Quality Services, Better Outcomes.

A Quality Framework for Achieving Outcomes.

By Aileen Murphy, Dr. Tara Murphy and Gráinne Smith

Childhood Development Initiative (CDI)
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Section 1

Introduction
Biographies

Aileen Murphy
Aileen has over eleven years’ experience working in the community sector delivering and supporting the delivery of services for children and their families. She holds an Honours Degree in Psychology and is currently completing a Masters in Child, Family and Community Studies. During Aileen’s time in CDI, in her role as Quality Specialist, she supported the development of programme manuals, the implementation of evidence-based programmes and integration of reflective practices. Aileen recently moved to Barnardos to take up the position of Service Design and Development Facilitator.

Dr. Tara Murphy
Tara has been the Research and Evaluation Manager in CDI since 2007. She manages the implementation of seven independent evaluations as well as leading on other research initiatives. She provides technical and strategic support to CDI and works alongside the Quality Specialists to ensure the delivery of high quality services. Tara has a BA in Microbiology, a BSc (Hons) in Psychology, and a PhD from Trinity College Dublin in the area of parent education and autistic spectrum disorders. She is currently Membership Secretary of the Psychological Society of Ireland and an active member of the Children’s Research Network Ireland and Northern Ireland.

Gráinne Smith
Gráinne has a background in adult and sick children’s nursing. Prior to working with CDI, Gráinne worked overseas with the aid agency Goal, working on emergency and development health programmes, sparking her interest in supporting programmes focusing on evidence and quality. Her role within CDI as a Quality Specialist gave her the opportunity to support the design and implementation of programmes with services and agencies in Tallaght West. Over the past four years, Gráinne has gained vast experience in supporting services to implement manualised quality programmes, and to work within a quality framework.
Foreword

All of us working with and interested in children and families have a deep commitment to improving outcomes, making a difference and seeing lives improve. Often, what we do and how we do it, is based on instinct, common sense and personal values. Sometimes, not only is that enough, it is crucial.

However, there are also times and issues which, due to their complexity, depth or multi-faceted elements, require reflection, evidence, knowledge and skills, in order to optimise the potential for a positive effect. In times of increasing demands and reducing resources, doing something because that is what we have always done, and how we have done it, is no longer good enough. The children and families with whom we work deserve and need more. Delivering services and programmes which have been demonstrated as impacting positively on outcomes, and doing so with vigilance in relation to quality, value for money and enhanced structural linkages, are all central elements of what we have come to understand as best practice. Developing organisational capacity, leadership skills and reflective competencies have been demonstrated internationally as being central to the creation of high quality services which maximise the opportunity for positive change, and as CDI explains in this Workbook, the development of emotionally intelligent organisations.

The establishment of the Department of Children and Youth Affairs earlier this year was an indication of the commitment this Government has to ensuring the needs of children and families are responded to in an integrated, coherent and comprehensive way. This innovation followed on from the highly effective work of the Office of the Minister for Children and Youth Affairs, the development of Children’s Services Committees, and significant investment in an increased understanding of what works. The Department of Children and Youth Affairs understands the need to support our capacity to deliver evidence-based programmes; to enhance the skills and knowledge of our broad practitioner base, and we have been striving to do so through many initiatives and quality frameworks, some of which are referenced within this Workbook.

Quality Services, Better Outcomes provides a practical resource for frontline staff, service managers and organisations that are currently implementing or intend to implement, evidence-based programmes and services for children.

Acknowledgements

CDI began thinking about this Workbook in January 2011. It followed a period of reflection for the CDI team over those cold winter days when all you could see for miles was glistening snow! We were keen to share our growing knowledge and deepening insights regarding processes, structures and supports which enable the delivery of quality services and programmes. We hoped that in collating our collective experiences we might be able to offer a valuable resource for programme staff and managers in delivering evidence-based programmes. Who would have thought that our initial aim of producing a small booklet would turn out to be over a hundred page document full of thought-provoking ideas, suggestions, and endless top tips!

The following have contributed to this process:

Marian Quinn, CEO, CDI, whose knowledge, expertise and support ensured that all elements of the Workbook were pulled together in such a logical way, and who spell checked the document with a fine tooth comb!

Karen Blasé, Senior Scientist, Frank Porter Graham Child Development Institute, University of North Carolina, whose vast and expert work is drawn on as a basis for this Workbook. Not only is her work heavily referred to, but Karen kindly provided support and guidance during the development of the Workbook.

CDI is grateful to the expert reviewers for their time and constructive (and in some cases, very comprehensive!) feedback. The expert reviewers were: Colette McLoughlin (Childcare Manager, HSE); Deirdre Bigley (CEO, Copping On); Trevor Higgins (Manager, Fettercairn Little Ones); Niamh Quinn (Senior Youth Officer, Foroige); Gwen Doyle, (Liaison Officer, City of Dublin Youth Services Board); Sue Mulhall (Strategic and Corporate Manager, CDI).

This Workbook would not have been possible without the support of the Department of Children and Youth Affairs, and The Atlantic Philanthropies. Their focus on prevention and early intervention has not only underpinned the CDI ethos, but informed much of current thinking in relation to children’s services. The financial support provided has been complemented by their vision and commitment to better understanding what, how, and why we can positively impact on the lives of children and their families.

A special thanks goes to Audrey Habington (Administration Assistant, CDI), and Paula Kavanagh (Administration and Communications Co-ordinator, CDI) for providing administrative support (and making great coffee to keep us alert!).

Aileen, Tara and Gráinne
and/or their families, drawing on research examples of best practice. I believe this workbook will offer a practical and user friendly support to services and organisations working with children and families and so ultimately enhance quality delivery and improved outcomes. As such, it complements and facilitates our Programme for Government, and the commitment of this Government and Department to addressing the needs of our children, our future.

Ms Frances Fitzgerald, TD, Minister for Children and Youth Affairs.

1.1 Overview

Delivering quality services to children, young people and families is a complex process. The risk and protective factors impacting on children’s well-being are multiple; our knowledge of ‘what works’ remains uncertain at times, whilst the shifting economic climate has created uncertainty and new challenges for services. We set out to develop a practical resource for frontline staff, service managers and organisations that are currently implementing, or intend to implement, evidence-based programmes and services for children and/or their families. We have done so by drawing on examples of best practice nationally and internationally, as well as sharing our own experience of developing, delivering and supporting evidence-based programmes and services within the Childhood Development Initiative (CDI).

The Childhood Development Initiative (CDI) is an innovative, community based response to a comprehensive consultation process undertaken in Tallaght West. Working with a wide range of locally established service providers, CDI is delivering services to children and families which meet identified needs. Each of these is being rigorously evaluated, and considerable attention is being given to quality assurance, promotion of reflective practice, and professional training and support. The insights gained, and techniques developed during this process are, we believe, central to delivering high quality services with the view to improving our understanding of what enables children to meet their potential, gain their developmental milestones within appropriate timeframes and become healthy and active citizens. For more information on CDI and its programme of activities go to www.twcdi.ie.

This Workbook describes key processes relating to practice, organisational culture and systems change which support the implementation of evidence-based and evidence-informed programmes and practices. From CDI’s experience, implementing evidence-based programmes not only requires specific structures and processes in place to support programme implementation and fidelity (e.g. training, coaching, and supervision) but also necessitates a focus on the more generic aspects of delivering quality services (e.g. engaging in reflective practice in order to promote and maintain fidelity to a programme). These terms and processes are explained fully throughout the Workbook.

The Workbook also addresses some fundamental areas in relation to monitoring and evaluation as a way of determining whether an intervention was effective or not. In effect, this Workbook hopes to explain the ‘what’, ‘why’, ‘how’ and ‘did we?’ of evidence-based practice. The Workbook is intended to provide readers with a comprehensive introduction to both the shared language and concepts underpinning the science and practice of implementation. It complements the ‘What Works Process’ guide published by the Centre for Effective Services (CES, 2011) which supports services in assessing how effective they are in improving outcomes for children and helps them to think about what works.
Whether you are reading this Workbook out of curiosity, are currently exploring or selecting programmes, or would like to be more evidence-based in your own work with children and families, this Workbook will guide you through the key processes (or at least lend a hand!), which can support the delivery of high quality services.

1.2 Why quality?

What do you think of when you hear the term ‘quality’ or ‘quality assurance’? Do you immediately think of television advertisements promoting the quality and excellence of Irish food products? Do you think of strict quality control systems found in industries such as aeronautical engineering, car manufacturing, or cosmetics? Do you associate quality with the delivery of customer care services? How do you think quality in these industries is ensured and maintained? Is it through the implementation of rigorous quality control checks of products or goods (e.g. checking best before dates, cleaning equipment, ensuring bolts and screws are sufficiently tightened)? Is it through the regular supervision or training of employees? How do we know whether quality has been achieved? Is it when we know our clients or customers are satisfied? Is it when we see tangible improvements across specific areas? Is it when our profit margins increase? And if we aren’t in the business of making a profit, what else should we be considering?

Quality, as defined in the Oxford English Dictionary (2011), is “the standard of something as measured against other things of a similar kind; the degree of excellence of something”. In line with this, ‘quality assurance’ is the “maintenance of a desired level of activity in a service or product, especially by means of attention to every stage of the process of delivery or production”. (Oxford English Dictionary, 2011). So how is this relevant to what we are trying to do?

Over the last several years, the concept of quality assurance has come to increasingly underpin the delivery of child and family services in Ireland. This has coincided with a global movement to achieving positive outcomes for children and families. Quality frameworks describe a minimal level of quality, set out high standards, and illustrate good practice. They provide consistency in terms of service delivery and help us to determine if we are engaging in good practice by reaching desirable standards. A number of frameworks have been developed within an Irish context to help individuals and organisations deliver quality services to targeted groups. For example, Síolta: the National Quality Framework for Early Childhood Education (Early Years Education Policy Unit, 2006) offers early years’ services, including nurseries and preschools, direction and support in order to improve the quality of early childhood experiences. The Framework is based on 12 principles including the centrality of children, equality, parents as their child’s primary educators, and respecting diversity. Each of these are translated into practice through the implementation of 16 standards (e.g. environment, play, interaction and curriculum).
leadership within the organisation for holding the overall vision and providing guidance and direction, particularly in challenging times. Service providers are encouraged to examine service delivery within their own organisations in terms of the services, programmes, or activities being provided, the rationale for delivering them, how they are currently delivered, how they are supported, and if key objectives are being achieved. This approach may also support managers and practitioners as they try to prioritise outcomes for children and families within their service.

1.4 How can this Workbook help you?

We anticipate that this Workbook will provide you with an opportunity to reflect on your work, by exploring and applying the various concepts to existing practice. While there may be some overlap of the various elements within the Framework, you may decide to focus on one element as a starting point. In our experience, each element may naturally raise questions for you concerning other factors. The Framework is not intended to replace other quality frameworks you might be working to, but may complement and enhance existing practices to achieve quality within your organisation. We hope the Framework will provide you with an opportunity to integrate different processes and further develop existing systems.

Section Two describes the process of developing a theory or model of change to underpin a service or intervention (also called logic modelling). It defines a ‘logic model’ and illustrates the crucial elements of this process, and how to undertake it, with examples. The section also focuses on ‘implementation fidelity’, in other words, maintaining faithfulness to the programme content. It identifies some of the common challenges that may prevent us from maintaining fidelity to the key components of our intervention, providing readers with useful questions and points for further consideration. Sections Three, Four, and Five describe the elements of competency, organisational change, and leadership of the Quality Framework for Achieving Outcomes in detail, respectively drawing on both the research evidence as well as the learning arising from CDI’s experience. Finally, Section Six provides a brief overview of methods and tools for undertaking an internal evaluation of your programme or service which may be integrated into daily practice. This Section directs you towards identifying ways to measure outcomes and implementation processes.

The purpose of the Framework is to ensure that the services we deliver to children and families are needs based, quality driven and outcomes focused. Delivering evidence-based programmes is a mechanism for ensuring quality services which improve outcomes. Some elements of the Framework, namely, building competence and confidence, organisational change, and leadership, align with the broad classes of ‘implementation drivers’ (e.g., competency, organisation, and leadership) as identified by Fixsen, Naoom, Blasé, Friedman & Wallace (2005). While these are discussed in more detail in Sections Three, Four, and Five of the Workbook, we provide a brief introduction to them below.

First, we discuss building competence and confidence among staff, beginning with the selection of staff who are committed to the goals of the organisation and the provision of sufficient resources for staff training and support. Next we examine the requirement for ‘organisational change’ to support programme staff in achieving positive outcomes for their client group. Finally, we highlight the significance of
2.1 Overview

What is a logic model? What are the benefits and challenges in developing a logic model and how do you do it? Furthermore, what do we mean by implementation fidelity and why is it important in relation to the logic model?

Logic modelling is a relatively new term for child and family services, and it is a process which brings challenges and frustrations. However, it is a central element of developing evidence-based programmes and many organisations, having experienced the benefits which come with the clarity and focus of a logic model, have now integrated the approach widely. Some organisations have been using similar methods, such as developing a theory of change or even a business plan, and processes which include identifying specific objectives, activities to achieve them, and the rationale for the activities. All of these are very similar to the logic model approach.

This Section defines logic modelling and identifies the key characteristics of logic models, drawing on examples from programmes developed by CDI. Whether you intend to develop a logic model for a new programme or are reviewing existing practice, we have provided guidelines for developing and using a logic model to enhance what you do and what you achieve. The section also defines what we mean by implementation fidelity and why it is so important in relation to implementing evidence-based programmes.

2.2 Defining a logic model

A logic model is defined as an image or a tool that may be used for programme planning, implementation and evaluation (Alter & Egan, 1997; Julian, 1997; McLaughlin & Jordan, 1999). It links the evidence (i.e. what research and best practice tells us about a programme), inputs (i.e. the resources available to the programme) and activities (i.e. what you deliver), to anticipated outputs and outcomes (Hernandez, 2000; McLaughlin & Jordan, 1999). Outputs are the ‘products’ of an initiative, such as brochures or resources, whilst an outcome relates to a change in attitudes, behaviours and so on. The hoped for outcomes usually specify what is expected to be achieved (Kaplan et al., 2004). In other words, the logic model process provides the rationale for delivering specific programme activities (i.e. that X will lead to Z if Y is implemented).
TABLE 1: Logic Model with Examples

<table>
<thead>
<tr>
<th>What You Would Like To Change</th>
<th>What The Research Tells Us</th>
<th>What You Plan To Do</th>
<th>What You Expect To Occur</th>
</tr>
</thead>
<tbody>
<tr>
<td>THE CURRENT SITUATION/ISSUE/CHALLENGE</td>
<td>RESEARCH EVIDENCE/BEST PRACTICE</td>
<td>INPUTS/RESOURCES ACTIVITIES</td>
<td>OUTPUTS SHORT TERM OUTCOMES INTERMEDIATE OUTCOMES LONG TERM OUTCOMES</td>
</tr>
<tr>
<td>Poor eating habits among young children; Low participation in physical activity.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Poor nutrition in early childhood is associated with obesity and poor health in adulthood; Inadequate nutrition is identified as a barrier to learning; Educating children about healthy eating begins in the classroom; Children’s health may be improved by providing teachers and parents with information on healthy eating approaches and physical games.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children will participate in 30 minutes of physical activity each day; Training/ workshops (e.g. teachers and parents will receive 10 information sessions on diet and nutrition).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Changes in knowledge (e.g. parents have a better awareness of healthy eating - ‘five a day’ principle and the importance of physical exercise; increased awareness among teachers about engaging effectively with parents); * Changes in behaviour (e.g. children are eating more fruit in school).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Changes in attitudes and perceptions (e.g. children are happier in school; parents develop positive relationships with their child’s school/teacher; children value eating healthy foods).</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>* Changes in behaviour (e.g. children are physically healthier; parents have an increased sense of confidence in supporting their child’s physical development).</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Evaluation (Implementation process) ** Evaluation is discussed in Section 6.
2.3 Why develop a logic model?

There are several benefits to developing a logic model for a programme or service. For example, Coffman et al (1999) suggest that it:

- Articulates a theory of change (i.e. we expect to achieve this outcome with these inputs and activities) and requires carefully assessing the ‘logic’ (i.e. can we reasonably expect that these inputs and activities will achieve the desired outcomes);
- Clearly and accurately describes the programme’s key objectives, ensuring greater transparency, evaluability and accountability;
- Places the focus on the implementation of activities, highlighting quality and impact;
- Facilitates communication among, and buy-in from key stakeholders;
- Presents a stronger case for seeking funding from potential funders and supporters;
- Provides a structured framework for determining whether the programme is successful or not.

2.4 How to develop a logic model

Developing a logic model takes time (Kaplan et al., 2004) but it is worth it! While we have broken it down here into three simple steps to help you identify the key elements of your logic model, we also recommend looking at the following websites which provide specific examples:

- Centre for Effective Services workbook on logic modelling at www.effective-services.org/images/uploads/file/projects/012/Workbook.pdf;
- ‘Enhancing Program Performance with Logic Models’ at http://www.uwex.edu/ces/lmcourse/;

Step 1:
Start your logic model by being clear about the end destination. Key questions might be:

- Where do you want to get to?
- What is the situation that requires changing?
- What are the identified needs of the target group?
- What outcomes do you want to achieve?

Step 2:
The next step is to conduct a comprehensive review of the literature in relation to the research evidence and best practice which will inform your logic model. In other words, what do we know about how to get there? Key questions might be:

- What does the research and best practice tell us about how to achieve the change we are seeking?
- What is the theory of change underlying the best practice (e.g. risk and protective factors, social learning theory)?
- What does the local, national and international research tell us?
- What models have been successful? How do they fit with our objectives? Ethos? Target groups?

Step 3:
Next is the detailed consideration of the model’s core components i.e. inputs, activities, outputs, and outcomes. Key questions might be:

**Inputs (or resources)**

- What resources or inputs are necessary to support change or produce the desired outcomes (i.e. what do we need)?
- Are the appropriate resources available to enable us to effect change (e.g. funding, staff, facilities, time)?
- Is there a readiness to engage in a process of change amongst key organisations or individuals (i.e. is everyone on board)?
- Is there a commitment or motivation to change among staff? (i.e. what information and support will staff need to make a commitment?)

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*Guided by Miller, Simeone & Carnevale’s (2001) key questions.*
2.5 How is a logic model used?

Programme delivery can and should be informed by a logic model. All those involved in delivering or managing an evidence-based programme should understand the core elements of the logic model, so that they not only deliver the programme as intended, but understand the rationale and evidence for such delivery. This promotes quality and professionalism whilst supporting a shared focus on the anticipated outcomes.

The logic model as illustrated in Table 1 also refers to evaluation in terms of assessing the implementation process (i.e. how activities are delivered) as well as the outcomes you expect to achieve. By evaluating the key components of the logic model, we can verify whether anticipated outcomes have been achieved and in effect, establish the value of the programme. Knowing whether our work is achieving the desired change is critical, in order that:

- We are as effective as we can be;
- Children and families get the services they need and deserve;
- We utilise resources efficiently and effectively.

Findings arising from an evaluation of a programme may be usefully applied back to the programme’s logic model in order to improve outcomes, change the underlying assumptions or develop the model’s theory of change. This type of evidence may increase accountability, stakeholder ownership, continuous learning, and a greater commitment to change. Section Six of the Workbook provides a detailed description of developing evaluation methods for your programme.

2.6 Implementation fidelity

As previously stated, the logic model guides us in terms of what we plan to do or are currently doing (i.e. implementing our programme’s objectives), and what we are hoping to achieve at the end of service delivery (i.e. the intended outcomes). Quality is achieved when there is faithfulness to the programme’s logic model, in other words, when we can be confident that the core inputs and activities delivered as part of the programme were implemented with integrity to achieve the intended outcomes. Being faithful to the intervention, otherwise known as ‘fidelity’ or ‘implementation fidelity’, is defined as the “degree of exactness with which something is copied or reproduced”, (Oxford English Dictionary, 2011). Achieving a high level of fidelity helps to ensure that a programme’s integrity is maintained and original targets are met (Fixsen et al. 2005; Perkins & Berrena, 2008).
Fidelity (or delivering a programme as intended) is particularly important when implementing evidence-based programmes (EBPs). As previously described, it requires the identification of desired outcomes (i.e. what you want to achieve); consideration of existing literature in what we know about achieving these outcomes (i.e. what works); and agreement on actions, activities and supports which best fit the target group and draw on the evidence (i.e. what you need to deliver). If the literature tells us that a child develops more positive feelings about school and increases school attainment when s/he engages in after-school activities with caring adults in a mentoring role, then we should not expect similar improvements if the child participates in activities in the absence of mentors. Therefore the extent to which the intervention (or its essential elements) is implemented as intended is key to the achievement of the identified outcomes (Mihalic, 2004). In other words, if we deliver as set out by the programme model or framework, we are much more likely to meet our targets. Identifying the essential elements of an intervention may be challenging if the intervention is not already evidence-based. In this case, the developers of the intervention should be consulted as well as all written material associated with the intervention and those involved in the implementation of the intervention. If this is not possible, a discussion with colleagues, and consideration of the “what works” literature is essential.

Obviously delivering programmes with children and families occurs within an ever-changing context and one of the key challenges for service providers is to ensure that staff implement the core components of the intervention as intended, whilst recognising and responding to, changing needs and contexts. This becomes particularly significant when the intervention is being ‘scaled up’ (increasing the number of participants) or replicating in other sites. Any adaptation (otherwise known as ‘deviation’ or change) away from the core components of the programme, for whatever reason, may compromise both fidelity and therefore programme success (Bumbarger, 2008). “Disappointing” outcomes may be due to poor or incomplete implementation rather than the intervention not having the capacity to achieve the desired outcomes (Fixsen et al., 2005; Holter, Teague & Bybee, 2003; Yeaton & Sechrest; 1981). The risk increases in the absence of rigorous monitoring by the developer(s) of the intervention who will usually have a deeper understanding of the programme and its underpinning evidence (Mihalic, 2004).

2.7 Adapting existing evidence-based programmes

There are a plethora of reasons for wanting to change what we are required to implement. For example, at a personal level, we might not fully understand or be committed to the underlying principles of the intervention. At the practice level, we might not have the necessary training or knowledge to implement the programme with fidelity, or may not feel competent or comfortable with delivering elements of it. At the contextual level, we or the organisation, may adapt the programme in recognition of participant’s gender, age, and socioeconomic background, level of education or individual needs. There may be insufficient funding and resources, or staff shortages and high staff turnover, all of which can impact on the implementation process (Yeaton & Sechrest, 1981). Further barriers to the effective implementation of the programme may include (Fixsen et al., 2005; Fullan, 1991; 1992; Hallinger, Bickman & Davis, 1990; Mihalic, 2004; Weiner, 2009):

- Few opportunities for staff to participate in decision-making processes;
- A lack of commitment to change among staff/organisations;
- Highly experienced staff who “know the ropes” and are over confident in their practice;
- Organisations with bureaucratic climates;
- Absence of effective managerial support and leadership;
- Lack of adequate resources to provide staff training.

These factors will be discussed further in the sections considering ‘implementation drivers’.

However, there are times when there is no alternative but to adapt an intervention to suit the target group. For example, when implementing a programme that has been designed in a different country and for a different target group, some modification may be required in order to (a) meet the specific needs of the target group; (b) make it more relevant to the Irish context. The programme should be modified under the expert guidance and direction of the programme developers, i.e. the people who originally developed the logic model, or programme rationale, and the resulting activities. In addition, it is useful for programme developers to take an active role in the ongoing monitoring of quality and fidelity throughout the delivery of the programme. In the event that a programme or service has not been formally developed, this provides the practitioner and organisation with an opportunity to review the logic, rationale and evidence underpinning the programme, and match these appropriately to the identified needs of the target group, and the desired outcomes. The processes described in this workbook will support a review of this kind.

Adaptation of an intervention may be necessary in order to successfully implement it within a different social, cultural, practical or political context or to a target group with specific needs, but these changes need to be undertaken following careful consideration. The following recommendations should guide you in making these decisions.
2.8 Effective implementation

Research has identified several key processes to support the effective implementation of programmes and practices (Bruns, Suter, Burchard, Leverentz-Brady & Force, in press; Bumbarger, 2008; Panzano, Selfrin, Chaney-Jones, Roth, Crane-Ross, Massatti et al., 2002). The following processes, drawn from the wider framework of ‘implementation drivers’ discussed above, seek to promote, support and sustain quality implementation at an individual and organisational level:

**Capacity Building:**

Building competence and confidence among staff through the provision of reliable recruitment procedures, staff training, coaching, reflective practice and supervision, and performance assessment (fidelity measurement).

**Organisational Change:**

Ensuring organisational systems, structures and cultures promote and support the delivery of quality services and the achievement of identified outcomes.

**Leadership:**

Having an effective leader (or leadership) that supports individual and organisational change and development, while holding the vision for achieving positive outcomes for children and families.

These are discussed in greater detail in Sections Three, Four, and Five.

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**TIP SHEET 1: ADAPTING EXISTING EVIDENCE-BASED PROGRAMMES**

1. Identify your target group, their needs, and the specific outcomes you want to achieve.

2. Identify a suitable evidence-based programme(s) that matches the needs of your target group. The Centre for Effective Services can support you in doing this. (www.effectiveservices.org), if you are already delivering a programme to this group, look at the detail of it, how it is delivered, for how long, etc.

3. Ask yourself the following:
   - Does this programme fit with my/our organisation’s vision or key objectives?
   - Does it fit within current social, cultural, practical and/or political contexts?
     For example:
     - Social: will the programme be easily implemented in this community?
     - Cultural: does the programme promote similar values to our own?
     - Practical: will it work within existing structures and organisational systems?
     - Do we have capacity to deliver this?
     - Political: is it in line with local or national agendas for the target group?

4. Does the programme fit with the desired outcomes for, and what we know about this target group? Will they enjoy it and therefore turn up?

5. If adaptation of the intervention is required, identify the critical components that require adaptation, and note your rationale for the changes. Again, the CES can support you in making these links;

6. Consult the developers of the original intervention prior to any adaptation to consider the potential impact of change on key outcomes for the target group. If this is not possible, talk to colleagues who are familiar with the intervention;

7. Once adaptations are made, put in place appropriate systems for monitoring fidelity and outcomes as described in this workbook and elsewhere (see Section Three).
2.9 Conclusion

This Section sought to define what is meant by a logic model as well as to describe in detail the key components of the model, and how to develop one. It demonstrated the benefits of a logic model in the delivery of quality services to children and families. This Section also defined and addressed the concept of implementation fidelity in relation to programme implementation, emphasising the need to maintain adherence to the programme’s logic model in order to achieve the anticipated outcomes. The next section will explore how staff can be supported to develop capacity in delivering evidence-based programmes. In addition it will identify and describe organisational processes which can support staff to develop their capacity.
3.1 Overview

Organisations can promote and enable quality service delivery by supporting staff to build competencies and confidence. Organisations need to provide continuous opportunities for practitioners to develop new skills and abilities needed to deliver interventions as intended. Within organisations, individuals with roles as managers, trainers, facilitators or practitioners can act as change agents who support continual growth and development in practice (Thomas, 2008). This Section will explore a number of processes which support staff to build competencies and confidence, namely, staff selection, training, supervision, coaching, and reflective practice. Further information on how organisations can support staff to implement evidence-based and evidence-informed programmes and practice are also discussed in Sections Four and Five.

3.2 Selection of staff

The capacity of staff to deliver evidence-based programmes is a significant factor in whether programmes are delivered with fidelity (as intended). We suggest organisations should pay special attention to how they select staff. Important elements of any recruitment process include identifying essential criteria, such as relevant qualifications, years of experience and core competencies required for the position. The National Framework for Qualifications provides a structure to compare different qualifications (http://www.nfq.ie). Identifying a minimum standard of qualifications and experience is a key aspect in ensuring staff have appropriate knowledge to work in a particular area, or with a specific target group.

A number of personal characteristics may be useful to consider when selecting staff, namely emotional intelligence (including sub components, such as openness to experience and coping styles), conscientiousness, and agreeableness. Each of the aforementioned will be explained and their relevance to quality implementation will be highlighted.

3.2.1 Emotional intelligence

Emotional Intelligence can be defined as a person’s ability to perceive, understand and manage one’s emotions and interact with others. It is a multifaceted concept, as highlighted here:

"Emotional Intelligence is the set of abilities (verbal and nonverbal) that enable a person to generate, recognise, express, understand, and evaluate their own, and others emotions in order to guide thinking and action that successfully cope with environmental demands and pressures" (Van Rooy and Viswesvaran, 2004, p72).
Ideally, individuals should also share beliefs and values that are aligned to the ethos of the organisation or programme.

When recruiting staff, or allocating responsibilities, things to consider may include:

- Is this person in tune with his or her organisational context?
- Is s/he able to regulate his or her emotions?
- Does s/he demonstrate an ability to carry out tasks?
- Is s/he open to different points of view?
- Is s/he open to learning?
- Has his/her experience changed his or her practice?
- How does s/he cope with change?
- Does s/he keep up to date with research?

It can be difficult to ascertain the answers to the aforementioned questions. As with all competencies, demonstrable skills and evidence of past experience can be helpful. Emotional intelligence and personality can be assessed using psychometric tests and/or during interviews (Powell & Goffin, 2009). For example the Emotional Quotient Inventory (EQI-i) can be used to assess a person’s emotional intelligence (Bar-On, 2006). Psychometric tests can be administered by a person in your organisation who has received specialised training in the specific test or by a certified external consultant. For more information on utilising psychometric tests contact one of the many Irish consultancy firms specialising in human resource management or the Psychological Society of Ireland (www.psihq.ie).

In addition see the Tip Sheet below which details a number of activities which may be useful when exploring personal characteristics and beliefs. In conclusion, staff selection provides an opportunity to identify individuals that have the knowledge, skills and personal attributes that are likely to support them to carry out programme implementation effectively. However staff selection is still only the first step in the process. In order to ensure quality implementation, staff need to be supported to build confidence and competency by providing training, coaching, supervision and both individual and group reflective practice.

### Emotional Intelligence

Emotional Intelligence is associated with high performance on group or team tasks (O’Boyle, Humphrey, Pollack, Hawver, & Story, 2011). O’Boyle et al. (2011) found that higher levels of emotional intelligence were linked positively to an individual’s ability to work effectively when carrying out emotional labour. Emotional labour was used to describe working in the service industry, caring professions, law enforcement and carrying out leadership roles. Emotional intelligence and cognitive ability are both linked to a person’s ability to carry out complex tasks (O’Boyle et al., 2011). Opportunities for, and support in, reflective thinking, can develop and enhance individual’s emotional intelligence.

- **Openness to experience**
  
  Openness to experience is a sub component of emotional intelligence. A person who is open to experience is conscious of 1) his or her own feelings; 2) others’ feelings and 3) organisational context. The construct of openness is complex and requires more research to be fully understood. However, Griffin and Hesketh’s (2004) research found that attentiveness to changes in one’s environment is associated with adaptability to changes in a work setting.

- **Flexible coping styles**
  
  Flexible coping styles are a further sub component of emotional intelligence, involving individuals utilising a range of positive coping strategies. Some coping strategies are particularly associated with high performance, such as reappraisal coping, which involves individuals actively looking to reframe the situation in a positive way. Employing positive reappraisal as a coping strategy is associated with a tendency to maintain programme fidelity. (Klimes-Dougan et al., 2009).

### Conscientiousness

Conscientiousness refers to the practice of carrying out tasks as required, particularly in terms of attention to detail and dutifulness. Conscientiousness has been associated with ability to cope with change positively and has been shown to be an important factor in the performance of complex tasks, (Chen et al., 2001; Lochman et al., 2009).

### Agreeableness

Agreeableness relates to tendencies to both comply with requests, and interpersonal skills such as being kind and sympathetic. It is associated with an ability to engage with children and their parents and to follow programme requirements, (Lochman, 2009). Since learning to effectively use a new practice will involve receiving and acting on feedback, being “coachable” is viewed by Fixsen and colleagues (2005) as a key selection variable.
TIP SHEET 2: ACTIVITIES TO EXPLORE PERSONAL CHARACTERISTICS AND BELIEFS

Competency based questions

Competency based questions target a specific skill or competency, by focusing on behaviour and skills in specific circumstances.

Developing competency based questions:

- Identify the competency you are interested in, for example, flexibility.
- Devise a question which is relevant to your field of work but is not too specific.
- Identify the key behaviours you are looking for. Identify if there are any behaviours which you would view negatively.

Examples of questions:

- Tell us about a time where you had to change how you approached a task. (flexibility);
- Can you think of something you have done to grow professionally in the recent past? In what way did this impact on your practice? (openness to experience);
- Describe a time when you altered your own behaviour to fit the situation? Explain why you did so. (flexibility);
- Tell me about a time when you had to change your point of view or your plans to take into account new information or changing priorities. (emotional intelligence);
- Describe a significant change you have had to deal with at work. How have you managed this? What skills and supports did you draw on? (emotional intelligence).

Modelling delivery: ability to reflect on practice

The following exercise can be used as part of a recruitment process, as a team building activity, or even during one-to-one supervision. It will help to identify personal characteristics which can significantly impact on practice, and should therefore inform decisions about roles and responsibilities.

- Identify a task or activity (from your service delivery) for an interviewee or staff member to model/act out. Describe exactly what you expect the individual to demonstrate (i.e. target behaviours);
- Provide information on the task or activity. Ask the individual to demonstrate how they would deliver/facilitate this. This demonstration should include modelling/acting out of key skills;
- Identify whether target behaviours were exhibited during the modelling;
- Ask the individual to reflect on how the activity went. What worked well? Do you think you delivered all aspects? What was difficult?
- Once the person has given their views thank them and give feedback. Ask the person to respond to the feedback. Is there anything they would do differently?

Extension of activity

- Blase, Fksen, Bartley, Duda, Metz, et al. (2011) suggest it is useful to ask the person to repeat the task following the discussion and reflection in order to assess if they are able to incorporate feedback and change their behaviour.

- Blase, Fksen, Bartley, Duda, Metz, et al. (2011) suggest it is useful to ask the person to repeat the task following the discussion and reflection in order to assess if they are able to incorporate feedback and change their behaviour.
3.3 Training

Training for programme staff may be based on either (1) the specific content of the evidence-based programme being delivered; (2) generic areas for professional development, such as managing challenging behaviour of participants, engaging with parents, and so on; or training on both. From CDI’s experience, generic professional development is equally important as programme-specific training in helping programme staff to deliver evidence-based programmes. For example if a key part of the work is to work with parents, training is required in the specific programme content and the generic skills of working with parents, building rapport etc.

Training not only enhances the connection between theory and practice, it also acts as an incentive for practitioners to take pride in their work, and to have a better understanding of what and why they are doing what they are doing and ultimately to be more effective in achieving desired outcomes. If practitioners learn through training about the importance that various activities within the programme have in achieving the desired outcomes, they are much more likely to be motivated to carry out those activities, thereby remaining faithful to the programme.

While training can imply cost there are creative ways of minimising these, and it is also vital to recognise that staff are our key asset. Funding for training is available from a variety of sources, and managers should keep an eye out for such supports, e.g. Childcare Committees, County Councils, The Wheel, SOLAS3 and VEC, and on websites, such as Activelink, to name but a few. Developing and utilising internal expertise can also be cost efficient as well as building individual confidence, and offering opportunities for professional development. Finally, ‘quid-pro-quo’ arrangements between organisations whereby one organisation provides expertise or training to another, on the basis that this will be reciprocated also can be very helpful if the training is aligned with the evidence-based or evidence-informed strategies that facilitate achieving your programme’s outcomes.

3.3.1 Timing of training

Services usually have tight time frames when it comes to training. Some points to note include:

- Ensure the training is delivered at a time that suits all practitioners;
- Consider delivering the training during mid-term breaks;
- Factor in time in lieu if training is delivered on practitioners’ time;
- If the training is over a number of weeks, ensure adequate time between sessions to observe and allow for the transfer of learning in to practice;
- Friday evenings are generally a ‘no no’ when it comes to training!
measures to determine which core components are being done well and consistently and which need “booster sessions”. While identifying training needs should be based on data from coaches and from performance measures and is typically the role of the manager, practitioners also can play a part in identifying their own needs and communicating these to their manager.

### 3.3.5 Selection of trainers

While identifying training needs is important, identifying the right trainer is equally important. In terms of evidence-based programmes, it is important that the trainers have the prerequisite content knowledge and experience to deliver the programme. This may mean identifying trainers who have received specific training in relation to the programme and ideally, have been designated as qualified by the programme developer(s). We recommend ongoing contact between trainers and programme developers to support fidelity.

More generally, a trainer that does not meet the needs/expectations of its client group can be damaging to participants and may leave them unenthusiastic about attending further training. Obviously ensuring resources and time are well utilised is also key. The following Tip Sheet (3) may support the process of identifying a trainer:

### TIP SHEET 3: IDENTIFYING A TRAINER

- Identify clear objectives for the training, preferably in consultation with the programme developer(s) if you are using an evidence-based programme or practice as well as considering the needs and expectations of the anticipated participants;
- Ensure a transparent tendering process is established;
- Ideally, there should be at least two people selecting the trainer;
- Are they an accredited trainer to deliver the training you are seeking?
- What experience do they have delivering this type of training?
- Were they recommended by someone you respect?
- Do they have relevant experience in delivering the training?
- If they are experienced, can they show you the evidence from past training events that demonstrates that they can produce results (i.e. increases in knowledge, changed attitudes, skill improvement)?
- Meet with the trainer before, during and after the training to review how it is going;
- Ensure participants provide feedback, and that the feedback is duly considered;
- Ensure that testing of knowledge and skills occurs at the beginning and end of the training course so you know if the training was worth it and which skills and abilities will require more attention through coaching and supervision;
- If further training is required, consider using the same trainer (if appropriate and satisfied with delivery and outcomes) to ensure consistency;
- Agree when and where training will be delivered to ensure maximum participation.

### 3.3.6 Training methods

There are many ways in which training can be delivered. Careful consideration should be given to this before embarking on training. Choose the most effective delivery method for your team given your objectives. Active training has been well recognised as an effective method of training. But what is active training? Silberman & Auerbach (1998) describe it as training where participants do most of the work, so that they acquire knowledge and skill as opposed to receiving it.

Some methods of training delivery are:

- Workshops;
- Practical demonstrations;
- Role play;
- Onsite training and work-shadowing;
- Self-paced instruction/distance learning;
- Small group work;
- Mentoring;
- Computer-assisted/E-learning;
- Short/one off sessions or training delivered over a number of weeks.
3.3.7 Ongoing review of training needs

While the provision of training is central to quality service delivery and improvement in staff morale, managers need to be vigilant and constantly monitor the quality of training delivered and training needs. Given the limitations of budgets when it comes to training, managers need to be sure that the training is appropriate, timely and most of all, impacts on practice. Ideally, at the start of the year, a schedule of training should be laid out, based on a process of identifying needs with practitioners with a continuous check-in on training outcomes and further training needs.

Training needs can be identified during supervision – see below for more on supervision.

3.4 Supervision

Effective supervision is a very important structure to support practitioners in their work and provide an opportunity to reflect on practice. Supervision offers an opportunity to:

- Review tasks and time lines for achieving them;
- Develop/inform work plans;
- Identify barriers to achieving tasks;
- Identify areas where support or resources are required;
- Identify areas where decisions need to be made, before the staff member can proceed with actions;
- Reflect on practice in a more private and focused environment;
- Formulate an action plan to address all issues identified.

Supervision should be carried out at least monthly, for at least one to one and a half hours duration and have a structure to it. Ideally, each practitioner should have an action plan which can be used as the basis for the supervision, which includes a space for actions and supports required to achieve the actions – see sample supervision template below. Both the supervisor and practitioner should prepare for the supervision meeting. A policy on the purpose and structure of supervision can be helpful. See Tip sheet 4 on Developing a Supervision Policy.

Insight: Valuing supervision means making sure it happens regularly, not just when there is a problem or a target is not met. Protect the time set aside for supervision.

Insight: There was a time I dreaded supervision. I thought it was where I would get hauled over the coals for what I haven’t done. Now I look forward to it. It’s a space where I can off load, get support in prioritising my work, and talk through problems I’m encountering, until we identify a way forward.

SAMPLE SUPERVISION RECORD FORM

(Taken from the CDI supported Early Years Programme for a Parent/Carer Facilitator (PCF))

Name of Staff Member:

Date of Supervision:

Name of Supervisor:

<table>
<thead>
<tr>
<th>Key areas for discussion</th>
<th>Progress to date</th>
<th>Questions/Reflections</th>
</tr>
</thead>
<tbody>
<tr>
<td>E.g. What are the successes/issues or concerns?</td>
<td></td>
<td>E.g. What would support you in this aspect? What blocks you? How can this be better managed? E.g. What are the priorities?</td>
</tr>
<tr>
<td>Are the individual needs of parents being met?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are parents/carers accessing parenting skills training, self development and further education?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How are parents/carers linking to other services in the community?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Do parents/carers have space for structured and unstructured time in the service?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How are parents/carers participating in the Parent Education Programme?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>How are families being supported to establish parent and toddler groups?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please turnover
A supervision policy should identify the following:

- The purpose of supervision;
- The benefits of supervision for the practitioner, the organisation and children and families receiving the service;
- Define confidentiality of supervision meetings;
- How supervisors are expected to prepare for supervision;
- How supervisors are expected to facilitate supervision;
- How supervisee’s are expected to prepare for supervision;
- How supervisee’s are expected to participate in supervision;
- The frequency of supervision meetings;
- The agenda for supervision meetings, and who sets this;
- How supervision meeting minutes are recorded.
3.5 Coaching

Once practitioners have received initial training, providing 'on the job' guidance is a key method of supporting quality delivery. Coaching provides practitioners with opportunities to receive both positive and critical feedback on their practice (Knight, 2009). Providing practitioners with specific feedback supports them to transfer skills from training sessions into their daily working activities (Showers, 1982; Truesdale, 2003). Coaching is also associated with a number of additional outcomes, including staff reflecting more on their work, increased self efficacy and improvements in collaboration with colleagues (Edwards, 2008).

Lochman and colleagues (2009) carried out a study comparing methods of supporting practitioners to deliver a particular programme for school aged children. They found that practitioners who received specific feedback on their practice regularly achieved better outcomes for children compared to practitioners who received initial training followed by regular meetings to discuss how the programme was delivered. Feedback in the latter focused both on whether components of the programme were delivered, the extent to which children were supported to participate, and facilitation skills, but lacked specific discussion on their practice and how to improve it. This appears to be a critical element in promoting quality delivery.

3.5.1 Who can be a coach?

A variety of professionals can take on the role of coaching practitioners, for example, managers, trainers and supervisors. The coaching process requires the coach to have expertise in programme implementation and how to support others to develop their practice. The role, skills and qualities of a coach are discussed in detail below.

3.5.2 The role of the coach

The role of the coach is to support practitioners to achieve competency in all skills required to deliver the service. Coaches carry out a number of activities which include:

- Identifying with practitioners the key behaviours required to deliver the programme effectively;
- Observing delivery and assessing how delivery matches programme requirements;
- Supporting practitioners to reflect on their own practice;
- Providing positive reinforcement for activities which match with programme requirements;
- Providing feedback on activities or practices that do not match the programme;
- Providing guidance or direction on practice areas requiring development;
- Agreeing an action plan with practitioners to maintain or alter practices as required;
- Re-observing any areas in the action plan that were challenging (e.g. difficulties maintaining fidelity to a specific area within the programme) for progress or further development.

Coaches may alter their approach depending on whether the activities they are coaching are familiar or new to the practitioner. Coaches require a number of skills and qualities to be effective.

3.5.3 Key skills and qualities of a coach

An effective coaching approach to supervision will require the following competencies:

- To build positive working relationships;
- To communicate specific feedback in a non-judgemental way;
- Openness to different opinions;
- To take a strengths-based approach requiring the identification and development of practitioners’ abilities and resources;
- Deep understanding of the programme content with the ability to provide specific guidance regarding desired behaviours;
- To demonstrate required skills.

Fixsen et al. (2005) highlight that it is important to train and support those using a coaching approach to ensure they provide coaching that is beneficial.
3.5.4 What form of coaching?

Coaching to support quality implementation focuses on the coach and the practitioner sharing views and data on actual programme delivery. Coaching can take the form of a coach observing programme delivery. Site observations can be beneficial as they provide opportunities for the coach to give feedback, model particular skills if necessary and discuss implementation issues face to face. Alternatively practitioners can film themselves delivering sessions and submit video tapes for review. Videotaping allows practitioners to review their own work and also provides coaches with an opportunity to give feedback. (See Tip Sheets 5 & 10)

3.5.5 Coaches observation of practice

Coaches need to observe practitioners delivering programmes and give feedback in a way which is fair, accurate, and educational. One way of ensuring that coaches can give feedback in this way is to develop a site observation template which details the key behaviours required to deliver as intended, and so maintains fidelity. (The concept of fidelity is explained in detail in Section Two). Site observation templates can be used by coaches or trainers to support quality delivery, shape feedback to an individual practitioner and identify training needs. It can also inform practitioners’ monitoring of their own practice. (Details on Reflective Practice are provided in 3.6). The Tip Sheet (5) below provides information on how to develop an observation template for your programme or service. We strongly recommend that knowledgeable practitioners who deliver the programme with fidelity contribute to the development of a site observation template.

3.5.6 Developing a site observation template

The process of developing a site observation template requires a lead staff member taking responsibility for the process. It is important to include all relevant people during the development stage, but the lead staff member will facilitate input from qualified practitioners, managers, trainers and possibly participants. A number of workshops to identify key areas of the template and review draft templates is beneficial. It is important to ensure that the template components align with the logic model or theory of change and the strategies detailed to achieve outcomes, ie that what you are going to focus on in observations matched the core programme elements. In addition, site observation templates should be reviewed regularly to ensure they are proving useful and comprehensive in identifying practices associated with fidelity measures and quality delivery of the service.

Key steps in the process of developing a site observation template

- Identify reason for site observation template in terms of benefits for service users, practitioners and organisation (see 3.5.5);
- Identify any concerns practitioners, managers and trainers may have and work through issues identified;
- Provide an opportunity for practitioners, managers and trainers to shape the site observation template;
- Provide a period of time to test and refine the template to ensure it provides the programme and practice prompts needed to confirm quality implementation;
- Establish a mechanism to review the site observation template in terms of its components and how it is being used.

3.5.7 How coaches give feedback

Coaches are required to give feedback in a way which reinforces positive practice and supports changes to practices which do not fit with quality service delivery. Discussion between coaches and practitioners needs to occur free from interruptions.

Key aspects on the coaching feedback should include the following:

- Coaches and practitioners agree an optional time and location for discussion;
- Practitioners are provided with an opportunity to reflect on their own practice, identifying areas of strength and areas of development;
- Discussion of practice in terms of observable behaviours;
- Highlight both positive practice and those areas which require improvement;
- Discuss areas for development with practitioner and agree an action plan.

The action plan may include the coach modelling skills, the practitioner researching a particular topic and/or identifying areas for practitioner to work on. It should include scheduling a time for re-observation.
### TIP SHEET 5: DEVELOPING A SITE OBSERVATION TEMPLATE

**Step One**
Identity key tasks and breakdown each task into observable behaviours.

**What exactly are the practitioners expected to do?**

<table>
<thead>
<tr>
<th>TASK</th>
<th>OBSERVABLE BEHAVIOUR</th>
</tr>
</thead>
</table>
| E.g. Provide participants with an opportunity to learn how to manage conflict situations. | • Provides clear directions on the nature of activity;  
• Role plays conflict situations with participants;  
• Demonstrates how to resolve the conflict in the role play using the evidence-based processes;  
• Facilitates a discussion on possible ways to respond to conflict situations;  
• Checks in with participants during activity;  
• Asks open-ended questions to explore participants’ experiences. |

**Step Two**
Identify key features of processes and describe in observable behaviours.

**How do we want to carry out the activity?**

<table>
<thead>
<tr>
<th>PROCESS</th>
<th>OBSERVABLE BEHAVIOUR</th>
</tr>
</thead>
</table>
| E.g. Value each participant and ensure all have the opportunity to share opinions. | • Thanks or reinforces each participant when they offer a contribution;  
• Provides a range of opportunities for all participants to offer opinions, such as working in pairs and small group discussion. |

**Step Three**
Identify features of participation. While participation levels can vary depending on personal characteristics, practitioners need to be aware of participants’ engagement and respond to it to ensure quality service delivery. How will we know the participants are engaged in the activity?

<table>
<thead>
<tr>
<th>PARTICIPANT PARTICIPATION</th>
<th>OBSERVABLE BEHAVIOUR</th>
</tr>
</thead>
</table>
| E.g. Participants are engaged in activities. | • Participants take part in the activities;  
• Participants state that they enjoyed, liked, or benefited from the activity;  
• All participants contribute to the discussion. |

**Step Four**
Identify key target outcomes for the session. Depending on the nature of the service, these may be similar or different for each session. It is helpful to identify all target outcomes even when they are different across sessions. While it is time consuming to identify all outcomes, it contributes to clarity of purpose. What exactly are we trying to achieve?

<table>
<thead>
<tr>
<th>PROCESS</th>
<th>OBSERVABLE BEHAVIOUR</th>
</tr>
</thead>
</table>
| E.g. Participants learnt skills to manage conflict. | • Participants identified key skills associated with managing conflict using a worksheet;  
• Participant identified personal strengths associated with managing conflict. |

### 3.5.8 When to coach

The frequency with which staff require coaching will vary depending on a number of factors, newness of skill, skill difficulty and whether the skill is being utilised frequently. There can be a misconception that only new staff require someone to coach them using site observations. However all staff can benefit from coaching in order to ensure best practice is sustained and ‘drift’ is avoided. Providing all staff with a number of coaching sessions over a year can support quality implementation, while some staff may require additional sessions, as noted above.

**Key aspects on when to coach:**

- Coaching plans should be developed for all staff with newer and less experienced staff receiving more coaching opportunities;
- Coaching plans should specify frequency of observations, data to be considered, (i.e. the site observation template), type of feedback (e.g. verbal, written, both) and timeline for delivering feedback (e.g. within X number of days);
- Adherence to the coaching plan needs to be agreed to ensure that ‘coaching as intended’ is occurring.

### 3.6 Reflective practice – overview

Reflective Practice involves learning through experience (Larrivee, 2008). Our practice or how we do our job is shaped and informed by a range of behaviours, skills, dispositions, assumptions and theories one employs to carry out our professional duties (Larrivee, 2008). Reflection is the process of exploring and analysing one’s practice including one’s feelings and perceptions (Barnett & O’Mahony, 2006). Reflective practice generates knowledge about the reality of what is happening and about one’s own practice (Barnett & O’Mahony, 2006). Reflective practitioners aim to use learning to improve their future practice:

> “Reflection is the process of stepping back from an experience to ponder, carefully and persistently, it [i’s] meaning to the self through the development of inferences; learning is the creation of meaning from past or current events that serves as a guide for future behaviour,” (Daudelin, 1996, p. 39).

This Section begins by detailing how organisations can introduce and support practitioners to engage in reflective practice by identifying specific mechanisms which facilitate this process. Organisations also need to identify individuals or leaders who will value and drive reflective practice. The Section will also explore how these processes can support practitioners and organisations to deliver high quality programmes and services. The coaching process, as described in Section 3.5,
can support individuals to develop more awareness about their actual behaviour and change behaviours based on feedback from the coach. Reflective practice compliments coaching processes by providing practitioners with a structure to monitor their own work. From CDI’s experience, regular reflective practice helps individuals to have greater awareness of their actual behaviour, any issues which may be affecting implementation (such as group dynamics) and of programme fidelity. Simply put, reflective practice provides individuals with a space to ask themselves the hard questions about their delivery such as ‘Was I effective in engaging all participants today?’

3.6.1 Introducing the concept of reflective practice

A key task for any organisation seeking to introduce reflective practice is developing a shared understanding of what reflective practice is and agreeing what processes will be employed to support it. In order to support staff in engaging in reflective practice, it might be helpful to develop a set of principles. Key questions that should be answered include:

- Why are we reflecting on our practice? What do we hope it will offer us?
- What is the nature of the environment in which reflections will be shared?
- How will reflections on practice be used?
- What do we expect of every practitioner in terms of taking part in reflective practice?
- What do we expect from the person supporting reflective practice?
- How will the organisation support reflective practice?
- What are our fears/concerns about this process?
- What do I need to really engage in reflective practice?

The Tip Sheet 6 below describes a process of creating a shared definition of reflection and how to agree a set of principles that guide reflective practice within your organisation.

Team or Group Activity

- Ask each person to think about the last meeting or service they were involved in;
- Ask each person to write on a piece of paper how they felt they performed during the meeting or session. Let them know they will not be required to share this;
- Ask each person to share with the group their thoughts about their performance and how the activity went overall;
- Facilitate a discussion on the similarities and differences in how people judged their performance. Are there common concerns? What are our strengths?
- Ask when and how the group members normally reviews or reflects on their work;
- Divide the group into groups of 3 or 4 people. Each small group will work on a definition of reflective practice;
- Each group is asked to provide feedback on their definition of reflective practice. Facilitate the group in coming up with a shared definition. The facilitator may contribute to this, possibly using Daudelin’s definition in Section 3.5 to support the development of a comprehensive definition.
3.6.2 What are the benefits of reflective practice?

The aim of Reflective Practice is to provide a mechanism to achieve the following tasks (or outcomes):

- Support best practice and quality delivery;
- Support programme effectiveness;
- Support client-centred practice;
- Capture learning and identify good practice;
- Prevent practitioners getting 'stuck in a rut';
- Support ongoing professional development;
- Develop a deeper understanding of your own practice;
- Aid effective review and planning;
- Offer a way to manage change;
- Support the challenges of working in an integrated way;
- Support the application of theory to practice.

Reflective practice can support delivery of evidence-based and integrated services (Canavan, Coen, & White, 2009). Canavan et al. (2009) have highlighted that reflective practice provides a valuable mechanism which supports tackling the complexities of delivering evidence-based programmes and/or interagency work.

Research on the benefits of reflective practice has been carried out across a varied range of professions such as teachers, nurses and counsellors, although within the Irish context, this research is in its infancy. Research with Palliative Care Nurses in Ireland found that reflective practice provided an opportunity for new insights into their practice which supported enhancements in service delivery to patients (Bailey & Graham, 2007). Research with residential care workers in Galway found that reflective practice offers an opportunity to focus on service users’ needs and a chance for staff to look at issues from a range of perspectives (Thorne, 2007). Service delivery is not a simple process and reflective practice allows staff and managers to navigate the complexities in a purposeful and solution focused way (Thomas, 2008).

Managers will want to assess whether the outcomes listed above are indeed being achieved. One way to appraise self-reflection is to invite practitioners to think about their learning experiences while engaged in reflective practice (see Tip Sheet 7: Identifying the Benefits of Reflective Practice).
3.6.3 Facilitating reflective practice

Individuals (e.g. service managers, trainers, coaches) facilitating reflective practice within an organisation are required to 'hold a space for reflections' (Miller, 2005). This involves creating a space (i.e. a dedicated time) which focuses on practice issues rather than practical ones.

Holding a space for reflection involves creating a space which:

- Creates a shared understanding of the purpose of reflective practice;
- Asks questions which support reflection (see Tip Sheet 8: Reflective Questioning);
- Creates opportunities to identify practice successes and challenges;
- Maintains a focus on learning and avoids creating a blame environment;
- Supports all participants to contribute to the discussions;
- Uses feedback from practitioners on the reflective process to determine whether it is beneficial not only to them but to the organisation and target group;
- Distils learning from reflections and supports practitioners to alter their practice due to their own or their colleague’s reflections, as well as data arising from evaluation of the programme (see Section Six for programme evaluation).

3.6.4 Key elements of reflective practice

At an individual level, there are a variety of processes to support reflection, but key elements include the following:

- **Be Proactive** – Reflect on your practice regularly, and avoid only reflecting when something goes wrong. This involves setting up and taking part in regular processes which support reflective practice;
- **Search for Reality** – Thinking about an event involves searching for the reality of it. This requires you to ask questions about: 1) What actually happened? 2) Am I judging things fairly? 3) How did I act in the situation? 4) How did others act? When searching for reality you will need to answer questions honestly and as objectively as possible;
- **Question** – Question your practice and explore alternative ways of doing things or looking at things. Be open to the possibility that there may have been another way to approach the situation you are reflecting on;
- **Explore Uncertainties** – Allow yourself to be puzzled, challenged or confused when you try to answer the questions on your practice....
Reflection involves pondering, taking your time, thinking about it, not rushes to find an answer;

- **Link to Theory** – Explore whether your practice fits with the theory or theories underpinning your work and your target outcomes. Consider the following 1) Does your practice fit with the overall approach? and 2) Can research;

- **Be Supported and Challenged by your Colleagues** – Invite colleagues to challenge your practice and ask for their help in identifying alternative ways to approach challenging issues;

- **Explicit Action Plans** – Make conscious choices about future actions and be explicit about these choices.

### 3.6.5 What are the characteristics of a reflective practitioner?

Reflective Practitioners have a variety of skills and characteristics which support their ongoing participation in reflective practice. It might be useful to revisit Section 3.2.1 on emotional intelligence. Many of the characteristics of a reflective practitioner highlighted below overlap with those associated with emotional intelligence including openness to experience, flexible coping styles, conscientiousness, and agreeableness.

**Characteristics of a reflective practitioner include:**

- Having an openness to learning, being prepared to accept making a mistake and being willing to change your practice;
- Having a desire to deliver high quality services that respond to the participant’s needs;
- Having an ability to question your own work;
- Being receptive to hearing others’ views on your work;
- Being disciplined in taking part in reflective practice; i.e. making regular time and space for it;
- Utilising reflection to support improvements in practice, through consideration of theory and research, and using this information to identify actions;

It should be noted that while some personal attributes support reflection, organisational processes play a vital role in supporting, developing and maintaining reflective practice. These are discussed in Section Five.

### CASE STUDY No 1: Reflective Practice

Anne had a parent information session last night and three out of the 10 parents came. She shortened the session due to the lower number of parents than expected, and thanked the parents repeatedly for coming. The parents that attended were highly engaged and gave positive feedback on their evaluation forms. Anne is disappointed with the attendance as the last session had full attendance. She decides to reflect on the session.

**Be Proactive** – Anne doesn’t normally review sessions unless she feels something has gone wrong. She wishes now she had given some thought to what worked well the last time, when she got full attendance.

**Search for Reality** – Anne thinks about everything that happened, including comments from parents who attended and cancelled. She also thinks about the session content, and how she informed them about it.

**Question** – When Anne is questioning what happened during the session, she begins to think about the other sessions and what made them work. Anne also wonders whether some parents feel that the last parent session wasn’t helpful and if that’s why some parents didn’t return.

**Explore Uncertainties** – Anne explores the possibility that some parents did not find the last session of benefit. She reviews previous feedback forms and finds that most were positive; for parents who did attend, was it right to shorten the session? Was that fair on those who turned up? She covered topics more briefly than she would normally.

**Link to Theory** – Anne examines how her work with parents fits into theories around building links with parents. She asks herself what she understands about how to engage parents meaningfully, and to what extent she adhered to this.

**Be Supported and Challenged by your Colleagues** – Anne discusses her concerns about parental attendance at a team meeting and invites colleagues to help her unpick this issue by questioning her current practice. Anne finds her colleagues do not question her practice but note that working with parents is very difficult.

**Explicit Action Plans** – Anne decides to talk to parents informally to get a better sense of their experience of the parent information sessions, and identify ideas for future sessions. She also decides to ask a couple of the very engaged parents to champion the sessions and encourage others to attend.

**Lessons from the Case Study**

- What supported Anne to reflect?
- What would enhance Anne’s reflective practice?
3.6.6 What are the challenges of reflective practice?

Organisations have a responsibility to create and support opportunities for programme staff to engage in reflective practice. In CDI’s experience, reflective practice is essential for implementing quality services for children and families. One of the key roles of the organisation and its leaders is to provide staff with the necessary time, space, and resources to reap the potential benefits of reflective practice. However, there may be challenges that prevent staff from fully understanding, valuing, or engaging in reflective practice, some of which are discussed below, along with how organisations can support staff to overcome these challenges.

- **Defining reflective practice**
  Creating a common understanding of reflection can be difficult, as it is an abstract concept which means a variety of things to different people. Bringing a team, or group of practitioners, to a shared understanding of reflection can take time and requires a mechanism to consider definitions, and review peoples’ understanding. Teams would benefit from taking time to come up with their own definition of reflective practice, and then check their definition against that defined by best practice. (See Tip Sheet 6: Defining Reflective Practice).

- **Allocating time and space to reflect**
  This is key to supporting consistent reflection, but can be problematic within the time constraints of service delivery. In order to allot time to reflective practice this process needs to be viewed as integral to delivering quality services and not an added extra “when time allows”. Often creativity is required to support time to reflect, such as working lunches or setting up online mechanisms.

- **Motivation to reflect, even when things are going well**
  Research indicates that people tend to reflect on their practice when something goes wrong. We are less inclined to reflect when programme delivery is going well. The focus on negative experiences can be draining and de-motivating for staff, as well as limiting the opportunities to learn from and identify good practice. Providing opportunities to reflect consistently should enable opportunities to identify positive outcomes and experiences.

- **Knowledge**
  Deep understanding and an awareness of the complexities of the practice issue (such as challenging addictive behaviour or promoting positive decision-making) can support a person’s ability to reflect. It is not necessary to be an ‘expert’ to reflect on your practice as instinct, observation and analysis all facilitate greater awareness and understanding. The process of reflecting will however, highlight knowledge gaps to be addressed.

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**TIP SHEET 9: HOW REFLECTIVE AM I?**

Take some time to think about how reflective you are on a weekly basis.

- Do I make time to think about my practice?
- Do I question my practice?
- Do I evaluate my success in achieving my objectives?
- Do I consider changing my practice?
- Do I listen to other people's views on my practice, whether positive or negative?
- Do I ask other people for their views on my practice?
- Do I consider the theory or evidence which might inform my practice?
- Do I explore alternative methods of working?
- How can I do more of this?

This exercise should be used regularly to assess and promote positive changes in reflective practice at an individual level. It can also be used as part of one-to-one supervision, or at team meetings.
Reflective journals are used to:

- **Record:**
  Record the development of your ideas and insights and/or those of a group, and can include concepts, ideas and main learning points from experience and theory. Questions to think about when recording:
  - What happened?
  - Who was involved?
  - What was their involvement?
  - When did it happen?
  - What was my role?
  - How did I feel?

- **Reflect:**
  Think about and interpret the experience – the values, beliefs and assumptions you are writing about. This aims to show the development of your ideas over time. Questions to think about when reflecting:
  - Why did this happen in this way?
  - How could it be improved? How could I improve the way I do things?
  - How could the situation be improved?
  - What effects would these improvements have?
  - What values, beliefs, assumptions, would explain this behaviour/incident/occurrence etc.

- **Analyse:**
  Analysis in a reflective journal may involve three things:
  - Analysis of experience or content – e.g. what happened? What was I thinking? How did I respond?
  - Integration of experience with theory – e.g. what might have been a more effective way to respond? was my behaviour in line with best practice? What would support me to do this?
  - Demonstration of improved awareness and self development – e.g. I am now more considered and reflective in my responses and approaches to situations.

Questions to think about when analysing:
- What are the advantages/strengths/disadvantages/weaknesses of my practice? The programme? The organisation?
- How could the weaknesses/disadvantages be improved?
- How can strengths be maximised and nurtured?
- What does the research and theory say? How can this help me to improve my practice?
- How could this experience/theory contribute to improving this?
- What do I need to do now?
• **Use of filming/audio:**

  Research has shown that using video technology enhances practitioner preparation, examines cognitive and decision making processes and fosters reflection and critical analysis among practitioners. It enables practitioners to sharpen their skills of observation and reflect on important contextual factors that influence service delivery (de Mesquita et al., 2010).

  Sherin and Van Es (2005) found that when using a DVD analysis support tool, mathematics and science teachers became more attuned to classroom events, paying greater attention to what was occurring and how they interpreted interactions.

  While the use of filming has been shown to be very effective in informing practice, it does not come without challenges. Apart from the issue of parental consent (when used with children present), practitioners may feel uneasy about being recorded and may have a fear of criticism. Some people simply don’t like seeing or hearing themselves on record! These fears can be overcome by a well thought out, planned approach. Some tips for the service manager on using DVD are:

  - Discuss with practitioners what may help to inform and enhance their practice;
  - Propose the idea of videoing – have evidence to prove its efficacy (as noted above);
  - Be clear about:
    - The purpose of filming;
    - Who will film?
    - What will be filmed?
    - Who reviews the DVD?
    - How feedback will be given (always noting the positive elements of interactions);
  - Have a set of questions to ask on each piece of DVD:
    - What is going on in the scene?
    - What do you think is happening for the child/children?
    - Are you happy with the scene?
    - Is there anything you would do differently?
  - Volunteers: get a couple of people to offer to be the first ‘guinea pigs’, but don’t force people;
  - Practice: allow the group time to get used to being filmed.

  • **Case Study No 2: Reflective Journaling**

  **Session:** Session 12 of “Sligo Giants”, After School Group for 12-15 year olds

  **Date:** 06.06.11

  **Completed by:** A.W Other

  **What Happened?**

  Towards the end of the session, a fight broke out between Jamie and Fintan. There were nine young people in the group, with Dorothy and I facilitating. There was a lot of pushing and pulling but no one was hurt.

  **What was Going On?**

  Dorothy and I had planned the session well. We were following up on last week’s session when we began looking at communication skills. We did a couple of exercises this week to build on awareness of non-verbal communication. It was all going well until something kicked off between Jamie and Fintan. I’m not sure what happened, but Jamie started swearing at him. The fight happened a few minutes later.

  Now I think about it, Jamie was in bad form when he arrived. He has always been difficult to engage but there have been improvements lately. What might I have done differently? I should have checked with Jamie when I realised he wasn’t in good form. I should also have separated him and Fintan after the swearing started. I could have put one of them into a different group to work. Dorothy and I got such a fright when they started belting each other that I’m not sure either of us gave enough attention to how the other group members felt. We gave all our attention to Jamie and Fintan. That wasn’t fair and was possibly a missed learning opportunity.

  What research/theory might inform my practice? I’m not sure, except to focus on rewarding positive behaviour. We did exactly the opposite!!

  **What do I need to do now?**

  - Complete incident report;
  - Talk to Dorothy and agree follow up e.g.: talk to Fintan and Jamie;
  - Talk to their parents;
  - Facilitate a discussion with the whole group about how they felt and what we should do about it.
• **Communities of Practice (CoP):**
A community of practice is a space where a group of people come together to share their experiences and knowledge in creative ways that foster new and improved approaches to delivering services and programmes (Wenger & Snyder, 2000). CoPs intend to be a key support for service providers and may include sessions involving invited speakers on relevant topics, case study presentations or facilitated sessions on issues identified as affecting service delivery.

The objectives of communities of practice include:

- To support fidelity to a manual/programme;
- To provide technical assistance in programme delivery, particularly in terms of connecting practice and theory;
- To offer a space for reflection, consideration and sharing the learning;
- To identify and respond to training and support needs;
- To collectively identify solutions to issues impacting on service delivery;
- To inform the development of best practice guidelines for services;
- To improve practice and programme delivery.

• **Reflective tools:**
Reflective tools can be used to support regular reflections, and can be very specific in their focus, or generic and wide ranging. For example, reflective tools can be comprised of a checklist of desired target behaviours with open questions to trigger reflections. See Section 3.7 on developing an observation template for more details on identifying target behaviours. Having a space for action plans encourages reflections to improve understanding and shape future practice. Therefore, reflective tools should form part of supervision, review or planning meetings.

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**TIP SHEET 10:**
**USING DVD TO PROMOTE REFLECTIVE PRACTICE**

Reflecting on DVD footage of practice can be carried out alone, with another practitioner, supervisor or a group of practitioners.

- Identify the context – what was happening in the session, what were the learning objectives, is there anything significant that happened prior to this session?

- Play the clip back. You may want to watch the clip more than once;

- Take time to reflect. Think about the following:
  - How did the session go overall? What went well? What did not go well?
  - How did I feel during the session?
  - Were session objectives met? Did everything happen that should have happened?
  - What about the process? What was the quality of interactions between me and the group/individual? How did the other group or individual’s participate?
  - Would I change anything about my practice? Could have I done anything better?
  - What was good about my practice? What do I need to keep doing?

- Record reflections by writing them down, or share them with other practitioners or supervisor at an allocated time.

- If you are reviewing the DVD with others, ask for their observations. What was good? What could be improved or changed?

- Identify all the learning from your and others’ reflections.

- Identify an action plan to incorporate reflections into your practice. In a group setting, other practitioners may reflect on their own practice and identify their own action plan.
SAMPLE REFLECTIVE TOOL TO MONITOR QUALITY AND FIDELITY

Date:

Facilitator Name:
Programme/Session:

ITEM
Planning and Preparation:

1. I planned the session with my co-facilitator, dividing delivery and group management tasks evenly (as per planning template). Yes No

2. I prepared suitable resources to carry out all activities. Completely Partially Not at all

3. All parts of the learning environment were clearly labeled, charts were at eye level and the visual timetable was present. Completely Partially Not at all

Quality of Learning Environment:

4. I created a warm friendly relaxed environment, using labeled praise. Always Often Rarely

5. I invited parents to join the session. Always Often Rarely

Group Management:

6. The children were active which optimises effective learning. Always Often Rarely

7. I used positive discipline methods such as praise and clear instructions. Always Often Rarely

8. I moved around the room to monitor children’s progress and offer support and praise. Always Often Rarely

9. I worked with my co-facilitator to ensure all children were supported. Always Often Rarely

10. The children moved easily from one activity to another. Always Often Rarely

Facilitation:

11. I ensured that the children were actively engaged in their own learning i.e. less ‘chalk and talk’. Always Often Rarely

12. I utilised collaborative learning where children can learn from each other. Always Often Rarely

13. I asked ‘probing’ questions to encourage children to elaborate on what they were talking about and give their own opinion. Always Often Rarely

14. I made use of the children’s learning environment to engage and extend the children’s learning. Always Often Rarely

15. I completed the following activities in the session as per the manual. Always Often Rarely

Assessment and Reflection:

16. I made use of informal assessment methods such as observation, to ensure that all children’s needs were being catered for. Always Often Rarely

17. I adapted my facilitation as required after reflecting on previous sessions. Always Often Rarely

SAMPLE (CONT’D) – FACILITATOR VIEWS AND REFLECTIONS

Please complete each section in terms of acknowledging strengths, areas for development and making suggestions.

Did I maintain the interest of the children throughout the session and did all children actively participate?

What worked well in my delivery of activities?

What did not work well in my delivery of activities?

Did I deliver all elements of the programme as intended? If not, why not?

How did my co-facilitator and I work together?

Action Plan – to enhance delivery of future sessions:
3.7 Conclusion

Integrating quality processes, such as those outlined in this Section into the organisation’s core mode of working is key to ensuring staff are supported to deliver quality services. This Section has offered guidelines on a number of structures which can support reflective practices, as well as the principles and processes underpinning them. Organisations will need to be in a position to embrace these processes and concepts in order to avoid a disjointed, piecemeal approach. Whilst individual practitioners have responsibility for taking the time and space to consider how they do their work and identifying colleagues who can support them in this, an effective, cohesive approach to supporting quality delivery may also mean organisational change, which will be discussed in more detail in the next section.
“Change is hard because people overestimate the value of what they have – and underestimate the value of what they may gain by giving that up,” James Belasco and Ralph Stayer, Flight of the Buffalo, 1994.

4.1 Overview

The previous Section described some of the ways to support staff in adopting a quality-driven and outcomes-focused approach to service delivery. Having the capacity to deliver quality services to achieve better outcomes for children and families not only requires development or capacity-building at an individual level but may also necessitate change at the organisational level. Organisational culture places a central role in driving change and evidence-based practice. This Section will explore this process, identifying some of the challenges or barriers to change, and suggested strategies to overcome these. One of the key strategies is to assess a readiness for change within the organisation as this is continuously demonstrated as being key to achieving successful change implementation.

4.2 Introducing change

Changing organisational structures and cultures (otherwise known as ‘change management’), such as changing our values and opinions; the ethics, policies, or procedures that we might follow; or changing our everyday practice in order to create and support changes in our attitudes, behaviour and actions, is undeniably challenging. Such change requires time, commitment, and self-belief on the part of staff in addition to good planning, a shared vision, and delivering consistent messages in relation to the change on the part of leaders. But most importantly, it requires an individual and organisational ‘readiness for change’. In other words, are we ready to change the way we work, think, organise, plan, and deliver? What will such change mean for us, the organisation, and more importantly, the group of children and families to whom we deliver programmes?
4.3 Why change can be difficult

Change may be difficult because some people prefer to exist within the current situation, whether it is in their personal, social or professional lives. The status quo may be considered safer or familiar compared to something that may be perceived as being new, different, or complex. In some cases, we may struggle with the change for any of the following reasons:

- I won’t like what change brings with it;
- I will be no good at it;
- I am unable to change;
- I know what I am already doing works;
- I do not understand what I am being asked to change or why;
- I do not value the change being suggested or imposed;
- I have no control over the change;
- My supervisor or line manager is not interested in whether we change or not;
- There are no rewards or incentives for changing;
- The organisation does not have the time or resources to change;
- Existing policies or procedures within the organisation are inflexible;
- What’s wrong with the way we’ve always done it?

The way in which organisational change is approached by organisations and leaders may have a huge impact on how individuals within the organisation respond to change. 70 per cent of all change programmes initiated result in failure (Balogun & Hope Hailey, 2004). This may be due to a lack of thinking or planning around implementing organisational change (Todnem, 2005). The supports needed to enable positive change to occur at either an individual or organisational level, are often underestimated, or not considered at all. Change introduced in a sudden, piecemeal, or inconsistent manner can create a range of emotional responses from staff, including a sense of apprehension or caution (Burnes, 2004; De Wit & Meyer, 2005). The consequences of poor organisational change management can be detrimental to the organisation and result in lower trust, job satisfaction, and openness to change among staff (Bordia, Restubog, Jimmieson, & Irmer, 2011). So, whilst there are individual personality traits which can support or mitigate against change (as discussed in Section Three), the style of leadership and culture of the organisation are also important factors in managing change and in effect, transforming organisations.

There are dynamics which can support the introduction of change, such as when staff are:

- Keen to close the gap between desired outcomes and those that are being achieved;
- Feeling demotivated or unproductive;
- Wanting to stay competitive;
- Keen to improve performance and productivity.

4.4 Organisational readiness for change

Readiness for change (or being ready to change) may be considered the first step to achieving successful change implementation (Susanto, 2008). At a psychological and behavioural level, being ready to change is believing that you have the capacity to change; at the leadership level, it indicates a belief and self-confidence to implement organisational change (Weiner, 2009). At a structural level, readiness for change requires having good governance structures in place, an availability of fiscal, material and human resources, and access to training or education (Dopson et al., 2002; Newton et al., 2003). There are various motivations for wanting to change at an organisational level, for example, because you may:

- Want to (you value the change);
- Have to (you have little choice);
- Ought to (you feel obliged) (Herscovitch & Meyer, 2002; Weiner, 2009).

It comes as no surprise that ‘wanting to’ change has been found to produce more positive outcomes in terms of implementing organisational change compared to change ‘being imposed’ (Weiner, 2009). But how do we know if or when we are ready for change? Furthermore, what happens when an organisation decides it is not ready for change having assessed its’ readiness? For example, change might not be suitable when there is no identified leader to drive the change; when resources are lacking; or when there is huge staff turnover.
4.5 Initiating and supporting a change process

A key requirement in any change process is that the organisation in which the change is taking place provides a receptive context or an environment which values innovation and reflection, demonstrating to its staff a culture of openness and flexibility. For example, facilitating reflective practice while implementing evidence-based programmes, as described in the previous section, may require organisations to change existing practices to including opportunities for reflection. A useful framework for introducing and maintaining a desired change is Lewin’s ‘Change Process’ theory. According to Lewin (1943), creating change tends to occur in three stages as depicted in Figure 3. These stages are now discussed in turn. Strategies employed to understand, plan for, initiate and sustain change are also identified and overlap with those highlighted in the discussion on ‘Leadership’ in Section Five.

Stage 1:

This is referred to as the ‘unfreezing’ stage in which the current situation is reflected on and assessed for its strengths and weaknesses. Any areas identified for improvement or requiring change are highlighted and broken down into the key elements of the programme. For example, we might do this by asking staff to consider the ‘ideal’ situation (e.g. what would we like to happen?) within the organisation and then reflect on the ‘actual’ situation (e.g. what is actually happening?). Other strategies might include:

- Assess individual’s/group’s readiness for change (see Tip Sheet 11 below);
- Encourage individuals/groups to reflect on their level of satisfaction with the current situation;
- Highlight any gaps between the ideal and the actual in terms of performance levels (e.g. by examining the achievement of specific outcomes, reviewing attendance rates or site visit data). Having a logic model to review will significantly help this process;
- Create a positive and realistic vision for the future.

Stage 2:

Support is required at this stage to produce a successful change. For example, an adequate amount of time should be dedicated to identify the resources necessary for staff to engage in the change process, including having a sufficient number of staff to carry out the task. Other strategies might include:

- Coaching and supervision, as well as opportunities for training (e.g. in reflective practice, group facilitation, evaluation) so that staff feel equipped to change;
- Ensure the drive for change comes from senior management;
- Encourage commitment to the impending change (e.g. is it in line with core values or current beliefs? Does it make sense? What are the potential benefits of this change?);
- Develop and improve change efficacy (yes we can!).

Stage 3:

The final stage sees the new or ideal situation being bedded-down or stabilised. Stabilisation of new processes, systems or procedures requires ongoing training, support, and reinforcement from the organisation’s leader(s). The following strategies are in line with Lewin’s (1943) processes for change:

- Choose an effective leader;
- Provide coaching and supervision (this should be ongoing);
- Get buy-in from key stakeholders;
- Be patient!

The following example highlights some of the issues pertaining to organisational culture, management skills and approaches and staff monitoring.

If we want things to stay as they are, things will have to change. Giuseppe di Lampedusa

Also informed by Armenakis, Harris, & Mossholder, 1993; Armenakis & Harris, 2002; Bahrami, 1992; Claver et al., 1999; Elby et al., 2000; Hardison, 1998; Narine & Persaud, 2003; Smith, 1998; Susanto, 2008; Umiker, 1999.
The following questions may facilitate useful discussion:

- What did you learn about yourself through this process?
- What did you learn about others?
- What strengths have you identified which you had previously under-estimated? Can these be further enhanced?
- Are there any areas you would like to focus on? What actions can you plan for?

Another activity, which again can be undertaken either individually or as a team, is consideration of the short book "Who Moved by Cheese" (Johnson, 1998). Through a simple story about mice, it highlights common responses to change, and so creates awareness of our own behaviours. The questions above can equally apply to a discussion of the book, with the additional suggestions:

- How does this learning inform my practice?
- What would support me in embracing change more positively?
- How can I better support my colleagues, knowing what I now know?

Organisational Change

Assessing readiness for change requires consideration of organisational context, personal characteristics, and resources available. The following may help:

Organisational readiness for change:

- How ready are you or your staff are to deal with a new situation?
- Do you anticipate any challenges or barriers?
- What will help the organisation to embrace change in terms of structure? Training? Resources?
- Who is going to lead the change? Does it have a champion?

Individual readiness for change:

There are a variety of psychometric tools which can support the assessment of individual readiness for change. The following instruments are useful in measuring the adaptability or readiness for change aspects of emotional intelligence and may be accessed through the following website: http://www.eiconsortium.org/measures/eqi.html.

- Bar-On’s (2006) Emotional Quotient Inventory (EQ-i) consists of five subscales relating to emotional intelligence, including an ‘adaptability’ scale, assessing ability to be flexible and adapt to new situations, as well as ability to problem-solve intrapersonal and interpersonal issues;

- The Trait Emotional Intelligence Questionnaire (TEIQue) developed by Petrides & Furnham (2006) is a 32-item questionnaire designed to measure emotional intelligence including adaptability, self-motivation, and stress management.

If your organisation undertakes the process of completing these, or similar processes, using the information to improve awareness, skills and behavior is critical. Managers need to ensure that this is undertaken with a focus on positive learning, rather than deficits or weaknesses. Engaging individuals in considering the learning from the process, and how it can inform their practice, is essential. This can be done either individually at supervision, or at a group level.
CASE STUDY No 3: Change Process

The ‘Centre for Supporting Adolescents’ (CSA) is a small, not-for-profit organisation, seeking to improve mental health outcomes for young people in the community. The recent economic crisis in Ireland and the resultant cuts to funding for small organisations such as CSA has necessitated it cutting back on a number of its services. One of the main programmes delivered to young people called ‘Our Lives, Our Confidence’: focuses on building their self-confidence and self-esteem. While the majority of participants report getting on well with the facilitators, and improvements in how they feel about themselves in the short term, these improvements are not maintained. They know this because of the number of participants who require specialist services when they’re older. It’s also turning out to be less cost-effective than originally thought and with cuts to funding imminent, the organisation needs to decide which programmes to stick with and which to let go of.

The manager of the organisation undertakes a review of the research evidence on building confidence and self-esteem among young people and realises that part of the issue is the failure of the existing programme to involve opportunities for meditation. Based on this, the manager decides that a different approach is needed in order to improve the outcomes for participants.

What the manager did:

Over lunch, the manager suggests the idea of delivering a number of sessions on meditation as part of the ‘Our Lives, Our Confidence’ programme. She is met with a few nods, ‘hmms’ and ‘haws’ around the table before taking it to her Board of Management for approval. Over the month, the manager signs all facilitators of the programme up to a 2-day training course on meditation. Not everyone is enthusiastic about the idea of sitting in silence with their group of young people. Most feel that things are already difficult enough and there is so much content to get through – now this?! As the first month of delivering sessions on meditation rolls out, the manager notices that some staff are directly or indirectly reporting negative feelings or thoughts about these changes to the programme. Indeed, there is a noticeable increase in sick leave. Over the next three months, the manager observes a decrease in participation rates as well as low staff confidence.

What the manager might have done:

Unfreeze Conduct an inclusive consultation process with staff in terms of the added value in changing the programme/their practices. Undertake an assessment of their readiness to change.

Change Develop or revise the logic model, to incorporate this new programme element. Provide staff with sufficient training in meditation practice and ensure they understand it’s evidence basis, and ongoing supervision to support them through the change process.

Freeze Develop guidelines and procedures for integrating the change into the programmes’ daily activities. Build in opportunities for review and reflection.

4.6 Organisational requirements

So what is needed in order to effect organisational change? What can I do, as a manager, to support this change? Following are some suggestions and recommendations to put in place in order to support organisational change.

4.6.1 Policy

Whilst there are many forms of policy (e.g. national vs internal), and the processes used to develop, implement and monitor them vary widely, policies should be underpinned by the following understandings:

- It creates a framework for action;
- Its development is an ongoing process which requires review;
- It is a statement of a decision;
- It is grounded in legitimate authority;
- It is a written product;
- It is in the hearts and minds of people;
- It needs to be acted on i.e. implemented. It’s implementation will be monitored through agreed mechanisms;

In developing policies which support quality delivery, and improved outcomes, consideration needs to be given to the organisation’s existing policies and ethos. They also need to be realistic and implementable. Policies which support these processes include those relating to staff supervision, and decision-making.

4.6.2 Service Delivery Plans

The importance of having a service delivery or business plan cannot be over emphasised. A delivery, business or action plan is the road map of a service’s aims and objectives. Building on the logic model for individual programmes, it should contain measures and timeframes for completion, to enable the practitioner and/or manager to ‘stay on course’. There are many examples and templates of plans, but the most important part of the plan is its development and ongoing monitoring.

Service plans should be designed by and with all staff members. All staff should have an input into and fully understand the purpose of the plan. Setting realistic aims and objectives is important, as a plan which is unachievable will reduce its value and relevance whilst also contributing to demotivation and poor staff morale.
Ensuring that agreed tasks are realistic will be enabled by clarifying who leads the action, what supports they will need to complete or progress it (e.g.: expertise, training, co-facilitation, planning time) and the timeframe for completion. Having short and medium term indicators will also facilitate this, as this will both provide a way of breaking down the action into “bite-sized” tasks, and enable the early identification of difficulties. The Case Study below offers an example of how this might support quality delivery and reflective practice.

Regular review of the service plan, either through team meetings, governance structures or one-to-one supervision is important, to ensure that it remains relevant and offers a mechanism for maintaining a focus on agreed aims and objectives.

### CASE STUDY No 4: Developing a Service Plan to Support Quality Delivery and Improve Outcomes

Following a conversation between the Garda Juvenile Liaison Officer, the Home School Liaison Coordinator, and the Youth Service, it has been agreed that there is a significant concern regarding a group of 12–14 year olds. The Youth Service agrees to deliver a specific intervention to this group and incorporate this into their annual work programme. This is discussed at a team meeting, and some high level objectives are agreed upon. These included:

- To establish the membership of the informal group, and talk to other key organisations to ascertain who is already engaged with them;
- To make contact with the young people and begin the process of establishing a rapport;
- To undertake a needs assessment with the young people, and use this to inform a targeted intervention.

The above targets were included in the business plan, with appropriate monitoring mechanisms – see sample Business Plan below.

<table>
<thead>
<tr>
<th>Objective</th>
<th>Core Activities</th>
<th>Monitoring Mechanism</th>
<th>Lead Person</th>
<th>Short/Medium term targets</th>
<th>Timeframe for Completion</th>
<th>Lead Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establish membership of informal group, and talk to other agencies</td>
<td>Raise at next inter-agency network meeting; Have a list of names, ages;</td>
<td>Supervision</td>
<td>Daniel</td>
<td>Meet young people individually to talk to;</td>
<td>September</td>
<td>Daniel</td>
</tr>
<tr>
<td>Make contact with the young people and begin the process of</td>
<td>List specific agencies with whom they are engaged with;</td>
<td></td>
<td></td>
<td>Have checked with key organisations;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>undertaking a needs assessment with the young people, and use this</td>
<td>Have a list of names, ages, organisations engaged with;</td>
<td></td>
<td></td>
<td>Has contacted with key organisations;</td>
<td></td>
<td></td>
</tr>
<tr>
<td>to inform a targeted intervention.</td>
<td>Meet young people informally several times;</td>
<td></td>
<td></td>
<td>Agree when to meet.</td>
<td>October</td>
<td>Daniel</td>
</tr>
<tr>
<td></td>
<td>Suggest a meeting in Community Centre;</td>
<td></td>
<td></td>
<td>Undertake a needs assessment.</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Complete consultation;</td>
<td></td>
<td></td>
<td>Three focus groups with 12–14 year olds;</td>
<td>November</td>
<td>Daniel</td>
</tr>
<tr>
<td></td>
<td>Undertake a needs assessment;</td>
<td></td>
<td></td>
<td>Individual follow up as appropriate;</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Undertake a targeted intervention.</td>
<td></td>
<td></td>
<td>Meet parents and engage them in identifying needs;</td>
<td>January</td>
<td>Daniel</td>
</tr>
</tbody>
</table>

The above targets were included in the business plan, with appropriate monitoring mechanisms – see sample Business Plan below.
4.6.3 Staff Development Plans

If an organisation places value on quality service delivery, then it will value and be proactive in supporting staff, both within their role, and in their profession. Supporting staff has been covered in more detail in Section 3, but, it is worth re-emphasising it as an integral element of organisational change. Supporting staff development does not need to be resource intensive. As noted previously, with some creativity and use of networks, there are lots of ways to support staff in the event that a gap in knowledge or expertise is identified, or a new challenge/issue arises. For example:

- Quid-pro-quo arrangements with other organisations to provide specific training;
- Work shadowing for a short period in a specialist organisation;
- Seeking guidance and support from colleagues.

4.7 Conclusion

This Section described the need for, and importance of, organisational change. It looked at some of the challenges faced by practitioners and organisations, and highlighted strategies to overcome these challenges. A starting point is assessing readiness for change, which, when effectively undertaken, paves the way for practitioners and organisations to truly look at the need for and the ‘how to’ of organisational change. In order for change to be considered, welcomed and implemented, effective leadership is required. Section Five will look at leadership and its role in considering, implementing and driving change within organisations.
5.1 Overview

Leaders play a vital role in organisational activities and creating a shared vision among all staff members. Leaders exist at all levels of an organisation. Being an effective leader can be both rewarding and challenging. Traditionally, changes within organisations have been imposed on members, by those in roles of authority. Dictating change that involves staff altering their practice or behaviours can often be unsuccessful (Benyamin et al., 2006). The complexities of organisational change are discussed in detail in the previous section. A leader’s interactions with others can support or hinder organisational change (Benjamin et al., 2006). This Section explores definitions of leadership, qualities of a leader, behaviours and processes associated with effectively leading change. In addition, issues related to balancing leadership and management roles are discussed.

5.2 What is a leader?

Leaders are those individuals who, through social interactions, create a shared vision or purpose within an organisation (Berson et al., 2006). Leaders can facilitate a “process of change in thought and action, both individual and shared – embedded in and affected by the organisation” (Vera & Crossanm 2004, p224). Leaders can be in managerial and non managerial role positions, and may or may not hold positions of authority. While those who are not in management roles may not have the mandate to introduce change, they can act as a stimulus for change by working with and encouraging others in the organisation (Benyamin et al., 2006).

Leaders tend to be involved in adaptive and technical problems although many are a mix of both:

- Technical problems refer to those which require knowledge to find a solution using logic, intellect and expertise. For example: how to fix a computer that has crashed.

- Adaptive problems are those which require people to change their beliefs, behaviours, ways of working and so on, (Heifitz, 2004). These tend to be highly challenging for leaders, and are frequently characterised by disagreement regarding how to define the issue, values underpinning practice, and the possible solutions.
Leaders tend to place a greater emphasis on personal relationships than logic, and so Heifitz recommends the following strategies to offset any potential risk in managing difficulties in this way:

- Don’t do it alone;
- Keep the opposition close;
- Acknowledge people’s losses;
- Accept casualties;
- Accept responsibility for your part.

During times of organisational change, leaders face numerous technical problems, for example setting up a website; financing programmes; or providing appropriate technical training. However a range of adaptive problems will also inevitably be experienced, especially during change processes and attending to adaptive problems will lead to more thorough organisational change. Leaders addressing adaptive problems cannot use logic alone to reach a solution. Adaptive problems have many possible solutions, as they are complex and involve people’s beliefs, behaviours and emotions.

5.3 Leadership and organisational identity

Organisational identity relates to the group’s collective definition of the type of behaviours and beliefs that are considered acceptable or expected within the organisation. When leaders try to initiate change, they may cause a mismatch between desired change and the existing organisational identity. A key task for a leader is to support others to develop a new shared vision of how the organisation works. A shared vision can only be created if all members have an opportunity to shape the vision and actions required to achieve it.

The Case Study illustrates that a change being in line with research or best practice, may not be enough to convince individuals to change their beliefs or behaviours. Supporting people to change their values and ways of working requires leaders to genuinely engage in a process of collaboration where all team members contribute to the process. Section 5.4 identifies behaviours and approaches that are helpful when supporting change.

CASE STUDY No 5: Introducing Change

David tries to introduce a new way of supporting children’s participation in an organisation which in the past has had difficulty achieving this. The new approach is based on research and best practice. David holds a meeting to train the staff in on the new method of working. Below are some of the responses to the suggested change:

“This is not how we do things”. “We have always done things this way and it works”. “I don’t think it will work”. “I am qualified; I don’t need to do this”. “I am doing it the way I always have”.

David talks about how the research supports the new method of improving participation, but the team continues to voice many negative comments about the new method.

- Do you think the team is going to take on the new method of working long term?
- Do you think David handled the change effectively?
- What would you do differently in this situation?

5.4 Behaviours of effective leaders during organisational change

An effective leader facilitates change through building relationships, creating a shared understanding of purpose, strengths and barriers, and employing strategies that facilitate change. Section Four described in detail how organisations might initiate and support change processes. The discussion in Section Three on emotional intelligence is of particular relevance for leaders.

The following highlights key behaviours for those leading organisational change.

Relationships:

- Develop respectful relationships with your colleagues, volunteers and managers;
- Take on other people’s perspectives and incorporate their ideas;
- Acknowledge that you are asking others to do something that is difficult;
- Name the elephant in the room, that is, any issues that are impacting on the proposed change, which people are fearful of identifying. Do this with sensitivity and a focus on acknowledging fears, offering reassurance and finding solutions;
- Question norms, beliefs and provoke exploration of issues in a non-threatening way;
- Support people to look at the situation from different angles;
- Be clear about your role. How much is up for discussion? What are the boundaries? Is anything off limits?
- Be clear that the process is not about blame or identifying weakness, but rather improving understanding and agreeing how to progress.
5.6 Leadership style

There is no perfect leader. However by examining your current leadership style honestly and identifying strengths and areas for development, you can strive to be an effective leader, whatever your position in your organisation. Think about your behaviour patterns: what are the positive and negative aspects, in terms of effectively achieving targets, motivating people to be involved and supporting shifts in beliefs and behaviours? Tip Sheet 11 will guide you to reflect on your leadership style, whilst Tip Sheet 12 may help you identify how to balance your leadership and management roles.

5.7 Conclusion

Providing effective leadership through a change process requires skill and thoughtfulness. Reflecting on your leadership style and employing strategies to involve others in change processes is key. Motivating others to change beliefs and or behaviours requires tenacity and ongoing attention. The final Section of the Workbook will explore how to evaluate outcomes.
### TIP SHEET 12: REFLECTING ON YOUR LEADERSHIP STYLE

1. When someone does not share my view point, I tend to use logical reasoning to change their view point:
   - Almost Always
   - Sometimes
   - Every Once in A While
   - Rarely
   - Never

2. When someone does not share my view point I tend to try and understand their perspective:
   - Almost Always
   - Sometimes
   - Every Once in A While
   - Rarely
   - Never

3. I get people’s views before I introduce or suggest a change in work practices:
   - Almost Always
   - Sometimes
   - Every Once in A While
   - Rarely
   - Never

4. I tend to avoid naming difficult issues in order to get the task completed:
   - Almost Always
   - Sometimes
   - Every Once in A While
   - Rarely
   - Never

5. I name issues and take time to explore divergent view points:
   - Almost Always
   - Sometimes
   - Every Once in A While
   - Rarely
   - Never

6. I tend to control activities to ensure all targets are met by checking with people, or asking them to provide regular updates:
   - Almost Always
   - Sometimes
   - Every Once in A While
   - Rarely
   - Never

7. I encourage and support other team members to lead activities:
   - Almost Always
   - Sometimes
   - Every Once in A While
   - Rarely
   - Never

8. I am open and honest about factors affecting my organisation:
   - Almost Always
   - Sometimes
   - Every Once in A While
   - Rarely
   - Never

9. I tend to blame other people’s behaviours or views for issues within the organisation:
   - Almost Always
   - Sometimes
   - Every Once in A While
   - Rarely
   - Never

10. I allow ambiguity and take time to discuss issues before deciding on actions:
    - Almost Always
    - Sometimes
    - Every Once in A While
    - Rarely
    - Never

11. I try to come up with solutions quickly to keep the process moving:
    - Almost Always
    - Sometimes
    - Every Once in A While
    - Rarely
    - Never

12. I am good at balancing getting the job done with giving time for decision making:
    - Almost Always
    - Sometimes
    - Every Once in A While
    - Rarely
    - Never

13. I find it difficult to admit making a mistake:
    - Almost Always
    - Sometimes
    - Every Once in A While
    - Rarely
    - Never

14. I readily look for support:
    - Almost Always
    - Sometimes
    - Every Once in A While
    - Rarely
    - Never

15. I give praise and affirmation readily and publicly:
    - Almost Always
    - Sometimes
    - Every Once in A While
    - Rarely
    - Never

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Once you have responded to all of the statements, score them in the following way:

- Statements 1, 4, 9, 11 and 13 are indicative of a controlling style;
- Statements 2, 3, 5, 6, 7, 8, 10, 12, 14, and 15 reflect a facilitative approach;
- Try to identify overall what are your areas of strength and areas for development;
- Focus on practices that help you get the best from the resources at your disposal, including your staff and your time.
TIP SHEET 13: BALANCING LEADERSHIP AND MANAGEMENT

Review how you are balancing leadership and management regularly, through consideration of the following:

• Am I so action focused that I ignore concerns raised by staff?

• Am I so focused on motivating people that I don’t attend to targets and timelines

• Do I utilise team members’ skills and interests?

• Do I delegate appropriately and allow others to lead even if that risks allowing mistakes to be made?

• Do I take the time to check in with team members regularly about their perceptions on organisational activities and issues?

• Do I make assumptions about our collective goals and principles, or do I create space to consider these?
6.1 Overview

This Section provides general guidance in relation to conducting a valid, user-friendly and cost-effective evaluation of your programme. The evaluation process itself may be broken down into several sequential steps, each one involving a sufficient level of thought and planning to ensure the evaluation is of high quality. A list of useful websites on evaluation is included in Appendix I which we hope will offer tools and systems which enable the integration of evaluation methods, and so support quality service delivery.

6.2 Planning for and conducting a programme evaluation

How do we know when the intervention we are delivering is working well? How do we know when we have adhered to the essential components of the intervention and most importantly, achieved the intended outcomes? If we find that the intervention has been delivered effectively – great! If not, what happened? What did not go so well? What were the individual or contextual challenges? Did these differ across locations? If so, why?

If you are thinking about or planning to evaluate your programme, then you have already begun the process of thinking ‘evaluatively’. Conducting an evaluation of your programme in terms of both outcomes (the ‘why’) and the implementation process (the ‘what’ and ‘how’) is beneficial because the information and knowledge generated through it has the potential to:

1. Enhance the overall quality of your programme, thereby improving outcomes for the target group;
2. Motivate your staff through feedback and reflective practice;
3. Inform decision-making and strategy development (i.e. what elements of our work do we need to prioritise?);
4. Increase transparency and accountability to your key stakeholders (i.e. we are open to looking at how we can be more effective);
5. Maintain current or secure future funding by demonstrating that your programme is achieving its key objectives (i.e. that it’s working);
6. Inform policy and practice internally as well as at local and national levels.

‘If there is anything we wish to change in the child, we should first examine it and see whether it is not something that could better be changed in ourselves’. Carl Gustav Jung.
CASE STUDY No 6: Evaluation Planning

Background
In delivering services to pre-school children, and promoting health in primary schools, CDI identified the need for early speech and language therapy (SLT) interventions. This issue was raised by a number of practitioners, parents and school principals, and a model was developed drawing on national and international evidence of what works in the promotion of early speech and language development.

Key Programme Elements:
- To provide individual assessment and therapy to children, within the context of the child’s school or early years’ service;
- Delivery of a parent education programme and dissemination of ‘top tips’ to support your child;
- Delivery of accredited teacher/practitioner training.

Key Research Questions:
- Does the CDI SLT model positively impact on children’s speech and language development?
- Does the model impact on the proportion of inappropriate referrals to local specialist services?
- Is the level of non-attendance at assessment/therapy appointments reduced?
- Are teachers and early years’ practitioners better able to utilise practices to support speech and language development?
- Are parents drawing on the learning from the education programme, to support their child’s development?

Data to be Collected:
- Proportion of children requiring therapeutic interventions for 10 weeks or more, within the CDI service;
- Proportion of children requiring therapeutic interventions of 10 weeks or more within other, specialised services and HSE mainstream services;
- Referral information from local services: nature of referral; proportion of inappropriate referrals; proportion of appointments attended vs. non-attendance, compared with retrospective rates and/or comparing the CDI service to other services e.g. HSE, diagnosis;
- Teachers, parents and early years’ practitioners’ awareness of methods to support speech and language, pre- and post- intervention.

Methodology:
- Trawl of records, anonymised and with consent;
- Individual and/or focus group interviews with teachers, early years practitioners;
- Site observations in classrooms, early year’s settings.
6.3.2 ‘Insourcing’

On the other hand, there may be elements of the evaluation you or your staff prefer to undertake internally (e.g. gathering referral data or tracking attendance rates) while handing over some of the more technical aspects of the evaluation (e.g. analysing the data) to the external evaluators. Miller et al. (2006) propose an ‘insourcing model’ for community-based organisations as a way of conducting a relatively economical yet sustainable evaluation, while at the same time, minimising the burden on staff. The insourcing model requires an understanding of and commitment to the evaluation from programme staff, encouraging them to focus on the evaluation findings rather than on the technical aspects of the evaluation. In this case, the evaluator is assigned the task of identifying suitable instruments, developing data collection protocols, analysing data, and writing up reports (Miller et al., 2006). The model is economical in that it is premised on the contracting of a single evaluator whose task is to work with the organisation, both individually and as a group, in order to develop a logic model, identify appropriate “instruments” (i.e. structures or surveys), develop data collection protocols for staff, analyse the data and write the evaluation reports.

6.3.3. Internal evaluation

Finally, it may be decided to conduct the entire evaluation internally, especially in the absence of sufficient resources. It is good practice to ensure that there is ongoing monitoring of outcomes and processes, in order to maximise the impact of the interventions, and internal evaluation will of course, support this. Though Miller et al. (2006) argue that this is the least sustainable approach, there is evidence to suggest that with careful planning and a focus on increasing staff capacity to undertake an evaluation, we can all engage in meaningful and good evaluation practice that becomes sustainable in the long term. The following steps provide guidelines for undertaking a programme evaluation and are based on the assumption that a logic model has been developed for the programme (see Section Two for further information). If this is not the case, developing the logic model can be the first step in the evaluation process.

6.4 Designing, developing and conducting a programme evaluation.

6.4.1 Capacity-building

The first step is to take some time for you and your staff to become familiar with evaluation practice and thinking evaluatively. Preskill & Boyle (2008) propose a model of ‘evaluation capacity-building’ which not only seeks to help programme staff learn about and engage in good evaluation practice but may support the sustainability of evaluation within an organisation. Interestingly (and some readers may be even relieved by this!), the teaching and learning strategies employed to up-skill staff in relation to evaluation are similar to the ‘implementation drivers’ referred to in Sections Three, Four, and Five of the Workbook which means that you may already have some of the following strategies in place to support the evaluation of your programme:

- Internship (practical experience in evaluation);
- Written materials (e.g. literature on previous evaluation studies, documents on evaluation processes);
- Technology (accessing websites and e-learning courses on evaluation);
- Meetings (creating a space for discussing evaluation);
- Appreciative inquiry (focusing on the positive aspects of the organisation through collaborative thinking and learning);
- Communities of Practice;
- Training and awareness raising (attending activities and events on evaluation);
- Involvement in an evaluation process (participating in the design and/or implementation of an evaluation);
- Technical assistance (receiving support from an internal or external expert in evaluation);
- Coaching or mentoring (Preskill et al., 2008).
6.4.2 Clarify the purpose of the evaluation and identify key questions

The next step is to decide what you would like to evaluate. For example, would you like to:

- Determine the effectiveness of the programme (e.g., were there positive changes in outcomes for the target group after one year?);
- Improve the implementation of the programme by examining which aspects of the programme were or were not delivered as intended and the reasons for this;
- Examine the cost-effectiveness of the programme in terms of whether the benefits produced by the programme outweigh the costs;
- Or all three?

Once you are clear on what you want to evaluate, you need to think about the key questions you would like the evaluation to answer. In other words, what would you like to find out? What is it you would like to know? These questions may be broken down further into outcomes (i.e., changes in attitudes, knowledge, or behaviour) and processes (i.e., what worked and why?).

In terms of outcomes, you might want to determine whether there are demonstrable improvements in the areas the programme is targeting. For example:

- Does the programme lead to improvements in children’s perceptions of safety in their community? If not, why? What did we learn?
- Are there improvements in children’s reading (e.g., comprehension, spelling, and vocabulary range) and writing?
- Does training delivered to parents have an impact on their knowledge and skills in managing parent-child interactions and discipline? Has this impacted positively on their parenting style?

Similarly, you might want to examine the way in which the programme was implemented. For example:

- Was the programme delivered with consistency across locations? If yes, what helped? If not, why not?
- Were all the required sessions delivered to the group (i.e., was the ‘dosage’ right)? If not, why not? What were the challenges?
- Did all of the participants attend? Why/why not?
- What capacity building activities, events, training, for staff occurred via the programme?
- What factors influenced fidelity to the programme?

6.4.3 Identifying key indicators

In other words, what information will tell us what we want to know? For example, if we go back to the research questions in Step 3, then indicators might be:

- Does the programme lead to improvements in children’s perceptions of safety in their community? Possible indicators: (i) greater proportion of children report feeling safer in their community upon completion of the programme compared to the beginning of the programme; (ii) children report engaging in more extracurricular activities outside the home; (iii) parents note their children are playing on the local green more.

- Are there improvements in children’s reading (e.g., comprehension, spelling, and vocabulary range) and writing? Possible indicators: (i) difference between children’s ability to complete a specific reading task at the beginning of the programme compared to ability to complete the task at the close of the programme; (ii) teachers are indicating that children are participating more in reading activities during class time; (iii) absence of poor handwriting.

- Does training delivered to parents have an impact on their knowledge and skills in relation to parent-child interactions and discipline? Possible indicators: (i) parents are reporting more positive interactions with their children at the end of the programme compared to when they began the programme; (ii) children are reporting more consistent disciplinary responses from their parents.
6.4.4 Measuring Fidelity

In terms of measuring fidelity to the programme, Dane & Schneider (1998) identify the following five indicators (signs):

- **Adherence** (i.e. was the intervention or elements of the intervention delivered as intended? Were there any changes to the intervention, however small?);

- **Exposure** (i.e. were the intended number of sessions delivered or the prescribed “dosage” received? Were there any elements of the intervention skipped over? If so, why?);

- **Quality** (i.e. how was the programme or intervention delivered by staff? Did staff maintain their professional standards? Were they committed and motivated?);

- **Participant responsiveness** (i.e. Were service recipients engaged? Were they encouraged to participate? Were there any elements of the intervention that participants were more engaged in than others? If so, why?);

- **Programme differentiation** (i.e. how did the programme differ to other programmes? What were those key differences?).

6.4.5 Sources for information

Identify the appropriate source for the information you intend to seek.

- For example, we may choose to gather data from children, young people, parents, programme staff, service managers, teachers, School Principals, etc.;
- Consider the number of participants;
- Do you intend to offer any incentives for participation (e.g. a certificate of achievement for children who complete a questionnaire);
- Who is required to give consent? For example, you will need to gain consent from parents of children and young people under 18 years. Children and young people aged under 18 years should of course have the opportunity to voice their agreement to participate;
- Do you anticipate any challenges in terms of securing consent?

6.4.6 Evaluation design

What will the evaluation design look like? For example, consider undertaking a pre- and post-programme evaluation where information is collected from participants before and after programme delivery. This will allow you to determine whether the key outcomes change as a result of your programme of activities. The Case Study below is based on this type of evaluation design.

6.4.7 Methods and instruments

Adopt what is referred to as a ‘mixed methods’ approach (i.e. using a range of methods in order to gather the information). Examples might include conducting surveys, individual and/or focus group interviews, site observations and case studies. Ensure that the methods employed are age, literacy, and culturally appropriate to your participants. In addition, we recommend drawing on information such as minutes of meetings, progress reports, or observational notes, to provide important contextual information about programme implementation to aid with the interpretation of your outcomes.

In terms of instruments (what tools will we use to collect information/data?), identify those which will most closely measure your programme’s outcomes (e.g. changes in attitudes, behaviour, and so on). A good way to do this is to undertake a brief literature review of evaluations of similar programmes or outcomes to see what instruments they used. The CES can also offer advice. Other things to consider in relation to data collection and your instruments include:

- Consider the length of time it will take an individual or group to complete the instrument. Anything over two pages might be considered too much depending on who the participants are;

- Use standardised instruments (i.e. those that have been demonstrated to be reliable in previous studies) to allow for comparisons between your participants and participants from other studies;

- Consider whether you and/or staff will require training to administer the instrument(s). You might be already familiar with completing forms with parents, children and staff which provides you with a good head start, but some standardised instruments require specific training;

- In terms of interview schedules, think about the questions you would like to ask participants. Consider whether the questions make sense and will provide you with the information you are seeking. Referring back to your logic model, and the programme objectives will help you to stay focused;

- Recognise that collecting the data is only one part of the evaluation. It has to be mapped, analysed and interpreted, so be focused in what you collect or you might drown in it!
CASE STUDY No 7: Internal Evaluation of a Literacy Programme

Doodle Den is delivered to 5-6 year old children for 1½ hours, three times a week after school. There is also a parent element to the programme which consists of six parent sessions delivered over the course of the year-long programme. The programme is in its second year of implementation and the service manager feels it is time to assess whether the programme is having an impact on key outcomes and if not, why not. The key outcomes include reading comprehension, word recognition, picture recognition, sounds, and writing.

Consent
Consent will be sought from the child’s primary caregiver. Assent will also be sought from the children.

Research questions
The manager would like the evaluation to answer the following three questions:

1. Is the programme showing improvements in the groups’ reading and writing skills after one year?
2. Does training delivered to parents impact on their knowledge, motivation and capacity to engage in literacy activities with their children?
3. Is the programme being implemented as intended? Are facilitators maintaining fidelity to the core components of the programme?

Agreed indicators
The following indicators are identified by the manager in collaboration with programme staff and/or the developer of the programme, and are intended to answer the research questions:

1. A greater number of children will show improvements in their reading ability including their reading comprehension, word recognition, picture recognition, and sounds, upon completion of the programme compared to at the beginning of the programme (outcome);
2. A greater number of children will show improvements in their writing ability including spelling, as well as the appropriate use of spaces between words, capital letters, and syntax upon completion of the programme compared to at the beginning of the programme (outcome);
3. Parents will report increases in their capacity to support their child’s literacy development upon completion of the programme compared to at the beginning of the programme (outcome);

6.4.8 Data collection
- Develop a chart or use a calendar to identify key data collection points in the evaluation i.e. when will we collect information?
- Develop a system of record-keeping within the organisation to track attendance rates and to keep minutes of meetings in one file;
- Store all confidential data in a locked filing cabinet and on a password-protected computer.

6.4.9 Data input and analysis
- Create a simple data entry template in Excel that will have all of the items in your instrument(s) or all of the questions in your interview schedule (see Table 3 which is an example of a data template);
- Ensure the relevant staff complete this template as part of their duties;
- Consider what technical knowledge you and/or staff will need to analyse the data. For example, some instruments will have different ways of scoring participants. A literature review of your instruments will provide you with the necessary information to read and interpret scores and apply the learning, or a local third level institution may have post-graduate students who would be willing to help with this.

6.4.10 Feedback, consultation, interpretation and dissemination
- Invite key stakeholders to participate in interpreting and analysing the information, thereby increasing the credibility of the findings;
- Disseminate the findings to a wider audience;
- Archive the data for future use (seek consent for this at the beginning).

TABLE 3: Data Template

<table>
<thead>
<tr>
<th>ID (CHILD 1)</th>
<th>ID (CHILD 2)</th>
<th>ID (CHILD 3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age of child</td>
<td>Gender</td>
<td>Reading (comprehension)</td>
</tr>
</tbody>
</table>
CASE STUDY No 7: (cont’d)

4. Number of child and parent sessions delivered by programme staff (process);

5. Child and parent attendance rates (process).

How the data will be collected

Based on a brief literature of similar programmes, children attending the programme will be directly assessed by programme staff. Parents will also be asked to complete a brief questionnaire on their child while staff themselves will be requested to track dosage and attendance rates for both children and parents over the course of the programme. Information/data will be gathered at the beginning (baseline), middle of (mid-phase), and upon completion (post-test) of the programme in order to determine whether there were any improvements in the outcomes for children and their parents.

Instruments

CHILD

Previous research on children’s literacy used a well-recognised reading and writing test to measure children’s reading comprehension, word recognition, picture recognition, and sounds. Children will also be asked to write 3–4 lines under ‘Your News’. They will be scored on:

✓ Spacing between words;

✓ No reverse lettering;

✓ Spelling as per sounds (also referred to as ‘inventive’ spelling);

✓ Appropriate use of capitals and full stops.

An example of writing will be provided at the beginning of the exercise. Lines will also be provided for the task. These instruments will be implemented at the beginning and end of the programme and comprehensive training will be provided to staff in order to support them in using the instruments and gathering the data in an appropriate way. Children will also be asked to complete a ‘client satisfaction’ survey half way through the programme to assess their perceptions of the programme content as well as the staff delivering the programme. The manager determines that this information will be important for various reasons including providing useful information for reflective practice.

PARENT

Parents will be asked to complete a 2 page questionnaire designed to gather information on the child’s behaviour as well as the home learning environment. These are completed during the first or second parent sessions. Parents are also given the option of completing the questionnaire at home and submitting it to programme staff at the next parent session. In addition, parents will be invited to participate in a short interview about their experiences of the programme and their child’s literacy development.

Procedures for conducting the child assessments

Pre-tests (*conducted by programme staff)

1. Start with a 10 minute snack;

2. Part 1: children are asked to complete the ‘Your News’ task (10–15mins);

3. Part 2: children are asked to complete the ‘attitudes to reading’ section (20mins);

4. Break to include a game (but not a ‘hyper’ game). A memory or word game would be good (10 mins);

5. Part 3: children are asked to complete the ‘pictures & words’ section (40mins);

6. Conclude by:
   a) Awarding a small prize to each child;
   b) Informing the children that they won’t be doing this type of activity in every session.

Mid-tests (*conducted by non-programme staff)

1. Start with a 10 minute snack;

2. Part 1: Children are asked to complete the first part of the client satisfaction survey which examines the peer-peer relationship (10-15mins);

3. Break to include a game (but not a ‘hyper’ game). A memory or word game could be used (10 mins);

4. Part 2: Children are asked to complete the second part of the survey which explores how the child is getting on in the programme from his/her perspective (10-15mins)

5. Conclude by:
   a) Awarding a small prize to each child;
   b) Informing the children that they won’t be doing this type of activity in every session.

Post-tests (*conducted by programme staff)

1. Start with a 10 minute snack;

2. Part 1: children are asked to complete the ‘Your News’ task (10-15mins);
6.5 Ethical issues

Once you are confident that your evaluation methodology is thorough, it is good practice to seek ethical approval to conduct the evaluation from a recognised ethics committee. If you are commissioning an independent evaluation team, it is their responsibility to secure ethical approval from their own research ethics committee. For an internal evaluation, it might be helpful to consider the code of human research ethics put forward by the Psychological Society of Ireland (www.psihq.ie) and the National Disability Authority (www.nda.ie) as a start.

Finally, it is also important that you ‘pilot’ or test your evaluation methods with a small sample of participants (both adults and children). For example, to determine whether your instruments are age appropriate and provide you with reliable and useful information; and whether the interview questions are valid and comprehensible.

Other issues to consider:

- Find a space that is appropriate to assess/interview participants;
- If you are conducting group assessments, consider the ratio of fieldworkers (or staff) to participants;
- Review length of time to administer instruments.

The web addresses in Appendix 1 offer other relevant information on fidelity instruments as well as a user’s guide. These instruments may be adapted to suit the type of intervention you intend to or are currently delivering.

6.6 Conclusion

This Section provided guidance in relation to conducting an external, independent evaluation, and an internal and cost-effective one. It worked through a series of steps providing tools and examples along the way to help service managers and/or staff develop a valid evaluation plan drawing on existing resources within the organisation. A Case Study described an example of how an internal evaluation of a literacy programme might be feasibly undertaken, drawing together a range of methodologies and strategies described above.
7.1 Conclusion

This Workbook was initiated as the result of CDI having struggled with a steep learning curve in relation to implementing evidence-based programmes, and supporting quality delivery, and our desire to share the learning resulting from this phase. Through our work in Tallaght West, CDI has come to understand some of the core principles, required supports and effective structures which enable these processes to become established and integrated into the daily business of organisations working with children and families. This Workbook has brought you through some of the theory underpinning the delivery of quality services; it has connected that theory to practical tools which can be readily utilised in a range of settings; signposted you to other sources of information, and ultimately we hope that it offers you the motivation and encouragement to consider your own practice, enhance your organisational context and possibly take on a leadership role in promoting the delivery of services which optimise the potential for positive outcomes.

We have been inspired by the energy and commitment of those with whom we work; challenged by the new language and approaches, but ultimately driven by the insight and evidence that there really are relatively simple mechanisms which can deeply impact how we do our work, and ultimately, outcomes for our target groups. We very much hope that this Workbook gives you a similar sense of passion for making change, the skills for doing so, and the knowledge that what we do, and how we do it, can really make a difference.
Appendix I

The web addresses below offer other relevant information on fidelity instruments as well as a user’s guide. These instruments may be adapted to suit the type of intervention you intend to or are currently delivering.

- [http://researcherswithoutborders.org/foi_users_guide/COPOverview](http://researcherswithoutborders.org/foi_users_guide/COPOverview)
- Enhancing Program Performance with Logic Models, University of Wisconsin: [http://www.uwex.edu/ces/lmcourse/](http://www.uwex.edu/ces/lmcourse/)
- Innovation Network (for planning and evaluation tools): [www.innonet.org](http://www.innonet.org)
- The Centre for Effective Services (What Works Process): [www.centreforeffectiveservices.org](http://www.centreforeffectiveservices.org)
- Psychological Society of Ireland: [www.psihq.ie](http://www.psihq.ie)
- National Disability Authority: [www.nda.ie](http://www.nda.ie)
- Childhood Development Initiative: [www.twcdi.ie](http://www.twcdi.ie)
- ‘Enhancing Program Performance with Logic Models’ at: [http://www.uwex.edu/ces/lmcourse/](http://www.uwex.edu/ces/lmcourse/)
- Guidelines for archiving: [www.iqda/raccer](http://www.iqda/raccer)
Section 8
Additional Information
Glossary of Terms

Baseline
Information about a situation prior to a programme or intervention.

Booster Training
Follow-up training for practitioners subsequent to, and complementary of, initial training.

Evidence-Based Programmes
Programmes which are based on research evidence and are proven to work.

Fidelity
The degree to which a programme is delivered compared to the essential elements of the original programme.

Logic Model
Explains why a programme works. Usually it is based on rigorous research and testing or by careful service design, using high-quality local and international research.

Outcomes Evaluation
Measures the impact of a programme or intervention in terms of whether it achieved its intended outcomes.

Process Evaluation
Assesses how a programme was delivered, whether it was implemented effectively and if not, why not.

Programme Adaption
Adapting specific core elements of a programme or intervention in response to individual, organisational, social, cultural, or environmental needs.

Programme Implementation
Implementing a programme with the target group.

Quality
The standard of something as measured against other things of a similar kind.

References


