

Funding the Practice of Learning

AN EVALUATION OF THE KING'S FUND'S PARTNERS FOR HEALTH IN LONDON
FUNDING AND DEVELOPMENT PROGRAMME

Marsaili Cameron, Sheila Marsh, Kathryn Hinds and Steve Dewar



© King's Fund 2008

First published 2008 by the King's Fund.

Charity registration number: 207401

All rights reserved, including the right of reproduction in whole or in part in any form.

Available from:

King's Fund
11–13 Cavendish Square
London W1G 0AN
Tel: 020 7307 2591
Fax: 020 7307 2801
Email: publications@kingsfund.org.uk
www.kingsfund.org.uk/publications

Edited by Caroline Pook
Typeset by Peter Powell Origination & Print Limited

Contents

Summary	1
Introduction	5
The importance of learning from practice	5
Partners for Health in London: a King's Fund funding programme promoting conversations between practice and policy	5
Partners for Health in London: what and who was it for, and how did it work?	8
Focus and purpose	8
Who applied?	9
How did the programme work?	9
Success rates	9
Scope and method of this evaluation	12
The case studies	12
The structure of the evaluation report	13
Partners for Health: what was learnt and how?	14
Analysis of themes and issues	14
Two case studies	21
Starting points	21
The evaluation workshop	21
After the workshop	22
After the funding decision was made	24
Reflections from the funder: what did the King's Fund learn?	26
Who was the programme for?	26
How easy was it to communicate our central purpose: learning from service delivery?	27
Did the focus on evaluation and learning in the application process deliver the intended benefits?	28
What kind of partnership emerged from the assessment process?	28
Conclusion	30
Continuing challenges	30
References	31
Appendix 1: Evaluation workshops in Rounds 1 and 2 – applicants' experiences	32
Appendix 2: Carrying the learning forward: what really matters?	35

About the authors

Marsaili Cameron has more than 25 years' experience as an independent consultant and writer, with particular interests in health and social care, community development, and professional education. She has undertaken numerous assignments for the NHS in London, for the Greater London Authority and with the King's Fund. These include research, evaluation and publications, for example, on broad public health concerns and strategy; links between mental health and regeneration; health impact assessment.

Sheila Marsh has worked independently in management, learning, development and research for more than 20 years, predominantly in the public sector. She has experience with funding bodies and in developing grant-aid programmes. Her consulting work involves her in evaluative and research activities with local government, voluntary and community organisations and the health service.

Marsaili and Sheila are both directors of Continuous Learning in Organisations Ltd, a company of independent consultants who developed and now deliver a Master's programme in Leadership for Health and Social Care in partnership with universities, the NHS and social services employers.

Kathryn Hinds is the Lead Funding and Development Manager at the King's Fund. Her main responsibilities are the strategic direction and day-to-day running of the Partners For Health programme. She has a background in grant-making, most recently with the Big Lottery Fund, and project management in the voluntary sector. She also has an MSc in Organizational Behaviour.

Steve Dewar is Director of Funding and Development for the King's Fund. He specialises in political ideas for health care, professionalism and regulation, and the nature of personal and organisational learning. With a background in operational research, he has nine years' experience in the NHS as a researcher and public health specialist and as change manager in a district general hospital. He has written extensively on a range of health care issues

Acknowledgements

We would like to thank the eight applicant organisations who gave us access to their thoughts and processes in the case studies and the whole King's Fund team and its advisers for an unfailingly reflexive approach to such new and challenging work.

Summary

This paper tells the story of an innovative approach by the King's Fund to develop the role of learning from practice in the voluntary sector through its new grants programme, Partners for Health, which was set up in 2005. The paper presents the findings of an evaluation of the programme, focusing on the accounts of applicants as they went through the application process, and how they made sense of the evaluation workshop – a key intervention by the Fund – during the process. The paper also includes a reflection from the funding team on some of the key challenges that the evaluation raised during the first two years of the programme, and how the learning from this changed the programme.

The aim of the paper is to share some of the lessons and challenges of this new way of grant-making, and to invite other funders to join in this exploration of exciting new territory.

The King's Fund

The King's Fund has a very successful track record in supporting research, backing community-based health organisations and supporting practical services to improve health and health care for Londoners. Key activities include health policy analysis, leadership training for managers from the health and voluntary sectors, and hosting the Health Management Specialist Library of the NHS National Library for Health. Underpinning the work of the Fund is a commitment to create a health care system that recognises the diversity of London's population and reduces disparities in health between different groups.

The King's Fund has given grants since its inception in 1897 when it gave money to voluntary hospitals to improve the care that they could provide. Today, the Fund is widely known as a 'health think tank', and Partners For Health reflects this emphasis on knowledge development.

History of the new programme

The Fund has gained a reputation for funding voluntary sector organisations to deliver projects that improve care in the capital. Increasingly, however, it was becoming dissatisfied with the lack of knowledge transfer from the practice in its funded projects to its policy work. Although generally it had a good relationship with its grant holders, there was not enough engagement to understand the dynamics and contexts of the funded projects, and therefore much learning was lost.

Therefore, the Fund needed to develop a new funding programme with a sharper focus and a way of demonstrating an impact by developing knowledge about how to improve health.

Partners for Health

In August 2005, the Fund introduced Partners for Health in London: a funding programme that aimed to develop a better, and shared, understanding of what works in the delivery of services. The word ‘partners’ was chosen to convey the fact that this programme involves a closer, franker and more dynamic kind of relationship than is perhaps traditional between funder and potential grant holder.

In the first two years of the programme, funding was focused on the following three strands of work:

- mental health advocacy
- sexual health for black and minority ethnic (BME) communities
- end-of-life care.

The Partners for Health programme was (through 2005 to early 2008) open to voluntary organisations or statutory agencies working in health. With an annual ‘pot’ of £1 million, Partners for Health offered two funding rounds a year. Each round was made up of three stages: a proposal, a two-day workshop and an application. Successful applicants subsequently spent time with members of the Fund’s funding team, discussing the focus they would choose for evaluation and learning. They considered the questions they would try to answer as the project progressed, and how they would collect and create evidence that they can share with others.

The evaluation

The Fund set up an evaluation of the first two rounds of the Partners for Health programme, and invited two independent evaluators to assess the application process. Their aim was to explore how effectively the programme was meeting some of its key criteria, and, in particular, to assess the impact of the evaluation-workshop approach that the funding team hoped would strengthen applications.

The funding team was interested in finding out the following:

- did the workshop inform the applications and change the way they were developed?
- did the workshop have a broader effect on the organisations who attended?

The evaluators worked with eight organisations from the two funding rounds. These organisations spanned the three strands of work, and also included larger and smaller, more established and newer groups, in order to ensure a breadth of experience.

In their work with applicant organisations, the evaluators made extensive use of a case-study approach, where they shadowed applicants in order to create a multi-layered picture of how they used their experience at the evaluation workshop. The evaluators sat in on project planning meetings, talked with people from the organisation, by phone and/or face to face, read internal documents relevant to the application for funding and analysed a post-workshop questionnaire.

Evaluation findings

The following key lessons emerged from the evaluation.

- Partners for Health challenged traditional approaches to fundraising. It aimed to engage with practitioners designing and delivering services rather than fundraisers.
- The emphasis on learning from practice caused the applicants to question their ideas about their project more deeply.
- Most of the applicants enjoyed the workshop and found it stimulating.
- There was some skills development and an acknowledgement of the process as a learning tool. Applicants valued the opportunity to reflect on and question what they were doing. Some thought that this learning approach would lead to greater sustainability and innovation.
- Developing an application was time consuming, particularly if partners were involved. However, this was balanced by the culture change that organisations experienced, which, on the whole, was considered to be positive. Changes included greater engagement with partners, more conversations with other internal departments, and a greater focus on the client or user.
- There was a tension between complexity and clarification. Applicants underestimated the amount of detail needed in the application at the outset. They also had to deal with the political ramifications of simplifying their projects – if it meant not offering a service to a section of the community or not seeing as many clients – to enable them to focus on their evaluation.
- In comparing Partners for Health with other funding programmes, applicants thought that evaluations carried out for others would not have a significant effect on the provider or the quality of the service. They did not expect funders to learn from them either.
- Some commentators, both internal and external to the Kings Fund, expressed concern about the criteria that excluded organisations with an income of £150,000. However, the evaluation showed that the belief that a project in this programme was time-consuming to develop and manage – and therefore not suitable for the smallest organisations – was well founded. A broad range of organisations have been funded, including BME-led organisations.
- There was much greater contact between the funder and applicant at all stages of the application process. This made the relationships emotionally more difficult for the funder, but this was balanced by opportunities to discuss and give feedback on applications that many found helpful.

Conclusion

The main aims of the evaluation were to discover whether the workshop informed applications and changed the way they were developed, and whether it had a broader effect on the organisations.

The short answer to both of these elements is yes. Case-study accounts demonstrate that the workshop had a considerable effect on the way that applications were developed. The application process led to comparisons with other funders and a questioning of how projects are developed generally in response to grant programmes. However, with other grant programmes, the organisations were working as part of a relationship that they understood, and the terms of engagement were deeply ingrained in their practice, so switching from a fundraising focus to a learning one was challenging; inevitably, some were more successful than others. The King's Fund had also underestimated the extent and demands of this transition and has had to reinforce key messages in order to ensure greater consistency about the learning focus at all stages of the process.

It is beyond the scope of this evaluation to say whether the broader effects on the organisations are long-lasting. Workshops appeared to trigger greater internal discussions and more consultation with partners, and applicants could also see how the lessons of the workshop could be applied to other projects in their organisation. A key factor as to whether organisations can establish a more questioning and learning approach to project development is resources. The most obvious resource is time, and all of the organisations devoted more time to this process than they would to other applications. Related to this is the value that organisations place on learning: do managers and the wider organisation support practitioners to reflect on their work? Do the practitioners allow themselves the time to think about what they do?

Continuing challenges

The concerns that applicants raised about the assessment process also apply to management of the grant: organisations that were successful in their bid face the challenge of balancing clarity and complexity, managing the varied stakeholders in the funded projects, and finding the time to reflect on and deliver the service.

The Fund is continuing to review the evaluation workshop to ensure its relevance and accessibility, and to make sure that all applicants have an equal chance of success. The engaged relationship with grant holders as well as applicants has enabled the Fund to become more of a learning organisation itself and has provided opportunities for practitioners to educate the Fund about their work. This learning informs the workshop as well as the programme as a whole. The next stage in the journey is to see how the accounts that the funded organisations produce of their projects may inform wider practice.

Introduction

The importance of learning from practice

Voluntary agencies are key partners in the delivery of health and social care to London's diverse communities. Staff from the voluntary sector are particularly successful in working with people with multiple needs who are living in very difficult circumstances. Also, voluntary agencies often take on the valuable role of advocating for, and translating the needs of, the most vulnerable people, and becoming their voice in negotiating for resources from the state sector.

However, in practice, the statutory sector does not fully acknowledge the value of the work of voluntary agencies, and therefore does not draw on it to the extent that it should if there are to be real and significant improvements to health, and health inequalities, in London. This paper argues that a key reason for this relative neglect is that, in a health policy environment that requires practice to be evidence based, voluntary agencies are rarely able to show how, and why, they 'make a difference'. Why is this?

Funders of the voluntary sector – both state and charitable – tend to require the organisations they fund to focus on delivery targets rather than on lessons learnt. The effect of these reporting requirements is to discourage broad and deep understanding of the communities that the organisations serve. The voluntary sector is also action focused, and organisations rarely make time to reflect on their practice. Practitioners are usually client oriented and often feel guilty or frustrated if they spend time away from their users. After all, voluntary sector agencies are not generally creating learning programmes independently of their funders.

However, learning from practice is vital. Take for example, the field of sexual health. There is little evidence here of the value of the most common health promotion interventions (Ellis and Grey 2004). There is a particularly high level of sexually transmitted disease infection among black and minority ethnic (BME) communities; eventually, there is an associated cost to the health service and other social welfare institutions of poor sexual health.

Partners for Health in London: a King's Fund funding programme promoting conversations between practice and policy

THE KING'S FUND

The King's Fund has a very successful track record in supporting research, backing community-based health organisations and supporting practical services to improve health and health care for Londoners. Key activities include health policy analysis,

leadership training for managers from the health and voluntary sectors, and hosting the Health Management Specialist Library of the NHS National Library for Health.

Underpinning the work of the Fund is a commitment to create a health care system that recognises the diversity of London's population and reduces disparities in health between different groups.

The King's Fund has given grants since its inception in 1897, when it gave money to voluntary hospitals to improve the care that they could provide. Today, the Fund is widely known as a 'health think tank', and its major grants programme, Partners For Health, reflects this emphasis on knowledge development.

The King's Fund has a longstanding commitment to cross-sectoral and multi-level learning in health and health care. When awarding grants, therefore, the Fund needs to consider how to ensure that this money will lead to learning as well as to improved services. With this background, the Fund is ideally placed to orchestrate conversations between practice and policy.

HISTORY OF THE PARTNERS FOR HEALTH PROJECT

The Fund has gained a reputation for funding voluntary sector organisations to deliver projects that improve care in the capital. Increasingly, however, it was becoming dissatisfied with the lack of knowledge transfer from the practice in its funded projects to its policy work. Although generally it had a good relationship with its grant holders, there was not enough engagement to understand the dynamics and contexts of the funded projects, and therefore much learning was lost.

Moreover, the Fund had less money to give out, and success rates were dwindling. Therefore, the Fund needed to develop a new funding programme with a sharper focus (in terms of a narrower area of interest) and a way of demonstrating an impact associated with its wider activities, namely developing knowledge associated with health improvement.

In August 2005, the Fund introduced Partners for Health in London, a funding programme that aimed to develop a better, and shared, understanding of what works in the delivery of services at community level. The word 'partners' was chosen to convey the fact that this programme involved a closer, franker and more dynamic kind of relationship than was perhaps traditional between funder and potential grant holder.

THE EVALUATION

In order to understand the impact of the Partners for Health programme on applicants, the Fund set up an evaluation of the first two rounds, and invited independent evaluators to assess the application process. The evaluation highlighted some problems for the funding team, which enabled members to take action to rectify some of them.

This paper presents the findings of the evaluation, focusing on the accounts of applicants as they went through the application process and how they made sense of the evaluation workshop – a key intervention by the Fund – during the process.

AIMS OF THIS PAPER

The Fund intends this evaluation, as well as future work, to inform others about the role of evaluation in understanding community services and the lives of their users. There is a great deal more to learn about how to support the creation of practitioner knowledge, so that organisations are able to produce informative and influential accounts of their work.

This paper aims to share some of the lessons and challenges of the Fund's new way of grant-making, and to invite other funders to join in this exploration of exciting new territory.

Partners for Health in London: what and who was it for, and how did it work?

Focus and purpose

Voluntary and statutory organisations working on London-based projects share funding of around £1 million each year. In the first two years of the programme, funding has been focused on the following three strands of work.

Mental health advocacy

Key challenge for applicants:

- To develop and deliver services that aim to establish how effective mental health advocacy may be in different circumstances.

Sexual health for black and minority ethnic (BME) communities

Key challenge for applicants:

- To make the development and delivery of sexual health services more responsive to the needs of defined minority ethnic communities.

End-of-life care

Key challenge for applicants:

- To deliver projects that will improve the quality of life for dependent adults and their carers facing the impact of end of life.

Why focus on these strands? There are three main reasons.

- The King's Fund has been associated with these areas of work for some time, and so is familiar with key issues involved and has access to relevant expertise.
- In previous grant programmes, the Fund experienced a high demand for support in these areas.
- These are areas where voluntary sector organisations frequently deliver services, but there is little evidence about the efficacy of the interventions.

A core challenge was to design the Partners for Health programme so that participating organisations would learn more about the effects of their own interventions. Therefore, it was agreed that it would be essential to support organisations and teams in carrying out good-quality evaluations of their work. Findings from these evaluations, it was hoped, could be used to help inform wider debates about how care could best be delivered.

Who applied?

The Partners for Health programme was open to voluntary organisations or statutory agencies working in health. Statutory agencies included:

- primary care trusts (PCTs)
- hospitals
- universities
- health authorities.

Projects led by statutory agencies were funded to only 50 per cent of costs.

Organisations needed to demonstrate that they had the capacity in terms of human resources to manage the partnership requirements that were integral to the programme. This included the requirement that organisations demonstrate an income of more than £150,000.

How did the programme work?

With an annual 'pot' of £1 million, Partners for Health offered two funding rounds a year. Each round was made up of three stages.

1. **Proposal.** Using a short form, applicants outlined their ideas and indicated how they fit some basic criteria. The Fund then shortlisted proposals, and about 15 organisations were invited to a workshop on evaluation.
2. **Two-day workshop.** During the workshop, applicants were introduced to the model of evaluation that was used in the Partners for Health programme: Pawson and Tilley's 'realist evaluation' (see p 10 for a fuller explanation of the model). They were also supported in developing their response to some key questions on evaluation in the application form.
3. **Application.** Applicants had approximately six weeks to fill in their form. The Fund then drew up a shortlist of about six projects and invited these applicants to a selection day, where final decisions were made, after interviews.

Successful applicants subsequently spent some time with members of the King's Fund funding team, discussing the focus they would choose for evaluation and learning. They considered the questions they would try to answer as the project progresses, and how they would collect and create evidence that they could share with others.

Success rates

Partners for Health was a very competitive programme. The table below shows the success rates of the first two rounds of the programme in the winter of 2005 and the spring of 2006. The number of proposals has dropped over the rounds and the Fund has not actively sought applications. The success rate was four per cent for Round 1 and seven per cent for Round 2.

TABLE 1: SUCCESS RATES OF THE FIRST TWO ROUNDS OF PARTNERS FOR HEALTH IN LONDON

Strand	Proposals received		Applications received		Approved applications	
	First round	Second round	First round	Second round	First round	Second round
End-of-life care	12	10	3	3	1	2
Mental health	42	22	10	5	3	1
Sexual health	38	25	7	6	0	1
Total	89	57	20	14	4	4

PAWSON AND TILLEY'S 'REALIST EVALUATION'

The Partners for Health evaluation workshop is informed by ideas from the realist school of evaluation, popularised by Pawson and Tilley in their book, *Realistic Evaluation* (Sage 1997). They define evaluation as 'the task of improvement through understanding', and this intention underpins the underlying design of the Partners for Health programme.

Pawson and Tilley say that evaluations should be designed to answer the following key question:

Which intervention works best for whom in which circumstances and settings?

At the outset, the funding team asks applicants to state why they think what they are proposing will meet the identified need of proposed users. This should be based on their experience of the people they work with and the kind of work they do. Their informed guess will be their first attempt at explanation. By collecting data that is guided by this explanation, they can then test out whether it has a bearing on reality. The evidence should tell them how right or wrong they are, as well as helping them to answer the above question.

The explanation that applicants develop comprises three components discussed further below:

- the context for the intervention
- the mechanism involved – how does this intervention work
- the outcomes – what change is expected as a result of the intervention.

The context

Identifying the context helps to answer the 'for whom' and 'in which circumstances and settings' part of the question. It tells others the key characteristics about the users, ('the whom' part of the question), and also the situation or circumstances that may affect the project ('the circumstances and settings' of the question).

All projects take place in 'real' life and the context of the project will affect how it functions. The idea of the project is not to change these conditions (some of which aren't open to change); however, an important part of understanding how an intervention works is to have some idea of the influence of these conditions, circumstances or situations on it.

The mechanism

The 'mechanism' part of the explanation attempts to explain why a particular intervention works (the 'what works best' part of the key question). There are two parts to this concept. The first is the motivation of the user to change. All projects rely on this inner trigger to affect change in individuals. For example, a smoking-cessation programme that uses a picture of an unborn foetus of a mother who smokes, and compares it with one who doesn't, assumes that this comparison will motivate a pregnant woman to stop smoking because of her concern for her unborn child. The second part of the 'mechanism' is a description of the intervention and the resources that the organisation will bring to change the situation.

Outcomes

Outcomes aim to predict the observable change in the situation that can reasonably be linked back to the intervention.

Understanding how the mechanism and the context interact to produce the outcomes, or not, is the aim of realist evaluation. The methods for collecting the evidence can vary from project to project. However, Pawson and Tilley do not encourage a random-control-trial approach to evaluation and are more likely to recommend a variety of qualitative approaches. These methods enable a richer picture to emerge of the motivations and contexts of the users.

Scope and method of this evaluation

Well before the first round of funding, the King's Fund appointed two external evaluators, Marsaili Cameron and Sheila Marsh, to explore how effectively the programme was meeting some of its key criteria for the first year, and, in particular, to assess the impact of the evaluation workshop approach that the funding team was taking to strengthen applications.

The funding team was interested in finding out:

- did the workshop inform the applications and change the way they were developed?
- did the workshop have a broader effect on the organisations?

The external evaluators were not involved in any way in the assessment of individual applications to the programme.

The evaluators drew on a 'learning history' (Roth and Senge 1997) approach, whereby a variety of people's views and reactions are captured, including those who are uncommitted to an initiative. Such an approach provides insights into the complex reality in which individual and organisational learning take place. Accordingly, the external evaluators saw their role as being to unlock the hidden dimensions of experience, as well as to identify factors that had a more obvious part to play. They considered the observation of key events, such as workshops and discussions, to be an important way of capturing this information, supplemented by a review of application material. It was decided to take a case-study approach to the evaluation.

The case studies

In their work with applicant organisations, the evaluators made extensive use of a case-study approach, where they shadowed applicants in order to create a multi-layered picture of how they used their experience at the Partners for Health evaluation workshop.

The purpose of using this approach was to engage with a range of applicant organisations so that the evaluators could gain in-depth insight into how real-life constraints and pressures affect the willingness and ability of these organisations to build commitment to reflection and learning into their project planning.

The method involved seeking the agreement of selected organisations for the evaluators to:

- sit in on project planning meetings
- talk with people from the organisation, by phone and/or face to face
- read internal documents relevant to the funding application
- analyse a 'reaction questionnaire' to gauge applicants' opinions of the evaluation workshop.

A written agreement to participate in the evaluation made it clear to organisations that the case studies developed from the research would be anonymous and that the funding team would not know which organisations the evaluators were working with. The intention was to minimise the problem of socially desirable accounts, which respondents may have felt bound to give, as they were applying to the Fund for money. The evaluators shared all interim findings with the funding team after the completion of the rounds.

The evaluators worked with four organisations in Round 1 and four in Round 2. These organisations spanned the three application strands and included larger and smaller, more established and newer groups, in order to ensure a breadth of experience.

With the agreed aim of shared learning, the evaluators offered periodic notes to the funding team for discussion; and the funding team carried out regular and intensive internal reviews.

There seemed to be two main ways of learning from the case studies. The first was by gaining a multi-dimensional sense of ‘how it feels from the inside’ by following the stories of the organisations being tracked. The second was by developing an analysis to present what seem to be significant cross-cutting themes (see next section).

The structure of the evaluation report

The analysis of the case-study accounts is presented as the key findings of this evaluation. Two case studies are also presented to give a flavour of the process from an applicant’s point of view: Organisation A took part in Round 1 and Organisation B in Round 2. These studies are interesting because they recount the experience from the point of view of a manager and a project worker. Their stories can be found on pages 21–25.

The King’s Fund funding team has written a reflection and response to the evaluation and this follows the analysis. This aims to offer a perspective from the other side of the application process. There is also some commentary on what the team has discovered about learning and evaluation from subsequent rounds and grant-management experiences, and how this understanding has changed the Partners for Health programme.

A short analysis of the evaluation sheets that applicants in Rounds 1 and 2 completed can be found in Appendix 1.

Appendix 2 offers the perspective of a voluntary organisation that has taken an active part in the Partners for Health programme. Voluntary Action Camden describes its experience of working with the Fund’s approach to evaluation and considers what learning it thinks would be useful to share with other funders and commissioners.

Partners for Health: what was learnt and how?

This section presents the main findings of the evaluation. It analyses the themes that arose from the material collected from all eight organisations that the evaluation team followed. The analysis:

- discusses themes and issues that arise from comparing the Partners for Health experience with other funding programmes
- describes the changes in behaviour to develop an application and how these changes might affect the organisation more broadly
- shares opinions about the wider applicability and sustainability of this model of funding.

Analysis of themes and issues

WHAT DO FUNDED ORGANISATIONS CURRENTLY EXPECT OF FUNDERS?

As applicants learnt about the nature of the King's Fund programme, and became involved in it, they compared and contrasted the new approach to evaluation with what they saw as standard for the sector. What seemed to them to be standard? And what were some of the implications of that perception?

An external adviser to one of the applicant groups summed up what was found to be a widespread attitude toward funders' requirements for the evaluation of projects:

We're talking about satisfying the Fund, right? Nothing to do with the project.

The adviser followed this up with an equally challenging question:

The odds for success aren't good: so why are you spending your time on this application?

Questions of this kind spurred the group on toward further exploration of the underlying key question: Who benefits from the evaluation of projects, and how?

This group, like many others in the case-study series, started from the premise that the evaluation that funders expect will be of a fairly 'tick-box' variety. The fact that evaluation of some kind is in place will 'cover everyone's back', offering a kind of token that public or charitable money is not being wasted. There is little or no expectation that the process or outcomes of evaluation will have a significant effect on the provider organisation or the quality of service made available to clients, and still less on the organisation providing the funds. The following quotations from different applicant groups illustrate this kind of expectation.

Other funders talk monitoring and evaluation but are not clear about outcomes and expected learning.

Usually, outcomes would tend to be pretty tight and self-contained, eg, 'worker to run six sessions per week'. There would be no research or learning connected with the outcome; it would just be about, typically, providing access to a service. So, for example, you wouldn't find out any more about why a particular worker was having particular results.

Other funders I can think of may not be interested in the kind of outcomes that are involved in the [Partners for Health] approach. They're just interested in, well, for example, will more young people get the chance to see an adviser? You could argue that they should be interested in the higher-level stuff, but – as people said at the Fund workshop – most funders need to have their consciousness raised.

Most applicants saw attendance at the Fund's evaluation workshop as an unusual opportunity to 'find out what the funder really wants' and to get a clear 'steer' on what the funder is looking for in applications.

The workshop was really helpful in making clear the Fund's expectations. As far as I was concerned, the next move was to work out what we needed to do to fit the Fund's requirements.

This approach can veer toward game-playing, where funders are seen to set arbitrary rules, and applicants face the challenge of 'cracking the code'. In some cases, through enthusiastic playing of the game, applicants fell foul of their own desire to please. For example, one project manager placed a great deal of significance on the varied views that the funding team expressed about his organisation's proposal during the workshop. He responded by trying to 'second guess' the team when it came to the final application. He concentrated on making sure that all the different voices and views he had heard at the workshop were represented in the application form. The application was turned down. The director of the organisation was clear about one of the main reasons for this negative result:

In our anxiety to please [the funding team], we hadn't stuck to our guns in terms of the original aims of the project. So we ended up incorporating all the ideas that people suggested at the workshop: they were all lumped together in an unintegrated way. An advocacy expert involved in assessing the applications quite rightly pointed out the impossibility of what we were trying to achieve.

WHAT DO KEY TERMS MEAN TO FUNDERS AND FUNDED ORGANISATIONS AND CAN THESE PERCEPTIONS BE CHANGED?

The case studies make it clear that, in the context of project evaluation, language matters a great deal. Terms may mean quite different things to different people and organisations. Where the 'right' words can open up a new landscape of understanding, the 'wrong' words can seriously impede understanding and, indeed, a willingness to listen.

The section above illustrates some of the applicants' perceptions about what traditional funders are likely to mean by 'evaluation'. Broadly, there is an expectation that activity required under that heading will be of a familiar, almost routine kind. The benefits arising from that activity will therefore be of a limited 'insurance-policy' type.

Instead, the Partners for Health programme asked applicants to extend their understanding of ‘evaluation’ well beyond the usual boundaries. Nearly all of the organisations and individuals involved had a positive response to the idea of a dynamic link between action, evaluation and learning. The term ‘research’ chimed positively with some, but less so with others, where a divide between theory and practice had started to open up, as the following three quotations highlight.

The theoretical approach may have put off many people... There seemed to be a belief that strict formulae could be applied across the board. But many voluntary organisations exist in a very unstable environment; strict formulae are no good for us. Each case is different when it comes to our clients.

I worry, we’re not large, but we’re used to doing this stuff [research], I’m concerned for the small organisation: is it a bridge too far? Would it discourage people with simple but good projects?

People can study for 100 years to become researchers or evaluators. I’m not altogether sure that I fully grasp the King’s Fund brief on evaluation. I think I’ll be looking for specialist help from our research department.

Sometimes funders and applicants used the same words, but this could reveal significant differences in understanding and world view. In the context of the Partners for Health programme, the word ‘fundraising’ proved to be a case in point. The funding team saw fundraising as a specialist activity associated with the marketing and promotion arm of a not-for-profit organisation. Many of the applicants, on the other hand, used the word in a much wider sense, to include everything that has to be done to secure an income for their organisation, such as, for example, preparing an evaluation plan that is acceptable to the funder. One applicant, for example, commented on the evaluation workshop:

The workshop was an excellent introduction to fundraising, I thought.

For the applicant, the bottom-line question tended to be: ‘What do I have to do to get money out of you?’ The funder was perhaps freer to consider such issues as facilitating learning: what one applicant described as ‘the higher-level stuff’. In practical terms, the key issue here was who attended the evaluation workshop. The applicants tended to aim for strong representation on the fundraising side. However, the funding team became worried if the fundraising element predominated, since this usually implied a lack of involvement on the part of those who design and deliver the services: the key arena for learning and change as far as the Partners for Health programme is concerned.

CAN FUNDERS AND FUNDED ORGANISATIONS LEARN AND WORK TOGETHER IN CONSTRUCTIVE NEW WAYS?

The evaluation workshop associated with the Partners for Health programme calls for applicants to show an interest in learning, as well as a willingness to think flexibly about the services their organisations offer to clients.

Most applicants enjoyed the workshop on the whole, finding it stimulating and, at times, quite challenging: for example, through the emphasis on learning by doing. Almost all applicants also appreciated the concentrated attention that the funding team offered to applicants.

It's refreshing how involved the King's Fund is and approachable... The Fund is talking about sharing learning. They didn't feel cynical but very nice. This means that they want to work with us. I feel we are in an interesting experiment where the process is being looked at. I'm pleased with the emphasis on learning from what goes wrong – very helpful.

In many cases, applicants showed real interest in making changes to how they approached project evaluation, both at an individual level and in their organisation as a whole. In the extended quotations below, changes were seen as having potentially positive and negative aspects.

Since the workshop, there's been a fundamental shift for me, to ask at the beginning: what's all this about? I have less of a framework in my mind in a way. The process is more open, and so it takes longer. It's much more about making the work fit what we want out of it. What are we actually looking for? It's the prompting to explore this question that's the really useful point for me: the thing that stands out as different. I contrast this with an application we're doing at the moment for another potential funder. The outcomes are OK, but you wouldn't learn anything from them.

So that aspect is definitely positive. The flipside, though, is that this process of research and inquiry and discussion takes loads of time. I can't see how I could do it with every project.

Back to the positives. As an organisation, we have a policy team and a research officer who will have a role in helping programmes evaluate themselves. Traditionally, this has been difficult in what has been a large but quite fragmented organisation. I think that a lot of the stuff emerging from this King's Fund process needs to be presented to the policy team for further development for use within the organisation.

The requirements of the application process for the Partners for Health programme encouraged almost all of the organisations in the case-study series to consult further, and more deeply, with stakeholders than they would otherwise have done. For example:

The workshop made us talk to others and it's made us more convinced and confident. We've had discussions and we'll involve [those people] at the presentation stage... the evaluation stuff will make it sharper for us to communicate with [others].

The need to think through the implications of their proposals in considerable detail galvanised the energy of applicants to talk more to partners than they would usually have done at this stage.

Many of the applicants talked about the costs involved in making time to take part in a two-day workshop. A few spoke of the benefits involved in this course of action. For example:

It was a luxury to devote all that time to one project: it really helped me to question my assumptions. Looking so closely at the target groups highlighted for me the need to find out more about the people who are at the heart of our proposal.

In one project, a manager and project worker found that the drafting and redrafting needed to complete the application form offered a constructive learning process. Their stated aim was to 'get the form in the right language'. However, they clearly achieved more than this,

with the manager helping the project worker to clarify her arguments and root them more securely and specifically in the situation of potential clients. The project worker was appreciative of ‘all the help we got in the workshop and afterwards’.

Evaluation was pretty new to me, and encountering it in this way was a positive experience for me because it gave us good insights into how we can improve our services. Seeing how it all works – or doesn’t work or might work – through someone else’s eyes was really helpful to me. Especially when the perspective was that of service users. It brought it home to me that the service users have to do this really hard thing of going through transitions. We just provide the service, which is complicated enough, but not half as complicated as facing or doing the transition thing. There’s absolutely nothing simple about how users see the service, get access to it or use it. You have to break down all these processes. That’s what I learnt, and it was really useful.

Another project was concerned with specific communities of young people. One discussion was guided by the chair’s steer that the Fund seemed to want increased clarity and less complexity in the proposal, involving a clear focus on one group rather than diffuse attention across three distinct groups. One group prefaced a useful session with the point that, in relation to the communities of young people of interest to them:

It can’t be either or... If you don’t deal with the parents and community leaders, you won’t get anywhere near being allowed to have anything to do with the young people.

In many situations, especially those with political reverberations, it became clear that complexity could not be sacrificed for clarity: this tension needed to be acknowledged.

At the end of this discussion about the application, comments were invited on the session. Feedback included:

A good discussion. The frameworks we used forced us to gain focus on who the project was really for, and what that meant for who had to be involved.

What’s important for me is that we’ve got trust within this room, genuine relationships. People are speaking openly about sensitive subjects.

Normally, I would write a funding application from beginning to end; but this approach is not appropriate here. No one person could or should do this: it’s a joint effort, even if one or two of us take the lead.

WHAT CHANGES IN CULTURE ARE LIKELY TO BE NEEDED TO EMBED NEW WAYS OF DOING THINGS?

Applicants considered mutual transparency, openness and honesty to be hallmarks of a new and energised approach to evaluation. Values of this kind combined to create a perspective far removed from the traditional ‘game-playing’ approach. For example, one applicant felt that the evaluation workshop ‘boosted our confidence’. She appreciated the open, honest discussion with a team member about research aspects:

The team being there on the two days showed commitment and gave the applicants a taste of what it would be like getting the funding.

Increased openness isn’t confined to relationships between the funder and the applicant. The workshop, and subsequent work on the application form, encouraged applicants to

share their work and ideas more widely than they would have done otherwise, and to adapt them in the light of feedback. Applicants saw this as a hugely beneficial impetus, with wide-ranging significance for future work with partners and other stakeholders. At the same time, applicants highlighted the intellectual and logistical difficulties of working closely with partners and stakeholders. Several organisations in the case-study series struggled with the challenges involved in bringing external and internal stakeholders who had not attended the evaluation workshop ‘up to speed’. This suggests that applicants need to think carefully about how to embed and facilitate this new way of working in their organisations.

A significant change likely to be needed in many organisations is increased acceptance of questioning of cultural norms about performance. Many organisations acknowledged that, in developing and delivering services, there was a real risk of being blinkered by their own status as provider organisations. It was all too easy to see the world in terms of the organisation’s direct concerns, particularly when the operating environment might be stormy. One of the biggest changes associated with the Partners for Health programme was the move toward focusing on the client.

The frameworks we used forced us to gain focus on who the project was really for, and what that meant for who had to be involved.

There’s absolutely nothing simple about how users see the service, get access to it or use it. You have to break down all these processes. That’s what I learnt, and it was really useful.

DOES PARTNERS FOR HEALTH OFFER AN EFFECTIVE, ACHIEVABLE APPROACH TO EMBEDDING NEW WAYS OF LEARNING AND WORKING?

The short answer to this question is that it is too early to tell. The longer answer is that both funder and funded organisations have benefited from the Partners for Health programme, and plan to use the evaluation process to achieve further sustainable benefit in the future. As one participant commented:

It’s a bit post-modern and very good to examine the process – brilliant. The Fund is in the same boat as us. Seeing it expose itself, we’re more equal partners.

The main benefits for both parties were associated with movement toward the new ways of working and the cultural changes described above. Where the programme contributed to that movement, both parties tended to consider it effective. One applicant summed up her overall view of the programme (interestingly, this favourable verdict was offered despite a failure to gain funding):

The process as a whole produced an awful lot of positives for me. Personally speaking, it’s been terribly useful: the main thing is to do with space for evaluating what you’re doing and how you’re doing it. Working with the frameworks and so on has definitely given us additional things to think about when we’re developing this project. Then, as a manager, I’ve found the process – external input – useful as a learning tool in staff development. A further aspect is a renewed interest in research.

Another applicant commented that he saw many useful results from the whole application process, and that he considered the failure to be shortlisted as ‘part of the process, not the last-chance saloon’. One immediate lesson he learnt was that it is important to work closely with the chosen partner organisation from the beginning.

WHAT ARE THE OBSTACLES TO MOVING TOWARD NEW WAYS OF WORKING?

One key element that hindered progression toward new ways of working related to who became engaged in the application process. There were two factors here. One related to the spread of responsibilities reflected in the composition of the applicant team. The main issue seemed to be whether the team included at least one person closely involved in service planning and delivery. Without this knowledge, experience and influence, the team was unlikely to find constructive new ways of thinking and doing.

The other factor related to how readily applicants felt able to make use of the frameworks and structures introduced to them. There was considerable variation here, and many different factors seemed to have been influential. One of these was the lack of confidence in language skills. When one project worker was asked what she saw as the main barriers to a successful shared experience, she said that she felt disadvantaged by the fact that English was not her first language. She said that she would not have felt confident tackling the application form. (It is worth noting that the interviewee's English was of a very high standard.) Others echoed these concerns about the kind of language used, and suggested that what they saw as a 'demanding and academic' approach might exclude some of the groups that the Partners for Health programme most wanted to attract, as the following quotations highlight.

I think that the King's Fund's requirements are incredibly high. How effective is it really going to be in attracting organisations outside the mainstream?... The approach it takes necessarily limits the type of organisations participating in the programme. Successful applicants are likely to be large and/or mainstream service organisations.

Smaller BME groups would have struggled, I thought. It's the type of models used, the type of language.

The timescales involved in the application process presented another key obstacle to moving toward new ways of working. Applicants found considerable difficulty in fitting what needed to be done into the time they had available, particularly where there was a need, or desire, to consult closely with other stakeholders.

The timescale of the process is not ideal by any means. It made me think, 'Do they really understand the kind of pressures we work under?' Where there's partnership working, it's even worse. People's diaries are committed for weeks in advance, and they can't just drop everything. I would expect that the two-day attendance requirement would rule out a lot of people who may have very good projects or ideas. This would be a loss in learning for the Fund.

This process of research and inquiry and discussion takes loads of time. I can't see how I could do it with every project.

The following section offers two case studies of organisations that were involved in the Partners for Health evaluation workshops, and presents a multi-layered picture of how the applicants used their experience at the workshop.

Two case studies

Starting points

ORGANISATION A

This organisation had considerable experience of applying to funding bodies and was used to a high success rate in its applications. It was familiar with the evaluation of projects, and there was an expectation that activity under that heading would be of a familiar, almost routine type.

Normally [with evaluation] I would think: 'This is my idea – what I want to do. How can I get the project to fit the criteria of this funder?' And I would go away and write it up. Basically, I would be wearing my 'service manager' hat.

Yes, that goes for me too. Usually, it will be: 'What projects can we find funding for?', and my role will be to remind people: 'We need to talk about outcomes.'

ORGANISATION B

This organisation was a small unit in a large organisation. A senior manager attended the workshop, along with a relatively inexperienced project worker. The manager commented that the Partners for Health application was part of 'a big learning curve' for the project worker: this was her first experience of a funding application.

The evaluation workshop

ORGANISATION A

Both applicants enjoyed the workshop on the whole, finding it stimulating and, at times, quite challenging: for example, through the emphasis on learning by doing. Despite being conscious of areas of challenge, the applicants felt confident that they and their project were very much 'on track' as far as the Partners for Health programme was concerned. Their extensive prior experience of fundraising resulted in some impatience with parts of the workshop that they saw as 'basic introductions'.

I felt a degree of confidence immediately after the workshop. I knew that we had already thought through many of the key issues; and I could see that others perhaps weren't so familiar with this core territory. I felt that we could build on the workshop to produce an excellent proposal.

The workshop was an excellent introduction to fundraising, I thought. It would have been helpful, though, I think, to separate out those with and without experience of fundraising. Some of the time was wasted as far as I was concerned: one day would have achieved the outcomes for me.

ORGANISATION B

The manager considered it very important that she and the project worker attended the workshop together, working closely with each other.

I understood what she didn't: some of the lingo on evaluation, for example, was quite strange to her. The workshop was really helpful in making clear the Fund's expectations. As far as I was concerned, the next move was to work out what we needed to do to fit the Fund's requirements. The most exciting thing for me was the acknowledgement that the project was not going to be perfect on September 1. But making an application that reflects uncertainty is quite a complex process.

This organisation thought that the requirements from the Fund were very different from those of other potential funders, and were very arduous.

We understand the reasoning behind the approach and the demands associated with it, but wonder how realistic the Fund is in assessing the pressures on social services delivering direct care. Because the forms require intensive involvement from someone dealing with a service directly.

However, the manager was clear that the sessions had been very useful for her and her junior colleague, providing, among other things, insights into complexity.

After the workshop

ORGANISATION A

One participant prepared a draft evaluation plan a few days after the workshop. This initial work gave rise to intense discussion on the core nature and shape of the project.

I'm not sure that I've picked up everything I should have done from the workshop. I think we may need to refine the research question, make it more specific.

The draft research question was: 'Does advocacy make our clients' journey through services smoother?' The applicants agreed that, in that formulation, the terms 'clients' and 'journey' would both benefit from further definition and explanation, such as: 'Who exactly are the clients, and what would their journey look like? What would be the starting point?'

It emerged from the discussion that a crucial element in developing a clear picture of the client journey was to clarify the nature of links with the main partner organisation. This led to an agreement to set up an urgent meeting with the key contact from this organisation.

Perhaps we should involve our partner in forming the research question? After all, the Partners for Health programme is partly about changing perceptions of advocacy work, and [the partner organisation] can be very dismissive of advocates.

Informal discussion between applicants and the evaluator revealed a real interest in making changes to how project evaluation was approached both at an individual level and in the organisation as a whole. The applicants thought that changes had potentially positive and negative aspects, as this range of viewpoints shows.

Since the workshop, there's been a fundamental shift for me, to ask at the beginning: what's all this about? I have less of a framework in my mind in a way. The process is

more open, and so it takes longer. It's much more about making the work fit what we want out of it. What are we actually looking for? It's the prompting to explore this question that's the really useful point for me: the thing that stands out as different. I contrast this with an application we're doing at the moment for another potential funder. The outcomes are OK, but you wouldn't learn anything from them.

So that aspect is definitely positive. The flipside, though, is that this process of research and inquiry and discussion takes loads of time. I can't see how I could do it with every project. Also, other funders I can think of may not be interested in the kind of outcomes that are involved in this approach.

Back to the positives. As an organisation, we have a policy team and a research officer who will have a role in helping programmes evaluate themselves. Traditionally, this has been difficult in what has been a large but quite fragmented organisation. I think that a lot of the stuff emerging from this King's Fund process needs to be presented to the policy team for further development for use within the organisation.

The evaluator observed the subsequent meeting between staff from the applicant organisation and its main potential partner organisation. Members from the applicant organisation made an eloquent case for the strength of the principles underpinning the Partners for Health programme, and the key contact responded positively to the points they made. The nature and scope of advocacy in the project was one of the main areas for debate and constructive discussion.

This programme is about learning about advocacy through the work that's funded: building up evidence on the subject through the projects. Hence the importance of research questions, measuring outcomes, and so on. The approach we want to be taking with the King's Fund project is, from Day 1, to gain data that can show whether work is having the right kind of results. Perhaps we should re-focus the research to see where the service isn't seamless: where people fall through the net?

(Organisation A)

It's certainly true that working in a concrete way is very good when clients are psychotic or have a personality disorder. But I do still have an issue with the term 'advocacy'. Is the advocate an ombudsman or what?

(Partner)

In this context, more of a support worker/facilitator, I think. The advocacy worker would be available to carry out tasks allocated by the care co-ordinator.

(Organisation A)

The evaluator compared pre- and post-workshop application forms and other documents relating to the organisation. There were significant differences between the two forms. In particular:

- aims and outcomes had been sharpened up and made more specific
- the target client group had been delineated more clearly following discussion with the partner organisation
- a specific commitment had been made to developing joint-working protocols with partners.

ORGANISATION B

The manager and project worker used the drafting and redrafting needed to complete the application form as a constructive learning process. Their stated aim was to ‘get the form in the right language’. However, they were clearly doing more than this, with the manager helping the project worker to clarify her arguments and root them more securely and specifically in the situation of potential clients.

The manager commented that the activities during the workshop required her to think rather more carefully than usual about how she and colleagues would work with their target client groups. The organisation she worked for was about to produce a major piece of research on the target group that was the focus of the application. She felt rather unsure about how the research/evaluation slant of the Partners for Health application process fitted with this.

People can study for 100 years to become researchers or evaluators. I’m not altogether sure that I fully grasp the King’s Fund brief on evaluation.

The project worker was appreciative of ‘all the help we got in the workshop and afterwards’.

Evaluation was pretty new to me, and encountering it in this way was a positive experience for me because it gave us good insights into how we can improve our services. Seeing how it all works – or doesn’t work or might work – through someone else’s eyes was really helpful to me. Especially when the perspective was that of service users. It brought it home to me that the service users have to do this really hard thing of going through transitions. We just provide the service, which is complicated enough, but not half as complicated as facing or doing the transition thing. There’s absolutely nothing simple about how users see the service, get access or it or use it. You have to break down all these processes. That’s what I learnt, and it was really useful.

Comparison of the proposal with the final application form revealed relatively little substantive change. The main development was a clearer hypothesis about the work in terms of outcomes for the targeted group.

After the funding decision was made

ORGANISATION A

The applicants felt very let down – and quite angry – about the way in which they were informed about the result of their application: receiving a short letter that they were not shortlisted.

Felt like a rejection from the lottery fund or other funder of that size. So many to be accepted, so many to be rejected.

Like being dropped off a cliff after being hand-held along the mountain path.

There was some confusion about the grounds on which the application had been rejected. Conversation between the applicants and an adviser shed some light on these reasons, but the applicants remained puzzled by what they saw as a confused and confusing response.

ORGANISATION B

The manager appreciated the way in which she was told that their project had not been shortlisted, and commented that: 'I jumped at the chance to get feedback'. She thought that the feedback was thoughtful and fair, although she still believed that there was a future for the project.

Interestingly, the manager identified readily with both small and large organisations, in different contexts. Presumably, this was the result of managing a small unit in a corporate whole. Her reflections at this stage focused on how the Partners for Health application process was likely to affect small organisations.

I think that the King's Fund's requirements are incredibly high. How effective are they really going to be in attracting organisations outside the mainstream? I made this point and it was noted down, but the King's Fund has its own agenda, of course. The approach it takes necessarily limits the type of organisations participating in the programme. Successful applicants are likely to be large and/or mainstream service organisations.

Despite not being one of the 'finalists', she was broadly positive about her organisation's involvement in the application process.

The process as a whole produced an awful lot of positives for me. Personally speaking, it's been terribly useful: the main thing is to do with space for evaluating what you're doing and how you're doing it... Then, as a manager, I've found the process – external input – useful as a learning tool in staff development. A further aspect is a renewed interest in research.

Reflections from the funder: what did the King's Fund learn?

Previous sections of this evaluation have given some idea of the many different ways in which the funding team responded to learning more about the experiences and perceptions of applicants to the Partners for Health programme. There were changes by the funding team in thinking, design, attitude, relationships, procedures and action.

A short reflection from a King's Fund funding team perspective follows on some of the key challenges that the evaluation raised during the first two years of the programme, and which were outlined on page 2.

Who was the programme for?

The programme was designed for medium-sized to large organisations from the voluntary sector. We also funded the statutory sector but only did so occasionally because of the condition that statutory sector organisations match fund our grant. At the outset, we set a criterion that voluntary sector organisations should have an income of at least £150,000 as we believed that the evaluation work would be time-consuming for staff, and so the organisations would need some capacity and stability to deal with our demands. This evaluation and our subsequent experience have shown this belief to be well-founded.

The downside of this decision was that it excluded small community organisations, which carry out much valuable work. However, with our small budget and a need to direct our resources thoughtfully, it seemed more transparent to set this condition, rather than suggest that the programme was suitable for everyone. The other effect has been to reduce our assessment time, so that we can target more of our efforts toward supporting organisations as they manage their evaluations.

A review of the three rounds that were completed showed that we tended to favour organisations with incomes between £250k and £500k, and were more likely to put them forward for the evaluation workshops. The incomes of funded organisations ranged from £300k to £12 million, with the two largest being hospices.

Although the programme did not target BME-led organisations specifically, we monitored the number of self-identified BME-led organisations that put in a proposal. We defined 'BME led' as an organisation with a trustee committee where more than 50 per cent of its members are from a minority ethnic community. The lowest level of application was 26 per cent, but the most recent round saw 48 per cent of the proposals come from this type of group. Of the 10 organisations we have funded, two are BME led. It is worth noting that the make-up of the committee was not necessarily reflected in the diversity of the workforce, which may be a key factor in the delivery of the service, particularly in the sexual health strand, which is directed toward BME communities.

The workshop was an intervention that had been designed to level the playing field, so that we would not just fund organisations with an existing research capacity. In our first round, we tended to fund organisations that did have academic connections, but as time went on, we became braver. The workshop has changed to become more accessible, so that it starts from project management practice: a place where the applicants should be more comfortable.

How easy was it to communicate our central purpose: learning from service delivery?

The focus on learning from service delivery was difficult to communicate. The application forms suggested to applicants a typical grants programme. The way in which people responded to questions in the proposal and application forms indicated that they tended to equate ‘learning’ and ‘evaluation’ with monitoring the project rather than improving their knowledge and capabilities. Moving beyond the usual monitoring approaches offered to other funders was a challenge for some organisations, and they underestimated the time it takes to devise and set up evaluations.

Applicants were surprised when we turned them down because we considered it unlikely that the service offered could be delivered and evaluated adequately at the same time. We tended to reject organisations that had large beneficiary numbers, for example. We encouraged organisations to think about projects on a smaller scale so that they could give themselves time to reflect on their practice and set up relevant data-collection processes to provide some evidence for their conclusions.

Organisations have a good understanding of what funders normally want, and are used to application and management processes. We underestimated the strength of that understanding and associated assumptions, and need to acknowledge that there has been an unwillingness to trust the different messages that we were giving about our interest in learning.

Likewise, we have had to change our ideas about our role and how we present ourselves. One early grant-management experience illustrates this. Our grant manager reviewed the evaluation plan in an application form about six months into the project. She was anxious that the organisation did not seem to be making much progress with this part of the work. When she looked at the application form again, she realised that the plan would not provide the evidence required to answer the research questions that had been identified. It needed to be revised. The organisation was surprised at our request for revision as they thought that the application form was final and unchanging. This example and others have led us to stress the provisional nature of the application and the need to engage in an iterative process with us after funding is agreed to further refine questions and methods of evaluation.

Underlying this process of iteration is a drive toward simplification and clarification. Many funders encourage the idea of ‘innovation’, which, for some agencies, can mean a demand for an increase in complexity and the development of interventions that are multi-component. Some agencies argue that complexity is built into the problems that their clients face. It has therefore been difficult to persuade some applicants that evaluation can only be devised after simplification and clarification.

Did the focus on evaluation and learning in the application process deliver the intended benefits?

It is too early to say if the quality of the reporting on the projects has improved or delivered the intended insights. At this early stage, we can say that the process has led to a questioning of practice, which makes it seem more likely that the final reports from the work will be more informative and reflective.

As the projects funded in Rounds 1 and 2 started work on their projects, it became apparent that the evaluation plans expressed in the application forms did not carry enough detail to guide staff into implementing the evaluation part of their work. Therefore, in Round 3, we asked funded organisations to develop a learning plan alongside a project plan. We also provided our first grant holders with support to refine and clarify their evaluation strategies, so that they can implement this work strand throughout the project, rather than at the end.

This guidance often included meetings with different stakeholders in the project, such as chief executives, consultants employed to undertake the evaluation for the organisation, steering group members, and field workers employed subsequently to carry out the work. Most of these people have not attended the evaluation workshop. However, the work of conceptually clarifying the project to identify the evaluation questions and how they might be answered was something that everyone involved engaged in, and they did not necessarily need the theoretical background of the workshop to do so.

What kind of partnership emerged from the assessment process?

Many of the essentials of the relationship between funder and grant holder remained the same. The exchange of money for information continues to be fundamental to the relationship. The greatest change was the type of information requested because the reason for asking for it shifted from one of seeking reassurance about performance, to one of trying to understand the dynamics of the intervention. However, this shift did not mean that grant holders put aside ideas about performance, and there was continuing anxiety from the organisations about how the Fund might use the information. Grant holders and applicants remain reluctant to talk about failure, and much of the work of our team related to reassuring project teams that any feedback is valuable and does not reflect on the quality of their practice or their effectiveness as an organisation.

During the application period, staff were much more personally involved and had much more contact with applicants than previously. The peer-review process at shortlisting, and the involvement of the senior advisers, ensured that we used funding criteria and that we could defend our decisions. However, the emotional work of turning people down, which is what happened to the majority of applicants, became more challenging. Applicants seemed to take the disappointment of rejection more personally, and there were more opportunities to express their frustration and hurt to us directly. Our relationship with applicants during this period proved more difficult than we anticipated. However, this was balanced by opportunities to discuss and give feedback on applications that many found helpful.

While the application was being assessed for funding, the relationship between the Fund and organisation cannot be said to have been a 'partnership', in the sense that there was

parity and collaborative effort. However, partnership should have emerged more clearly after the funding was awarded. In part, it did and – certainly in the smaller meetings with individual groups – there was a sense of shared endeavour to understand the impact of the work. Nonetheless, the formal structure of the relationship probably means that we will always be seen as a ‘funder’ rather than a ‘development agency’.

Despite the kind of constraints described here, the evaluation work with the groups shed light for us and them on their practices, their underlying assumptions and the lives of their clients. Within a narrower definition of a partnership dedicated to learning about practice, there was some evidence for success. Each side has committed resources – not just financial – and both bring complementary skills, insights and interests to the partnership. We must wait to see if the products of our joint work fulfilled expectations and ambitions.

Conclusion

The central questions of this evaluation were:

- Did the workshop inform the applications and change the way they were developed?
- Did the workshop have a broader effect on the organisations?

The short answer to both of these questions is yes. The case-study accounts demonstrate that the workshop had a considerable effect on the way the applications were developed. The application process led to comparisons with other funders and a questioning of how projects are developed generally in response to grant programmes. However, with other grant programmes, the organisations were working as part of a relationship that they understood, and the terms of engagement were deeply ingrained in their practice, so switching from a fundraising focus to a learning one was challenging; inevitably, some were more successful than others. The King's Fund has also underestimated the extent and demands of this transition and has had to reinforce key messages in order to ensure greater consistency about the learning focus at all stages of the process.

It is beyond the scope of this evaluation to say whether the broader effects on the organisations are long-lasting. Workshops appeared to trigger greater internal discussions and more consultation with partners, and applicants were also able to see how the lessons of the workshop could be applied to other projects in their organisation. A key factor as to whether organisations can establish a more questioning and learning approach to project development is resources. The most obvious resource is time, and all of the organisations devoted more time to this process than they would to other applications. Related to this is the value that organisations place on learning: do managers and the wider organisation support practitioners to reflect on their work? Do the practitioners allow themselves the time to think about what they do?

Continuing challenges

The concerns that applicants raised about the assessment process also apply to grant management: organisations that were successful in their bid face the challenge of balancing clarity and complexity, managing the varied stakeholders in the funded projects, and finding the time to reflect on and deliver the service (for some early feedback on how one successful organisation is finding its continuing relationship with the Fund, see Appendix 2).

The Fund is continuing to review the evaluation workshop to ensure its relevance and accessibility, and to make sure that all applicants have an equal chance of success. The engaged relationship with grant holders as well as applicants has enabled the King's Fund to become more of a learning organisation itself and has provided opportunities for practitioners to educate the Fund about their work. This learning informs the workshop as well as the programme as a whole. The next stage in the journey is to see how the accounts that the funded organisations produce of their projects may inform wider practice.

References

Ellis S, Grey A (2004). *Prevention of Sexually Transmitted Infections (STIs): A review of reviews into the effectiveness of non-clinical interventions*. Evidence briefing summary. London: Health Development Agency.

Pawson R, Tilley N (1997). *Realistic Evaluation*. London: Sage

Roth GL, Senge PM (1997). 'Learning histories: a new tool for turning organizational experience into action'. MIT Center for Coordination Science website. Available at: <http://ccs.mit.edu/lh/21cwp002.html> (accessed on 26 June 2007).

Appendix 1: Evaluation workshops in Rounds 1 and 2 – applicants’ experiences

Round 1

The workshop for Round 1 produced a positive response on the whole, with most applicants agreeing that:

- they had moved on in their thinking
- the workshop was relevant
- they were more confident in writing an evaluation plan
- the facilitators were very approachable.

Applicants valued having time with the funding team. Several people’s comments suggested that their ideas had been confirmed and strengthened over the two days. No-one was put off continuing the application process. Applicants also appreciated the continuing availability of the team to respond to questions.

However, some key reservations surfaced.

- A quarter of applicants were not comfortable sharing information with other groups.
- A quarter found the material difficult to understand.
- A third felt that the workshop had not changed their ideas about their project.

Comments offered suggested a desire for more specific, relevant examples to support the concepts introduced, which might combat the fact that some applicants felt moments of clarity and then confusion. Some had concerns that smaller organisations would struggle to comply with the process.

Round 2

Comments received after the workshop for Round 2 indicated that people felt they got a great deal of useful information and help in breaking down the components of the project: ‘I found the workshop extremely useful in enabling me to break down the project and examine whether or not it is the best we can do.’

Applicants needed to make sense of new concepts, such as context, mechanism, outcome and user pathway. These ‘seemed hard to grasp at first, but I think got better over two days’. Applicants commented that these concepts were challenging but well presented. ‘It hasn’t changed my overall ideas about the project but has changed my ideas on how we will deliver certain aspects, decide who participates, etc’. For others, ‘it helped to talk the project through. You helped unravel the meaning of the model and to simplify the project to a manageable level’.

As in Round 1, people greatly appreciated the involvement of the funding team and went away feeling reassured that they could, and probably would, contact the team by phone before the deadline (in fact, few people did this).

Reservations remained similar to those in Round 1: see the comparison section below.

Comparing Round 1 and Round 2 workshops

We have drawn on material from the reaction questionnaire which was filled in by participants at the end of the workshop to develop the following tables, which compare responses to key questions.

TABLE 2: PARTICIPANTS' ATTITUDES PRIOR TO THE WORKSHOP

Before you arrived, were you:	Yes		No	
	Round 1	Round 2	Round 1	Round 2
confident that you would complete the application form?	28 85%	10 62%	5 15%	6 38%
sure that you understood what the workshop was about?	21 62%	12 75%	13 38%	4 25%
happy to give up two days to come to the workshop?	20 62%	14 87%	12 38%	2 13%
sure that you would learn something new?	28 82%	14 87%	6 18%	3 13%
comfortable with evaluation techniques?	16 47%	8 47%	18 53%	9 53%

Table 2 shows that the Round 2 groups were clearer about what they were coming to but less confident that they would go on to apply. This suggests that the funding team provided better and more realistic pre-information. Interestingly, both groups showed exactly the same split regarding their prior knowledge of evaluation (on their self-rating). Points were made in the Round 1 evaluation about the implications of a range of prior knowledge on the style and process of the workshop, which must therefore take account of this divergent audience.

Table 3 (below) shows that considerably more applicants in Round 2 than Round 1 thought that the material was relevant, that there was time to talk to the funding team, and that they were given enough information to follow up after the workshop. People's confidence in carrying out an evaluation plan as a result of the workshop was fairly similar for both groups, but the applicants from Round 2 expressed a narrower range of views. Interestingly, the process seems to have improved for applicants, but did this affect the content of their application?

The table shows that there were similar views in both groups about sharing project information with others, but views were not quite as wide-ranging in Round 2. The level of difficulty in understanding the information was very similar, despite the overall more positive feel of the Round 2 workshop.

Finally, 80 per cent of applicants in Round 2 felt that the workshop did change their project ideas, compared with 65 per cent in Round 1. This may reflect more practically-based ways of introducing the concepts in Round 2 and may be a positive shift. However, at least one of the applicant organisations changed its ideas a great deal, but this did not help it to refine and focus its project.

TABLE 2: PARTICIPANTS' EXPERIENCE OF THE WORKSHOP

How did you find the workshop itself?	Strongly agree		Agree		Disagree		Strongly disagree	
	Round 1	Round 2	Round 1	Round 2	Round 1	Round 2	Round 1	Round 2
The material was relevant	16 48%	13 76%	15 45%	4 24%	2 7%			
I was given enough time to discuss my application with King's Fund staff	5 18%	10 62%	17 61%	6 38%	6 21%			
My project has really moved on over the last two days	10 30%	4 25%	19 60%	12 70%	4 10%	1 5%		
I am more confident about writing an evaluation plan	9 26%	4 25%	22 65%	12 75%	3 9%			
I was given enough information to follow up after the workshop	9 31%	9 64%	19 65%	5 36%	1 4%			
The facilitators were approachable	20 59%	11 78%	13 38%	3 22%	1 3%			
I felt uncomfortable about sharing my plans with groups I am in competition with			8 26%	4 28%	11 34%	6 42%	13 40%	4 28%
I found the material difficult to understand	2 6%		8 25%	4 28%	14 44%	8 57%	8 25%	2 15%
The workshop has not changed my ideas about our project	1 4%	1 8%	10 31%	2 13%	17 53%	7 46%	4 12%	5 33%

Appendix 2: Carrying the learning forward: what really matters?

It seems fitting to offer the last word to a voluntary-sector organisation that has taken – and continues to take – an active part in the Partners for Health programme. Voluntary Action Camden (VAC) takes the leading/co-ordinating role in a pioneering Camden-wide community and statutory sector partnership. This partnership aims to develop a sexual health programme that will involve young people from Bangladeshi and Somali communities, their parents and community, and health professionals.

The initial application from this project reached the shortlisting stage, but was turned down at the final stage of selection (see more on this below). A revised application was successful, and the project officially started in April 2007.

Simone Hensby, Director of VAC, and Sandra van der Feen, Women's Health Development Worker at VAC, spoke to Marsaili Cameron, one of the independent evaluators of the Partners for Health programme, about their experiences and reflections during the very demanding months leading up to the award of their grant.

REFLECTIONS FROM VOLUNTARY ACTION CAMDEN

Our experience of working with the Fund's approach to evaluation

A waste of time?

It seemed a bit of a waste of time at first. Day-to-day stuff was so pressing that spending so much time on developing a case for a relatively small amount of money seemed quite difficult to justify.

Over time, though, we have begun to appreciate some of the benefits of a focus on learning (not just on outcomes) through reflective practice. What has certainly been additional hassle is more than balanced by additional benefits. Principal among these are the ability to focus down, to think more clearly. Questions present themselves and insist on answers in a way that they would not have done before. For example:

- what are we aiming to do, exactly? Why? How?
- how are we planning to measure our success?
- why choose this measure?
- what are we going to know at the end of this project that we did not know before we started?
- why is it important to have this knowledge?

Asking basic questions may seem a waste of time at first but asking the right questions can actually save a huge amount of wasted time and effort. We have transferred our learning about this to other projects, asking more questions ourselves and encouraging others to do so too: in particular: What will we learn from this and how?

It's so easy to lose learning

It's easy for organisations (and individuals) to lose important learning. There need to be systems to capture this learning and make it accessible to others. In our case, our project management is going to be clearly linked with learning: our action plan will be accompanied by a learning plan.

Reflective practice has the potential to 'legitimise' what workers are already doing on a project; this is still unusual for non-clinical work, and very welcome.

Simplification is good, but politics also matter

We were knocked back in our first application: the King's Fund thought that it was too ambitious and complicated. We learnt from this that it's all right to do things that are smaller, more targeted: you don't have to cover the waterfront.

That said, there's a danger that too narrowly focused use of the model could lead to people making choices – for example, about the composition of sample groups – that might make sense in academic or research terms but which ignore the realities of local politics and so could lead to conflict and bad feeling.

More support, please!

It wasn't at all easy to explain the 'realistic evaluation' (Pawson and Tilley) model to our partners, particularly in the very tight timescale associated with getting the application form completed. Might more support or materials be made available for this?

It was good to have the involvement of external evaluators at the workshop and afterwards. Perhaps more could be done to make sure that there are similar opportunities throughout the process for organisations and their partners to feed in comments on the Partners for Health programme?

What would it be useful to share with other funders, and commissioners?

This approach contributes to sustainability...

Many funders are still completely attached to a unit-costing mentality (in terms of which, of course, the projects funded through Partners for Health would count as hugely expensive). The focus for these funders is on quick wins, quick deliverables. Getting clarity on what you're doing is not rated particularly, so fewer questions are asked about projects during their development. Lack of critical or analytical thinking tends to result in projects being less sustainable.

The Pawson and Tilley approach to evaluation offers a means for funders and commissioners to move toward greater sustainability. This is an increasingly important part of many policy agendas, especially when the community and voluntary sector is involved. Some funders – especially the larger ones – are moving in this direction already. As well as looking for outcomes, they're looking for evidence of learning through reflective practice. Smaller funders on the whole are less interested in moving in this direction: they want the application process, as they see it, 'kept simple'.

...and innovative work

Funding in the community and voluntary sector is moving from the awarding of grants to tenders put out by commissioners. There is scope for commissioners to draw on the Pawson and Tilley model to track outputs to outcomes in quite challenging and constructive ways. If commissioners don't seize opportunities like this, but instead stick to the unit-costing approach, there's a danger that innovative work will no longer be possible.