

VCS Health and Wellbeing

Factsheet 4: Measuring what you do

After reading this you should be ready to measure the difference your work makes.

Why should you measure the difference you make?

Any voluntary or community group needs to know that it is making a difference to those it works with and to prove to others it is worth supporting with cash, goods and time. Here are some reasons for measuring

- Makes it easier to 'sell' your organisation to increase support from individuals and organisations (e.g. gain more volunteers and funding)
- Helps you explain what your organisation is trying to achieve (both within and externally)
- Helps give your organisation a clear goal and focus
- Gives a more complete picture of what your organisation is achieving, perhaps more than what you are funded to do i.e. your social value
- Helps you to set achievable goals
- Gives you a measure to tell if you are achieving your aims
- Helps you improve the work you do by concentrating creating more impact
- Your funders/supporters want it

Measurement for measurement sake is a waste of time and energy (your own and those who you measured!). So be clear why you are measuring (which of the reasons above are relevant to you?) and what you will do with the information (see factsheet 6).

It's not just bums on seats

Measuring the difference you make is not just about how many people have used your service. This is a measure of your **outputs**. Recording basic information about your users such as their age and gender and how they heard about your service, as well as numbers who attended

sessions is a good starting point. The next step is to understand what difference or changes your work has had on those who used your service, i.e. the **outcomes**. Your supporters and other stakeholders will also be very interested in this.

However measuring change and difference made is much harder than counting 'heads'. Using Factsheets 1, 2, 3a, 3b and 3c will help you identify what and how your activities improve health and wellbeing. It should also help you identify what changes in behaviours and feelings should result from your work. So it could be an increase in physical activity, reduction in smoking, increase in confidence, or satisfaction with life, or an improvement in some, or all, of the Five Ways (see Factsheet 3a).

Once you are clear about the changes you expect to see you can think about how you might measure them. It might be through questionnaires, interviews, observations, individuals keeping records, etc. You can design your own surveys, questionnaires etc. or use existing ones. The advantage of using existing ones is that they will have been tested and may be recognised by other. More information on measuring tools can be found in factsheets 5a and b.

Sometimes you won't be able to easily measure your final planned outcome e.g. reduction in heart attacks or in long term employment. However if you have explained how your activities will bring about, or contribute, to that outcome using the planning tools you can identify intermediate measures that show a user is on the pathway to your final outcome.



How to measure the differences

What you measure and how depends on:

- What difference you want to make
- Your users (what methods will be acceptable or preferred by them?)
- Your capacity, and level of skills, to measure and use it (don't underestimate the amount of time, energy and also money, it will take to measure but also to effectively analyse and use what you have collected)
- Who needs to know and do they have preferred measures (in particular funders).
- How you will present the findings

Unplanned outcomes

Activities will always result in unplanned outcomes. So always look at your work and try to identify **all** the changes that have happened, not just the planned ones. This may help you to improve your work and even develop new areas. Also you might find some negative changes e.g. providing a 'free' exercise class once a week results in a paid for class (running three times a week) closing meaning less people in the area benefit. By identifying them you can either try to correct them or make sure that the positive changes outweigh the negative.

'Hard' and 'soft' data

It is relatively easy to measure your success in terms of quantity. For instance 50 people attended the exercise class or 60% of users have doubled how far they walk each week. This quantitative data is sometimes called 'hard' data because it is easy to measure and verify.

However 'soft' or qualitative data is harder to collect, analyse and verify; for instance asking people if their confidence and self esteem has increased as a result of attending your group's sessions. However much of what the voluntary and community sector does has an important impact on how users feel about themselves. So don't shirk from the challenge. You can use verified tools like WEMWBS (see Factsheet 5b) or design your own. Just make sure you are consistent in how you ask and record responses. Then do some simple analysis of the responses e.g. 73% of users report an increase in confidence and self-esteem.

Case studies

A very good way of describing the holistic work and impact you do would be to use case studies. A good principle in reporting is 'no numbers without names and no names without numbers'. Case studies may just be one or two sentence quotes from users about the difference your work has made, or longer pieces that describe a users circumstances, the work carried out with them and the difference made. Case studies could also be in photos, videos or recorded interviews.

Things to think about measuring

Sample or everyone. If you want to measure distance travelled for individuals to help with their own assessment then you will need to get everyone to do them. You can also use this data to measure the effectiveness of your work. However if you have a large number of users then a sample will do. The number will depend on your users as you will need a representative sample so the more homogenous your users are the fewer you will need. A good sample size would be about 60.

Self-completion or interview. You need to decide what is likely to give the best, and more accurate, response. It is generally thought that people are more likely to give the response you want if interviewed than self-completion. However those with literacy needs may need assistance. Some tools have been validated as self-completion tools (e.g. WEMWBS see Factsheet 5b) but some programmes have used an interview technique. If self-completed it could be done online but be aware if your users have barriers to the use of such technology. As there is not a perfect answer it is down to you to decide what will work best!

How often to measure. The simplest way would be before and after but this will not give you much detail nor longer term effect. This would be adequate if you were measuring something people attended as a one off. An improvement on the two time questionnaire would be adding a mid-point and/or one 3 or 6 months after the activity finished. For ongoing groups you may decide to take a measurement every 3 or 6 months. Let your resources and needs lead you, any measurement is better than none.

Consent and confidentiality. You will be collecting data about individuals that they may consider to be highly sensitive (and may also be categorised as such by data protection law). Therefore you will need to make sure that any such information is kept confidential. Anyone handling this information (either because they will hear it direct from a user or may be analysing it) must be bound by strict confidentiality. One way to reduce the risks of 'information leakage' is for any data to be recorded anonymously. You can keep names separate from the information but use ID numbers so you can identify before and after questionnaires. Also you will need explicit consent which means making users aware of the purpose of the exercise, how their information will be used and stored and ask them to agree to take part (you might want to think about getting a simple form signed to prove their consent).

Data protection. If you store information (either electronically or in hard copy) that links the information to an individual then

you must follow Data Protection Law by making sure you only ask what is needed, it has been given with explicit consent, it is only kept as long as necessary, it is not passed to a third party without consent, it is kept secure (i.e. locked cabinets or password protected files), and destroyed properly when finished with.

What else to ask users? It is always a good idea to ask for very basic demographic information so you can see any trends between different groups of people in society. Also think about a basic satisfaction question on the service your users have received. It could be a 5 or 10 point rating scale of how satisfied they were or you could adapt the NHS Friends and Family Test which is used by NHS services and LiveWell Dorset.

So what?

After all this measuring you then need to see what it is telling you. For advice on what to do with the data once you have it read Factsheet 6.

More Information

- Sampling, go to www.whatisasurvey.info/chapters/chapter1.htm and about how large a sample you need to make it statistically significant: www.surveysystem.com/sscalc.htm.
- NHS Friends and Family Test: www.england.nhs.uk/ourwork/pe/fft/
- A short guide (NPC and Clinks) on the main IT programmes, including a comparison table. www.clinks.org/sites/default/files/SoftwareToolsForEvidenceCollection.pdf
- The website Inspiring Impact has an online tool finder to help you find the right solution.
- Nef Measuring Wellbeing
- This Factsheet and Case Studies are available from Bournemouth CVS (01202 466120) or at www.bournemouthcvs.org.uk/healthandwellbeing.asp