



Evaluating Knowledge into Action

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Outline

- Theory based evaluation – some basic tools
- **Example 1:** A knowledge mobilisation organisation – NHS Health Scotland
- **Example 2:** A knowledge mobilisation programme – health & social care
- Discussion points

The cause-effect issue



Attribution

*Did Programme A
cause Outcomes B?*

OR

Contribution

*How strong is the
evidence that Programme
A contributed to changes
in Outcomes B?*

Theory based evaluation approaches

Program theory/theory of change

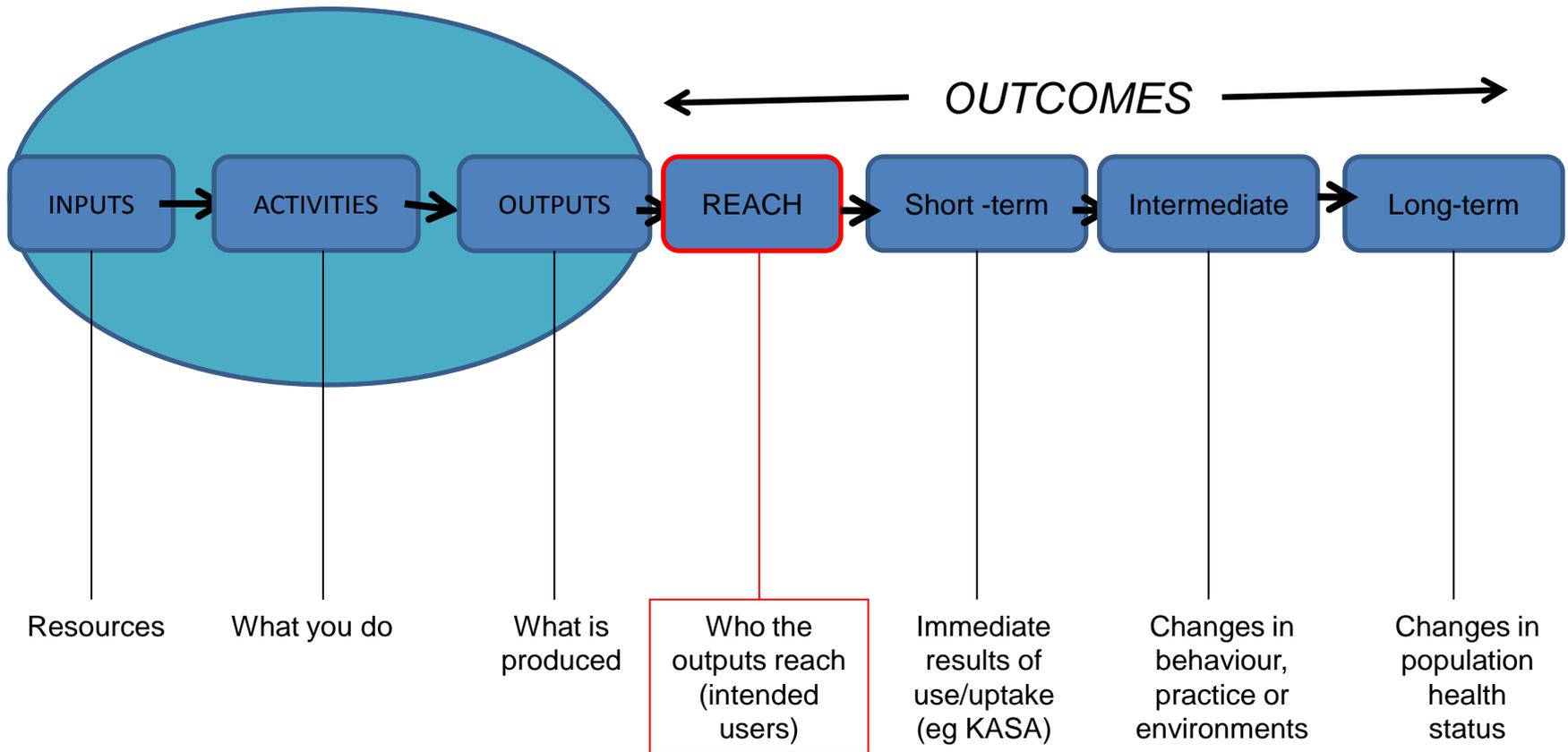
An explanation of how activities are understood to contribute to a series of outcomes and impacts. This is usually visually depicted.

Evaluation approaches based on program theory

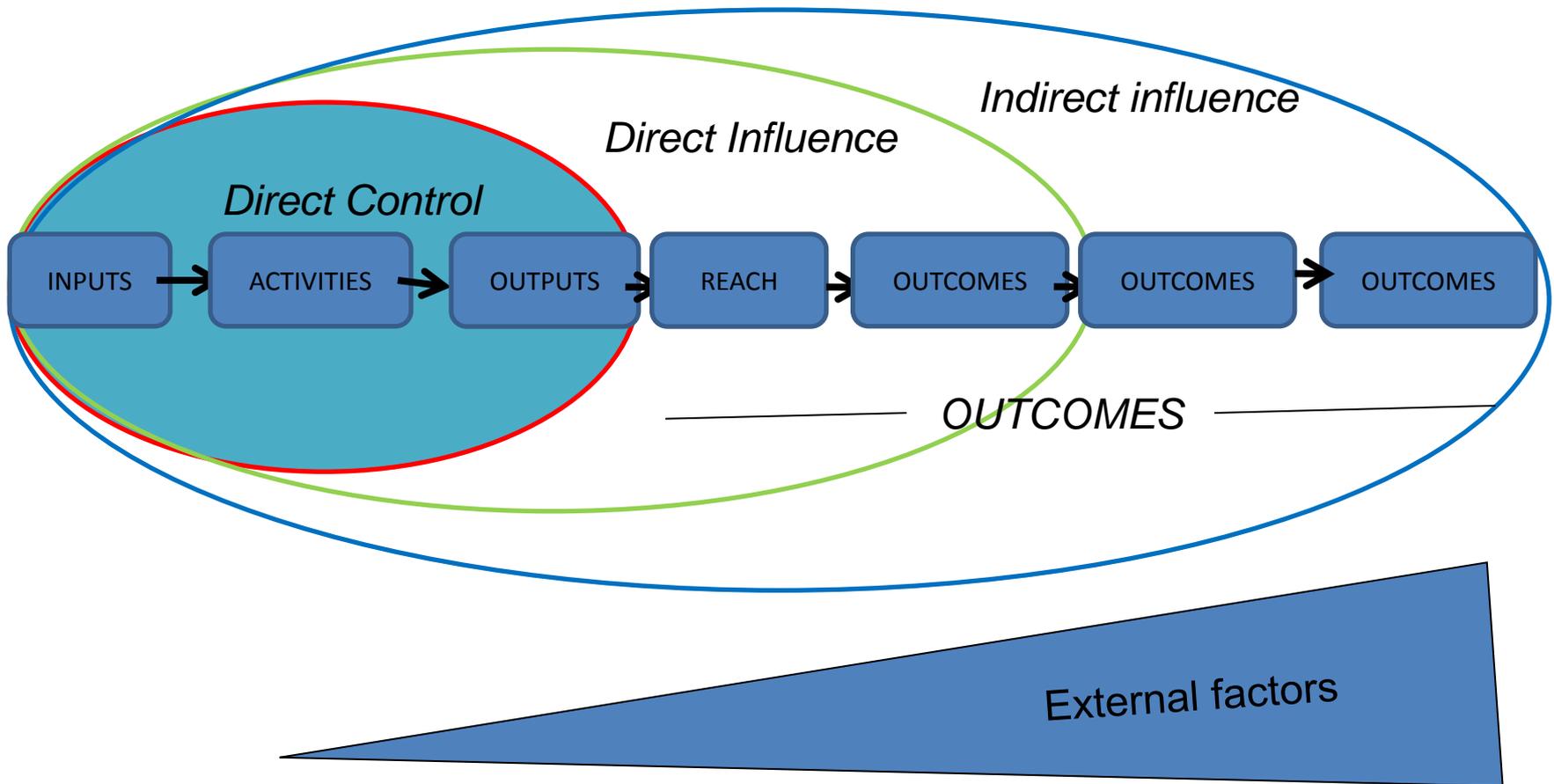
- Impact pathway evaluation
- General elimination method
- Contribution analysis
- Process tracking

A simple outcomes chain

Statements about expected changes are sequenced in a causal chain



Spheres of influence



EXAMPLE 1: NHS HEALTH SCOTLAND

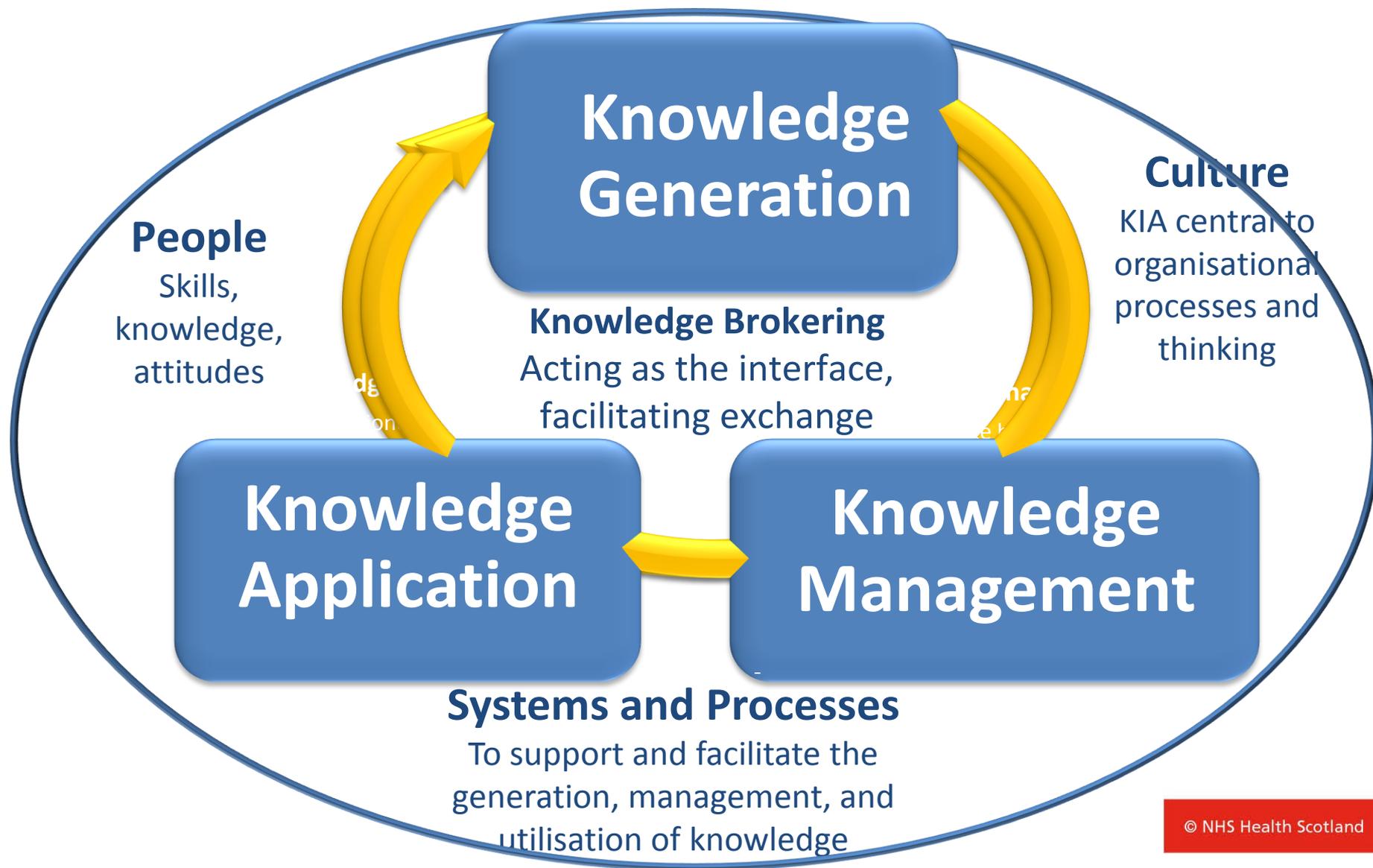
A Fairer Healthier Scotland (2012-2017)

Strategic shift to focus on tackling **health inequalities** – embedding more effective action by:

- Building the will – stronger support for action
- Providing the means – more informed policy
- Enhancing capacity to deliver in practice

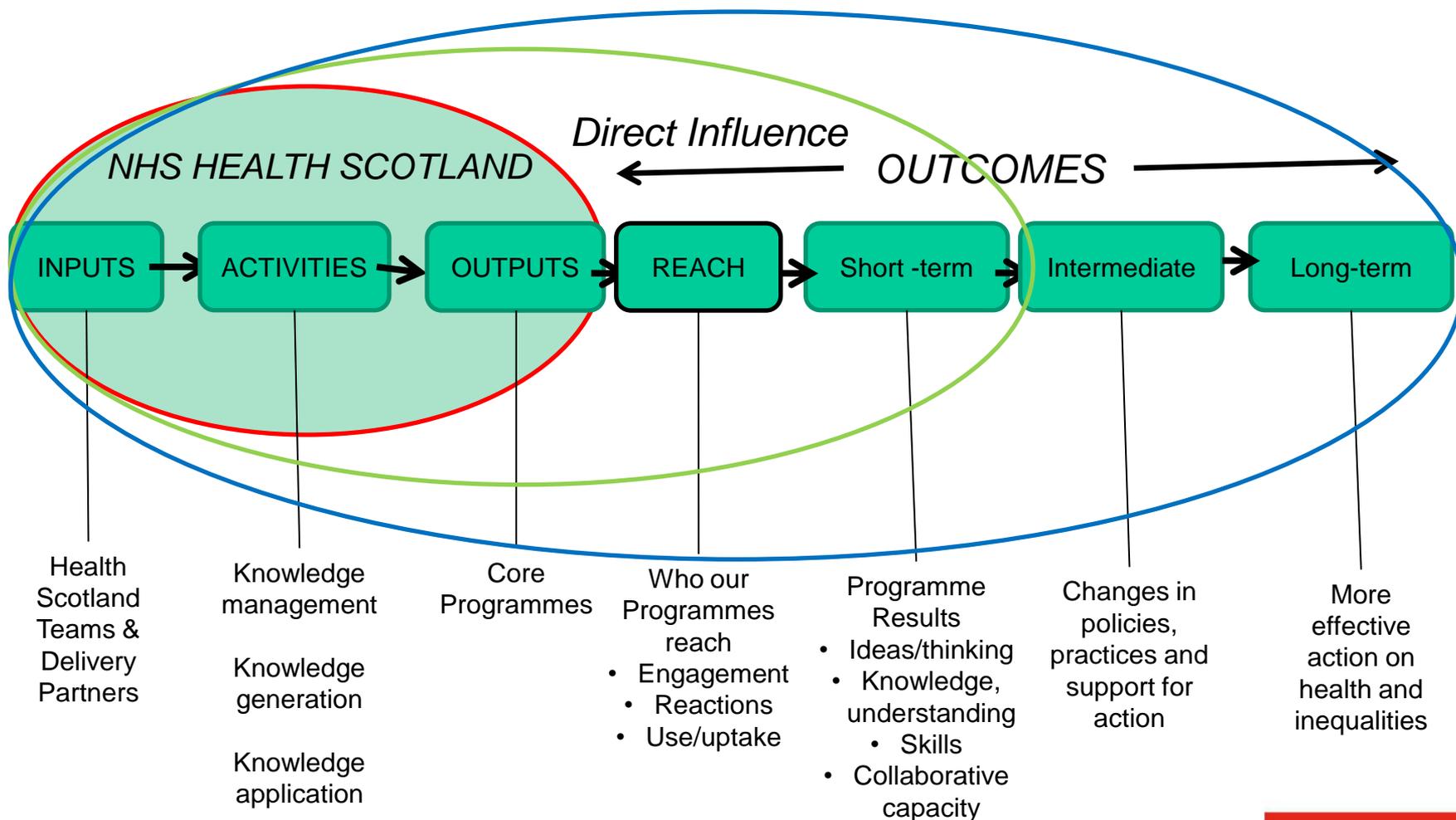
Knowledge into Action recognised as core business process for the whole organisation

Health Scotland KIA Model



A simple outcomes chain for KIA

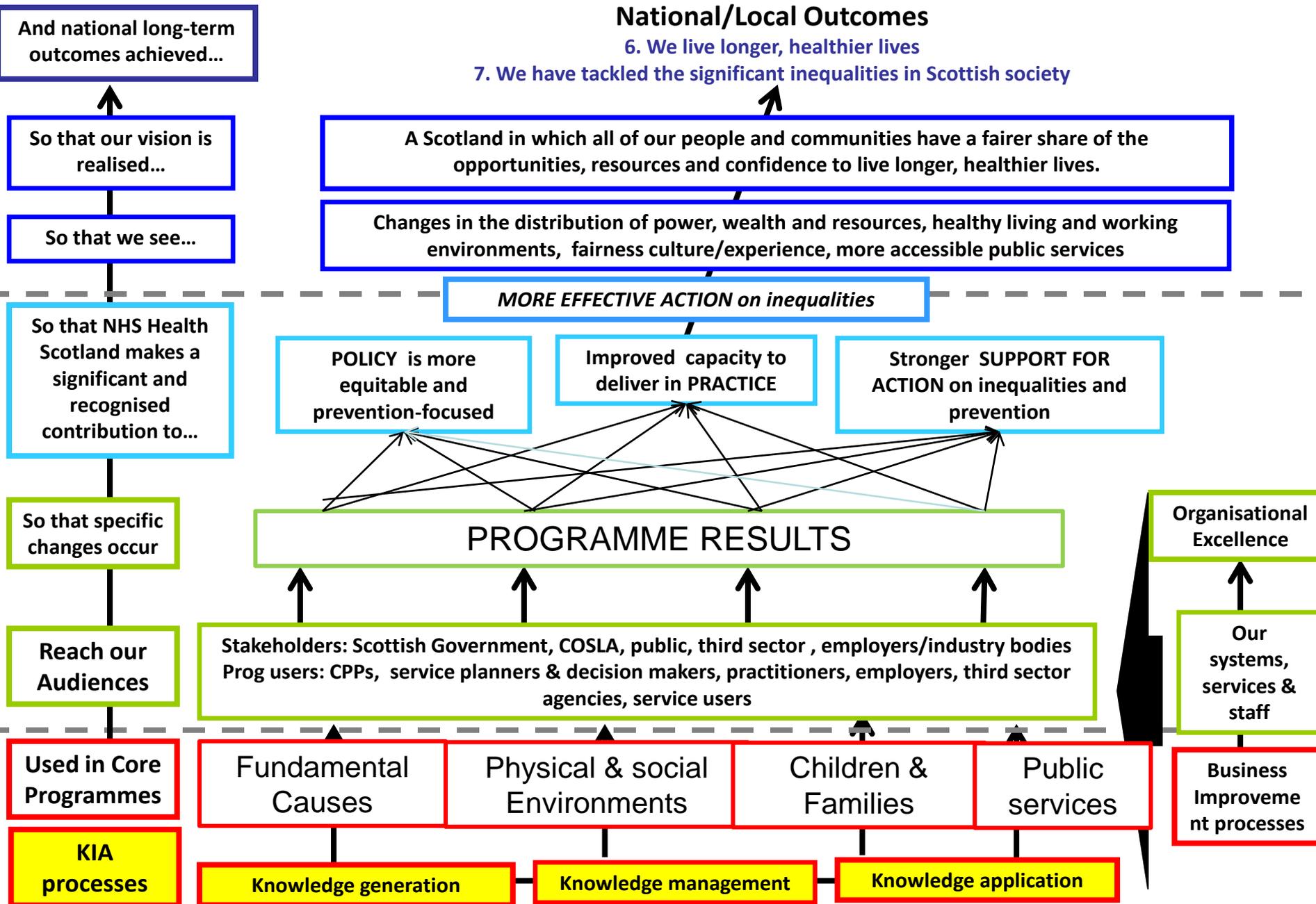
What sequence of changes might be expected from Health Scotland as a knowledge broker organisation?



National/Local Outcomes

6. We live longer, healthier lives

7. We have tackled the significant inequalities in Scottish society



Programme results – KIA impacts

- **ENGAGEMENT.** Extent and level among intended users
- **REACTIONS** to our Programme outputs
- **USE/UPTAKE** of our products and services

So that changes are seen in ...

- **THINKING.** Ways people think about/ understand an issue; new ideas/thinking
- **AWARENESS & KNOWLEDGE** about an issue and its social distribution
- **MOTIVATION.** How inspired people feel to address an issue
- **SKILLS.** What we can do about it and how
- **CAPACITY** to work/act together with partners

AFHS: Measuring performance

	Quantitative	Qualitative
Effort	<p>Q. How much did we do?</p> <p>KPI 1: Staff KPI 2: Finance/Resources KPI 3: Delivery</p>	<p>Q. How well did we do it?</p> <ul style="list-style-type: none"> Knowledge into Action Standards EFQM workshops
Effect	<p>Q. Are we making a difference?</p>	
	<p>KPI 4: Reactions, satisfaction KPI 5: Organisation's reputation & credibility KPI 6: Programme results</p>	<ul style="list-style-type: none"> Corporate outcomes – Case studies of influence, incl enablers, barriers and learning

EXAMPLE 2: NHS KNOWLEDGE INTO ACTION PROGRAMME

The NHS KIA Programme

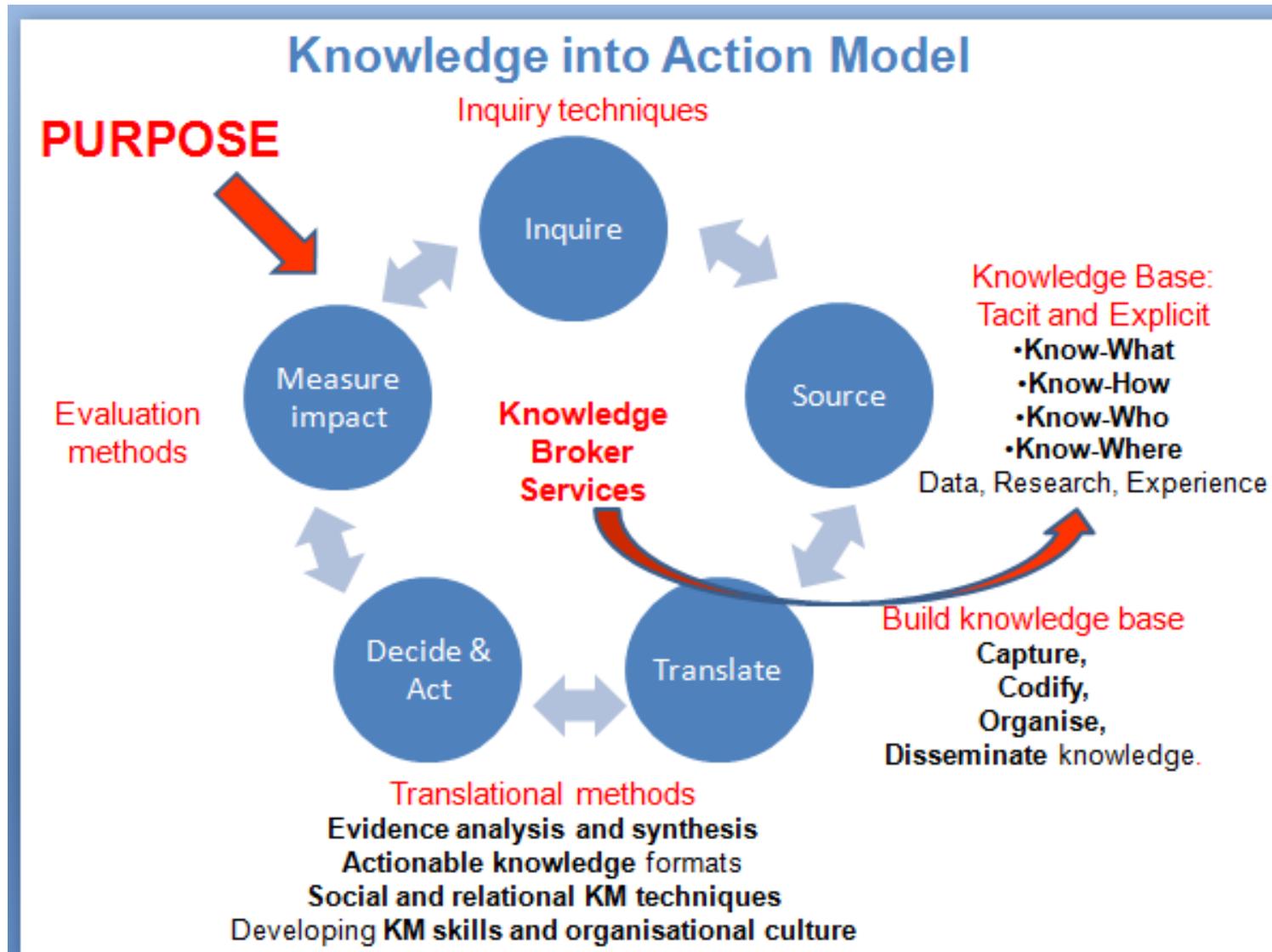
- Led by NES and HIS
- Scotland's health and social services

Three main strands:

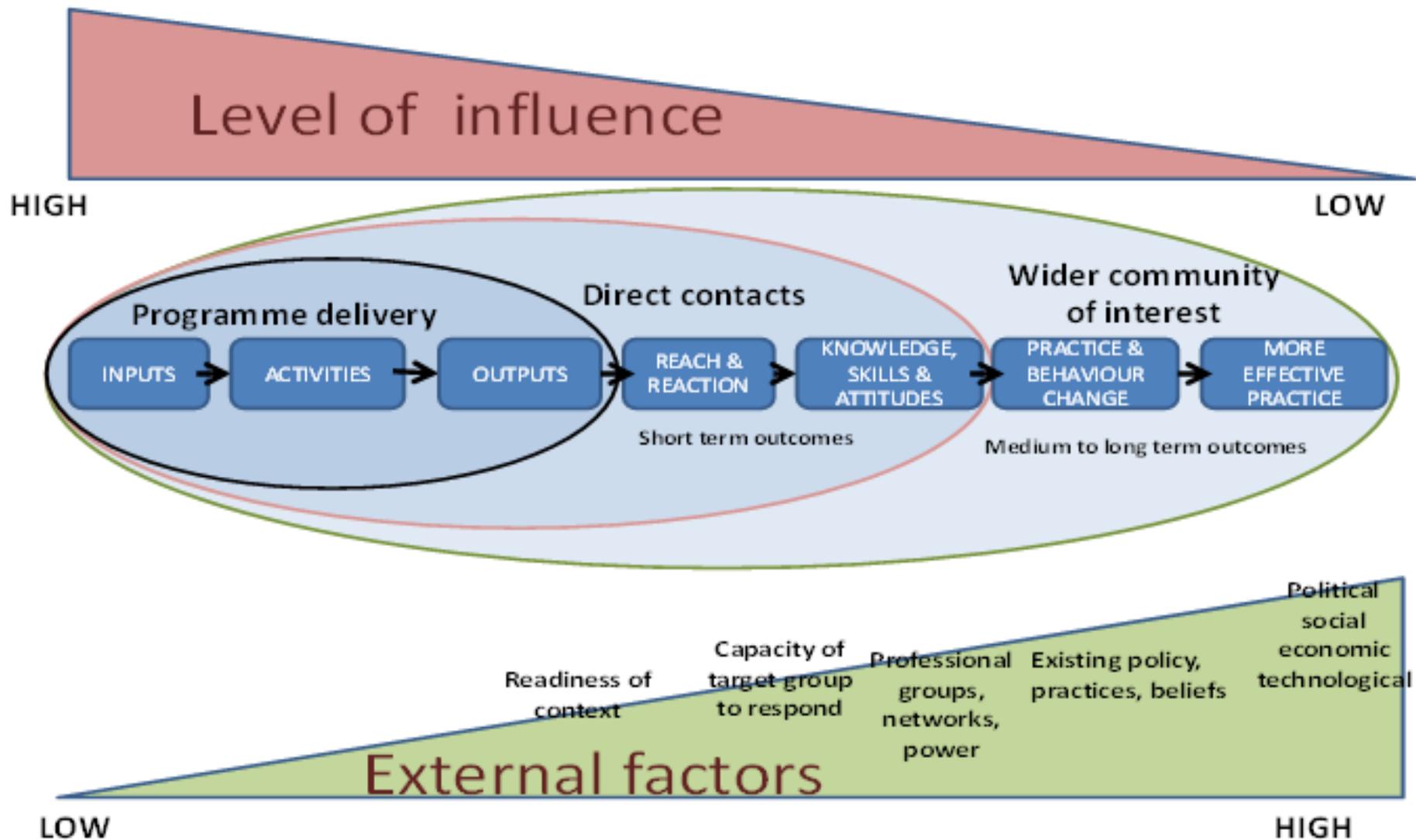
1. Multi-agency knowledge broker network
2. Multi-channel technology enabled learning platform
3. KIA support for improvement projects in national priority areas

Knowledge into Action for H & SC

Karen Ritchie (HIS), Ann Wales (NES)



Evaluating impact of Knowledge into Action



Source: NES Knowledge Advisory Board, Sept 2013

Evaluation: Issues and Challenges

- When to capture impact
 - Short and medium term impacts vs longer term
- Attribution or Contribution
 - Incorporation of knowledge with existing knowledge and beliefs
 - Considering context
 - Contribution of knowledge vs attribution

Discussion points

- Does this approach adequately capture the importance of many aspects of process (relationships, co-production, embeddedness) that we know are important for effective KIA?
- Is it sufficient to focus on the short-term outcomes that are more directly attributable to a KIA programme or organisation?