise’ to ‘grounded theory’ and many more.

NB: performance audits are independent assessments of a project or programme that aim to establish whether the available resources are being used well.
The Consolidated Framework for Implementation Research (CFIR)

https://cfirguide.org/evaluation-design/

The CFIR was developed by implementation researchers in the USA and published in 2009. This website is for researchers who are thinking about using the CFIR to evaluate an implementation or design an implementation study. The section of the CFIR website highlighted in the link may be useful for understanding and designing an implementation evaluation. We find the Damschroder and Lowery paper (www.ncbi.nlm.nih.gov/pmc/articles/PMC3656778/) that the CFIR authors recommend especially helpful. The paper describes the evaluation of an implementation of a large-scale weight management programme using CFIR.

Developing and evaluating complex interventions: new guidance
(Craig P et al. on behalf of the Medical Research Council, 2006)

www.mrc.ac.uk/documents/pdf/complex-interventions-guidance/

The Medical Research Council provides guidance on the development, evaluation and implementation of complex health care interventions. This guidance is primarily for researchers who are designing and carrying out evaluations, but it can also help funders, policy makers, practitioners and others to better understand some of the constraints that evaluation of complex interventions brings.

NB: complex interventions are usually defined as interventions with several interacting components that can pose ‘extra’ methodological and practical challenges for evaluators.

Process evaluation of complex interventions:
UK Medical Research Council (MRC) guidance
(Moore G et al. on behalf of the MRC Population Health Science Research Network, 2014)


This guidance – that follows on from the 2006 guidance above – contains information about both process evaluation theory and practice. The guide can help practitioners, researchers, funders and others to plan, design, conduct and appraise process evaluations of complex interventions to complement outcomes evaluation.

NB: process evaluation aims to provide an understanding of how outcomes have been achieved (or not), looking at aspects such as intervention delivery (implementation), mechanisms of change, and context. Outcomes evaluation assesses whether the proposed goals/aims of an intervention have been achieved.
Step-by-step evaluation toolkits

The following toolkits can help you plan, design and deliver an evaluation. They provide step-by-step guidance to help you carry out an evaluation from start to finish.

**CLAHRC Evaluation Guide Version 2**


This no-nonsense document was developed for healthcare professionals and NHS managers. It is both a comprehensive guide covering all essential evaluation areas and issues applicable to a variety of settings and purposes, and a toolkit, containing step-by-step guidance for all stages of an evaluation, from scoping to dissemination. A particular emphasis is placed on stakeholder analysis and involvement. Each section concludes with a useful checklist of actions.

**NHS Cambridgeshire Full Evaluation Toolkit**
(adapted from the Primary Care Service Evaluation Toolkit Version 1.5, Marsh P and Glendenning R [2005], 2009)


This comprehensive and easy-to-navigate toolkit is designed for staff who want to carry out an evaluation of any health or social care service. It outlines a 10-step process with a useful checklist after each step. It covers all essential areas – from how to involve others and how to design evaluation questions, through ethics and governance considerations to dissemination and communication of findings. Some sections also provide links to additional resources for further learning.
**Program Evaluation Toolkit**  
(Ontario Centre of Excellence for Child and Youth Mental Health, 2013)

www.excellenceforchildandyouth.ca/sites/default/files/resource/toolkit_program_evaluation_tools_for_planning_doing_and_using_evaluation.pdf

This highly interactive toolkit has three main sections on ‘planning’, ‘doing’ and ‘using’ evaluation. ‘Planning’ evaluation has sub-sections about identifying evaluation questions and designing a logic model. There are a number of links to additional resources such as worksheets or checklists. This is a ‘learning tool’ that aims to enhance the skills and knowledge of evaluators. Although designed for colleagues working in the child and youth mental health field, this toolkit can be used in many different contexts.

**LEAP for health: Learning, Evaluation and Planning**  
(NHS Health Scotland, 2003)

www.scdc.org.uk/media/resources/what-we-do/leap/LEAP%20for%20health.pdf

LEAP stands for Learning, Evaluation and Planning, and ‘LEAP for Health’ is the name given to a resource that aims to assist those who work in community health settings to plan and evaluate their work in collaboration with their stakeholders, especially members of the communities they seek to help. LEAP consists of five steps (with sub-steps within each) with headings such as ‘What needs to change?’, ‘How will we go about it?’ and ‘How will we know we did it?’ Action planning tables for all steps are also included.
Evaluating patient and public involvement

It is increasingly recognised and appreciated that involving patients, service users and members of the public in the planning, design and delivery of health and social care services is crucial. However, this area of work is still under evaluated and there are not many specific resources or toolkits about evaluating patient and public involvement in health and social care initiatives.

Evaluating Participation
A guide and toolkit for health and social care practitioners
(Healthcare Improvement Scotland, 2013)


This document was developed by the Scottish Health Council. It supports the evaluation of public involvement and participation in health services and is suitable for anyone working in the area, irrespective of their level of experience. The guide includes information about evaluation ‘essentials’, about the development of a suitable framework or a logic model for participation (including a set of tools to adapt for different projects), and it signposts to information and materials for further learning.
Engaging patients in patient safety
A Canadian guide
(Canadian Patient Safety Institute, February 2018)

Chapter 4 – Evaluating patient engagement


This chapter provides a brief overview of some methods, measures and tools for evaluating patient engagement at different levels – at the point of care, at the organisational level, through to integration into an organisation. It concludes with a real-life example from a cancer care organisation.

Co-production Self-assessment Framework
A working reflection tool for practitioners
(The New Economics Foundation, year unknown)


This tool aims to help practitioners to assess their own practice in relation to the key components of co-production, as defined by the authors. These include concepts such as ‘assets’, ‘capacity’ and ‘mutuality’. The tool can be used by an individual or a group to assess where their service, project, or organisation ‘sits’ with regard to co-production. To complete the tool (and to get a visual representation of where you are at on the ‘co-production wheel’) you need to rate your organisation/project in six different areas on a ‘not there yet’ to ‘excellent’ scale.
Economic evaluation

Economic evaluation focuses on making clear the relationship between the amount of benefit achieved and the investment needed. The following resources have been chosen for their ‘introductory’ focus and relatively accessible style.

**Because it’s worth it: A practical guide to conducting economic evaluations in the social welfare field**
(Byford S, McDaid D, Sefton T, 2003)


This document offers an accessible overview of the main methods used in economic evaluations, including examples of the methods in practice. Although the guide is written from a social care perspective, the methodologies can be adapted for different areas (the perspective is key when deciding which costs should be included in cost analyses).

**Value for money of changing healthcare services?**
**Economic evaluation of quality improvement**
(Severens JL, 2003)

[http://qualitystsafety.bmj.com/content/12/5/366.long](http://qualitystsafety.bmj.com/content/12/5/366.long)

This article explains the basic concepts of cost analysis and different types of economic evaluations and discusses ‘a model for working through the economic issues of quality improvement.’
The cost-effectiveness of quality improvement projects: a conceptual framework, checklist and online tool for considering the costs and consequences of implementation-based quality improvement
(Thompson C et al. 2015)


This paper discusses some of the theoretical and practical difficulties in assessing the cost-effectiveness of implementing improvement projects and suggests a ‘policy cost-effectiveness’ approach. The paper includes a checklist and a link to an online tool, both designed to help services create more cost-effective implementation strategies.

NB: this paper is not open access and you need to pay to view it, or have access to an institutional subscription.

NB: Please note that the link to the online tool provided in the paper does not seem to be working.

Economic evaluation of implementation strategies in health care
(Hoomans T and Severens JL, 2014)


This editorial discusses the importance of economic evaluation in the context of implementation science in general, and of implementation strategies in particular. The focus is on exploring how different forms of economic evaluation can be incorporated into implementation decisions to improve efficiency.

Economic evaluation alongside randomised controlled trials: design, conduct, analysis, and reporting
(Petrou S and Gray A, 2011)

www.bmj.com/content/342/bmj.d1548

This paper discusses the importance of incorporating economic evaluations into randomised controlled trials and outlines the common problems that should be addressed when designing, conducting, analysing and reporting economic evaluations in trials using patient level data.
Economic evaluation using decision analytical modelling: design, conduct, analysis, and reporting
(Petrou S and Gray A, 2011)

www.bmj.com/content/342/bmj.d1766

This paper describes how to optimally use decision analytic modelling in economic evaluations that synthesise summary data from many sources instead of using individual patient level data. It describes the different types of models that can be used – decision trees, Markov models and alternatives – and how to populate, quantify and report on these models effectively.

The Precede-Proceed Model

http://lgreen.net/precede.htm


The Precede-Proceed Model is a cost-benefit evaluation model first developed by American researcher Lawrence W Green and colleagues in the 1970s. It aims to help planners and policy makers to design, analyse and evaluate health programmes efficiently. The first link is to the author’s website; the second is to the Community Tool Box website (from the Center for Community Health and Development at the University of Kansas) that provides a clear and comprehensive description of the model and how to use it.
Inspiration for writing your evaluation report

Here are examples of published evaluation reports:

- **The MAGIC programme: evaluation**  
  (The Health Foundation, 2013)  

- **Closing the Gap through Changing Relationships: evaluation**  
  (The Health Foundation, 2014)  

- **The Patient-Centred Care Project: Evaluation report**  
  (The King’s Fund, 2011)  

- **Funding the Practice of Learning: An evaluation of the King’s Fund’s Partners for Health in London funding and development programme**  
  (The King’s Fund, 2008)  
  www.kingsfund.org.uk/sites/default/files/field_publication_file/funding-practice-learning-partners-for-health-feb08.pdf
Other evaluation reports and publications can be viewed by browsing the following websites:

The Health Foundation:
www.health.org.uk/publications?search=evaluation&sort=relevance

The King’s Fund:
www.kingsfund.org.uk/publications?search=evaluation&

RAND Corporation:
https://www.rand.org/topics/health-care-program-evaluation.html

You may also find the following resources useful for learning about the ‘essentials’ of evaluation report writing:

Better Evaluation – final reports:
www.betterevaluation.org/en/evaluation-options/final_reports

Evaluation: what to consider
Commonly asked questions about how to approach evaluation of quality improvement in health care
(The Health Foundation, 2015)
Pages 53 and 54 – Example contents of a traditional evaluation report:
Our top tips for evaluation

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Start thinking about evaluation before the implementation of your project or programme begins

Every initiative should include plans for its evaluation from the outset. Ideally, evaluation should be an integral part of a project/programme, rather than an afterthought. This means making time for evaluation and investing in the necessary resources and personnel.

You may find the following resources helpful:

- Evaluation: what to consider
  Commonly asked questions about how to approach evaluation of quality improvement in health care
  (The Health Foundation, 2015)

- CLAHRC Evaluation Guide Version 2
Be clear and informed about what type of evaluation is needed and why

There are different types or approaches to evaluation depending on what is being evaluated and why. For instance, impact evaluation (also known as outcome evaluation or summative evaluation), process evaluation (also known as formative evaluation) or developmental evaluation.

Choose the type(s) that are best suited to your aims and needs.

You can read about some types of evaluation/different approaches on these websites:


Be selective and realistic – you can’t evaluate absolutely everything

Work strictly within the resources you have, not to an ‘ideal case scenario’.

Think about the overall time allocated to the evaluation, but also timeframes for individual tasks that need to be completed (often at different times).

Know how many people will be actively working on this and in what capacity.

Be clear on budgets and finances available.

Also consider data sources and data access, especially in terms of any restrictions or limitations, right from the start.
Make sure you are crystal clear on the project/programme inputs, aims, objectives and outcomes and how the evaluation will assess these

Crucially, ensure that everyone else understands these too.

Formulating a theory of change or a logic model might help.

You can learn about logic models at the Community Tool Box website:


Every project/programme is different and will require a bespoke approach to evaluation

You can of course look at evaluations of similar initiatives for inspiration or learning, but ultimately you will need to build your evaluation to suit your specific programme/project and its goals.

Use a range of methods in your evaluation whenever possible

This may involve using quantitative (numerical) or qualitative (narrative) methods, or a mixture of both. The use of ‘mixed methods’ often leads to more rounded, comprehensive and informative findings, although this, of course, depends on the aims and objectives of your evaluation.

You can read about the basic distinction between quantitative and qualitative methods and some examples of both on the USA ATSDR (Agency for Toxic Substances and Disease Registry) website:

www.atsdr.cdc.gov/communityengagement/pce_program_methods.html
Make your evaluation ‘people-centred’

Evaluation is carried out by people for people. Who are your stakeholders and what are their priorities? Who will be part of your evaluation team? Are different stakeholders represented?

Seek feedback from stakeholders throughout and engage with people at all levels from the start.

For further information about stakeholder analysis, visit the archived site of the former NHS Institute for Innovation and Improvement:


Consider whether your evaluation team should be external, internal or somewhere in between

Is an ‘arm’s length’ evaluation, conducted by external evaluators essential to maintain independence and objectivity and reduce bias? Or would an internal evaluation, carried out by members of your team better suit your needs and objectives?

Alternatively, you may wish to consider a co-produced evaluation (often called ‘participatory evaluation’) where some of the evaluators may be external, bringing expertise and a degree of objectivity, but project/programme stakeholders are actively involved in designing and executing the evaluation.

You can read about participatory evaluation on the Better Evaluation website:

www.betterevaluation.org/en/plan/approach/participatory_evaluation
Manage expectations

When people feel passionate about a project or an initiative, emotions may run high. People can have widely different ideas about what the evaluation should achieve, how it should be conducted and by whom.

Set out a clear evaluation plan as soon as possible and make sure all stakeholders are ‘on the same page’.

Plan for patient and public involvement (PPI)

Including patients, service users, carers and members of the public in the evaluation of your project/programme is invaluable. To do so in a meaningful way takes commitment, time and resources, but the benefits far outweigh this.

You may find ‘KIS advice about patient and public involvement’ helpful. This is available at:

www.kingsimprovementscience.org/kis-PPI-advice

Create a ‘learning environment’ and an atmosphere of openness and transparency

Think of evaluation as a learning and improvement opportunity for all involved, not just a way to provide feedback or assessment.

Keep asking ‘why’ – don’t be satisfied with numbers and statistics, but keep asking ‘what does it mean?’ and ‘how can we do better?’

Encourage people to bring up any issues or concerns they might have, irrespective of their role.

Make all paperwork and documentation transparent and easily accessible (notwithstanding any data protection or confidentiality norms).
Communication and understanding are key

Think about your communication strategy and ways of keeping people informed from the start and throughout. How will you reach different audiences?

How will you communicate difficult or ‘negative’ findings?

Use accessible, jargon-free language as much as possible, including in any reports or other outputs.

You may find ‘Communication: a practical resource’ helpful. This is available at:

www.kingsimprovementscience.org/communication-practical-resource
Help available from the King’s Improvement Science team

This resource was created by King’s Improvement Science (KIS), a specialist team of improvement scientists, senior researchers and fellows, based at King’s College London. KIS was set up in 2013 by King’s Health Partners, an academic health science centre comprising three NHS trusts – Guy’s and St Thomas’ NHS Foundation Trust, King’s College Hospital NHS Foundation Trust and South London and Maudsley NHS Foundation Trust – as well as King’s College London. The work of the KIS fellows has been funded by Guy’s and St Thomas’ Charity and the Maudsley Charity. The work of KIS fellow Louise Hull has also been supported by the NIHR CLAHRC South London.

KIS is now part of the Centre for Implementation Science at King’s College London. The Centre for Implementation Science is part of the NIHR CLAHRC South London.

KIS resources

The KIS team have developed the following resources:

- **Quality improvement guides**
  - Step 1: KIS Introduction to quality improvement
  - Step 2: KIS guidance for deciding what to improve and assessing the feasibility of a quality improvement project
  - Step 3: KIS template for planning and evaluating a quality improvement project

- **KIS advice about patient and public involvement**

- **Implementation Science Research Development (ImpRes) tool and guide**

- **KIS guide to evaluation resources**

- **Communication: a practical resource**

- **KIS glossary of terms used in improvement and implementation**

You can download the resources at: www.kingsimprovementscience.org.

This website also contains information about quality improvement projects carried out by the KIS team.

The KIS team can advise anyone who wants to carry out a quality improvement project in south London, or further afield.

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**Advice clinic for quality improvement and implementation science projects**

If you are planning a quality improvement or implementation science project and need expert advice, you can book a place at our advice clinic at King’s College London. To find out more, visit: www.clahrc-southlondon.nihr.ac.uk/training-and-education/advice or email: clahrcshortcourses@kcl.ac.uk.

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**Monthly seminars about improvement and implementation**

Leaders in the field of improvement and implementation share and debate their experiences at these monthly seminars. They are open to anyone interested. Find out more: www.clahrc-southlondon.nihr.ac.uk/centre-implementation-science/research-team/seminars.

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**Evaluation**

Any organisation can commission the KIS team to evaluate improvement / implementation programmes or projects, or to help set up ongoing evaluation procedures. We are also happy to discuss the possibility of collaborating as an evaluation partner on a grant application. Email us to find out more: kis-team@kcl.ac.uk.

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**Training and education**

Members of the KIS team teach on the following courses:

- **Principles of Implementation and Improvement Science**:
  This is a standalone masters module at King’s College London. It involves 10 days in the classroom spread over one or two terms. For more information, email clahrcshortcourses@kcl.ac.uk.

- **Implementation Science Masterclass**:
  This is a two-day Masterclass for health professionals and researchers held each summer in London. Patients and service users who have experience of research may also be interested. Find out more: www.clahrc-southlondon.nihr.ac.uk/short-courses.