



Theory of Change

Tuesday 19th October 13:00-14:30

Welcome everyone! Please type in the chat box

- your name
- your role
- where you work



Please mute your microphone to avoid background noise



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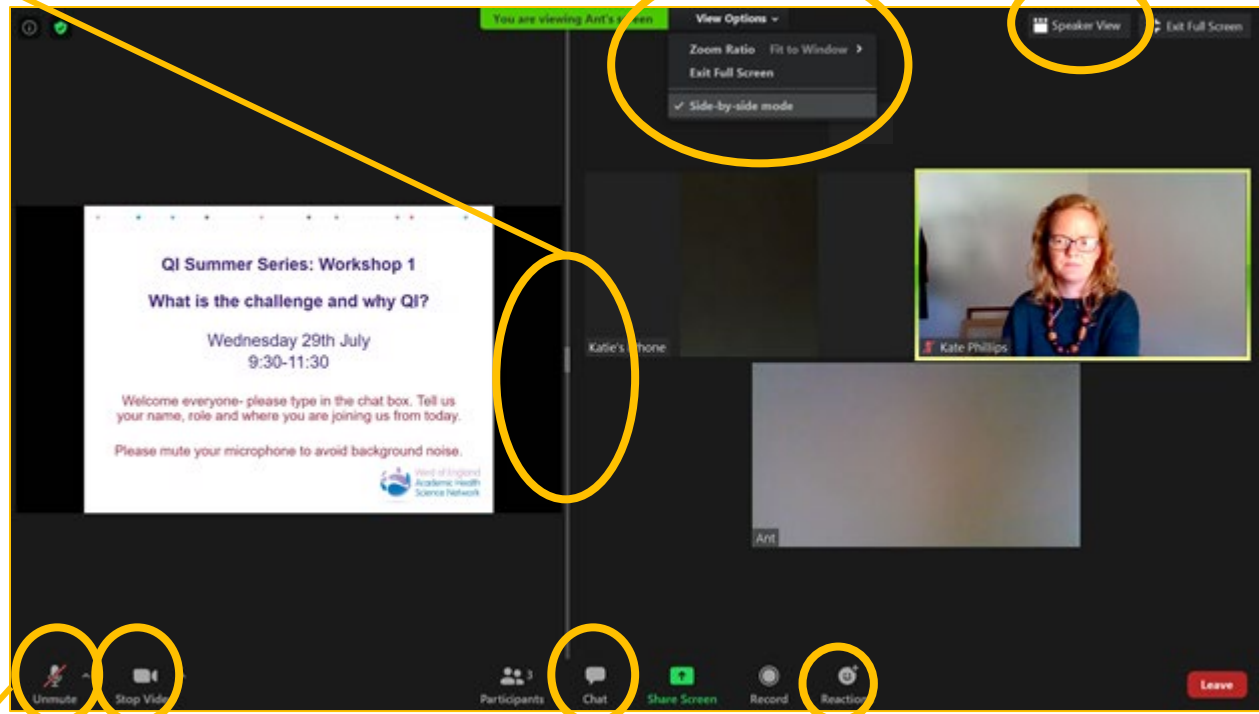


Hover over the grey line in the middle and drag it to the side.

This will expand and shrink the slide view.

“View Options” and select “side by side mode”

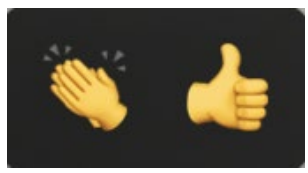
Speaker view or gallery view.



Microphone

Camera

Chat box- please use this for questions



Reactions

Today's team



Kate Phillips, Senior Project Manager, West of England AHSN



Abby Sabey, Training & Capacity Building Co-Lead, NIHR ARC West & Senior Lecturer, UWE Bristol



Genevieve Riley, Senior Programme Manager (Insight & Evaluation), West of England AHSN



Lou Hall, Evaluation Lead, South West AHSN



Dr Jackie Chandler, Evaluation Programme Manager (qualitative specialist), Insight Team, Wessex AHSN



Emily Hunter, Senior Programme Manager Insight, Wessex AHSN



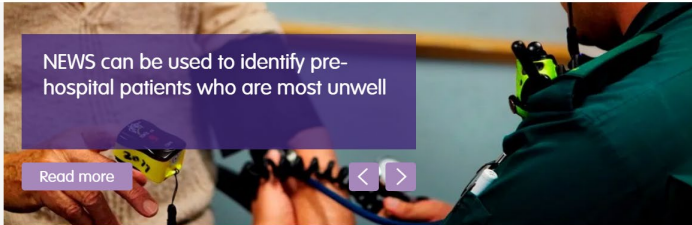
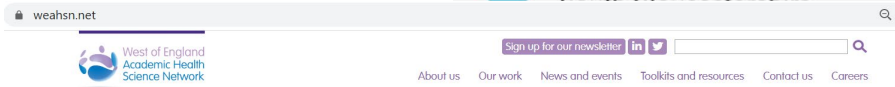
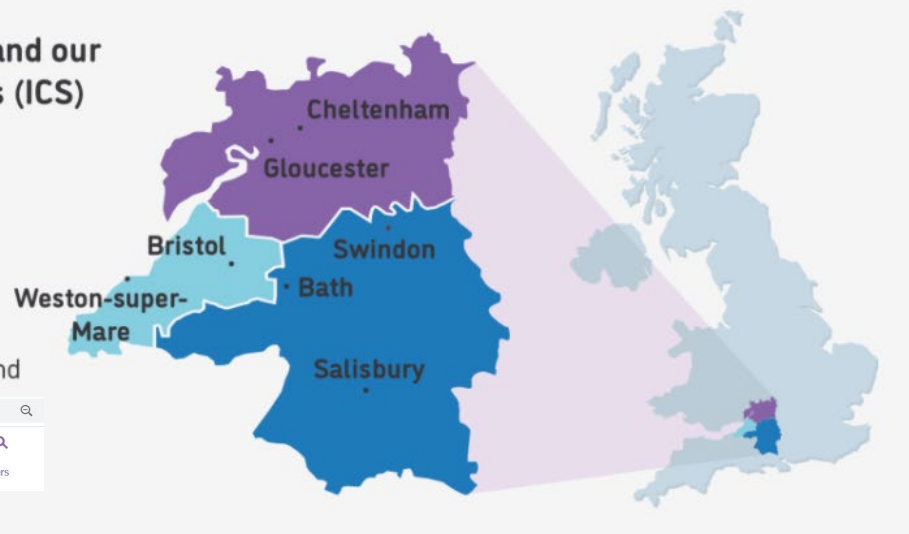
Dr Tom Marshall, Senior Specialist – Evaluation, Natural England



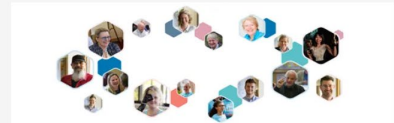
The West of England Academic Health Science Network (AHSN)

West of England AHSN and our Integrated Care Systems (ICS)

- One Gloucestershire
- Bath and North East Somerset, Swindon and Wiltshire Partnership
- Bristol, North Somerset and South Gloucestershire



www.weahsn.net
Newsletter link in follow up email



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Our Innovation Exchange provides the support you need at any stage of your innovation. Get access to all our business services in one place as well as local



The West of England Academy
Explore our free Academy resources to gain essential knowledge and skills for innovative thinking in healthcare. Our resources include events, toolkits and online



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ARC BITE

Brokering Innovation Through Evidence

What causes delays in discharging frail older patients from hospital?

June 2021



There are often delays in discharging elderly and frail patients from hospital. These delays can be upsetting for patients and families, and cost the NHS around £820m a year.

People who are elderly and frail are more likely to struggle after even a minor illness or a change in medication or environment. Once in hospital, older people are vulnerable to infections, falls, confusion, pressure sores, and malnutrition. Without their usual support, they might lose strength and the confidence to manage independently.

Discharging these patients can take longer as it often involves different professionals

and organisations. There are recommended ways to reduce delays, but these aren't always used across the NHS.

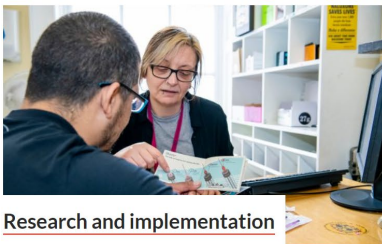
What was the aim of the project?

We wanted to find out what happens on hospital wards that might lead to delays in discharge. We also wanted to explore how to help hospital and community staff use our recommended improvements.

What did we do?

We worked with ward staff from two NHS hospitals in the South West and West Midlands, and community and social care staff. We observed the hospital stays of 37 patients over 80 with moderate to severe frailty, and spoke to patients, family members and staff about their experiences.

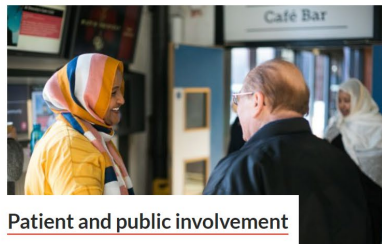
- Conduct applied health research with our partners in the health and care sector, alongside patients and members of the public.
- Aim to address the immediate issues facing the health and social care system in the West of England
- Help bring research evidence into practice and provide training for the local workforce.



Research and implementation

Our applied health research and implementation focus on projects on mental health, public health and prevention, healthier childhoods and integrated and optimal care.

[Read more](#)



Patient and public involvement

We are committed to a collaborative approach to patient and public involvement in research and the delivery of health care and services, through our partners People in Health West of England.

[Read more](#)



Training and capacity building

Our training and capacity building work promote development of skills in understanding, using a evidence for the health and social care, public health commissioning workforce, as well as the volunt

[Read more](#)

arc-w.nihr.ac.uk

Newsletter link in follow up email

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Our aims for today's session

- An introductory **understanding** of Theory of Change
- An understanding of **using** Theory of Change in practice
- An opportunity to **discuss** Theory of Change in small groups
- Signposting to online resources for **further info**.

Reflect at the end of the session:

- What could you put into practice tomorrow?
- What else do you need to research?



Tell us...

How confident do you feel with using Theory of Change?

Poll: 1-3

1 not at all, 2 with support and 3 very



Theory of Change

Genevieve Riley

Senior Programme Manager (Evaluation & Insight)

3 related concepts to introduce

- Theory of change
- Logic models
- Evaluation frameworks

What is theory?

Theory is an abstract description of the relationships between concepts that help us to understand the world!

Substitute 'world' for your programmes or interventions.

Theory can be supported by preliminary data or by a vast body of research - the more data supporting the theory, the stronger it becomes.

Theories can be..

- Descriptive (naming and characterizing a phenomenon)
- Explanatory (clarifying the relationships between phenomena)
- Predictive (predicting an outcome based on specific inputs)
- Emancipatory (articulating the oppression of a people)
- Disruptive (extending existing knowledge or refuting it)

ToC: What is it? What is it not?

- Sets out how something (e.g., a transformation programme) will deliver intended **change** by describing **relationships** between inputs, activities, outcomes & impacts (...**or not**)
- Specific to each change scenario (i.e. not a generic theory)
- Sometimes used interchangeably with 'logic model' (purists may object)
- Can take a hybrid approach (mix ToC with logic, stir gently...)
- Ideally based on multiple perspectives (co-production opportunity)

A good ToC can reveal..

- Whether there are things you do, that **do not** help you achieve your goals
- Which activities and outcomes you can achieve alone and which you cannot achieve alone
- How to measure your impact
- Whether your activities make sense, given your goals



How to create a ToC

- Should be informed by as many different view points as possible to make it thorough & robust
- You might hold a workshop, with an external facilitator (to be objective / manage strong opinions)
- **Stage 1: Identify a realistic and definite goal.**
- **Stage 2: Work backwards from the goal to work out the intermediate outcomes**
- **Stage 3: Establish the links between outcomes, and their order, by working out causes and effects**
- **Stage 4: Work out which activities lead to which outcomes**
- **Stage 5: Identify what else is needed for the intervention to work.**

Logic models: used to visualise relationships within ToC

- **Inputs** or resources (what you invest)
- **Activities** (what you will do)
- **Outputs** (what your activities produce—and for whom)
- **Outcomes** (goals to attain in short/ medium term)
- **Impacts** (longer-term or end-point results)

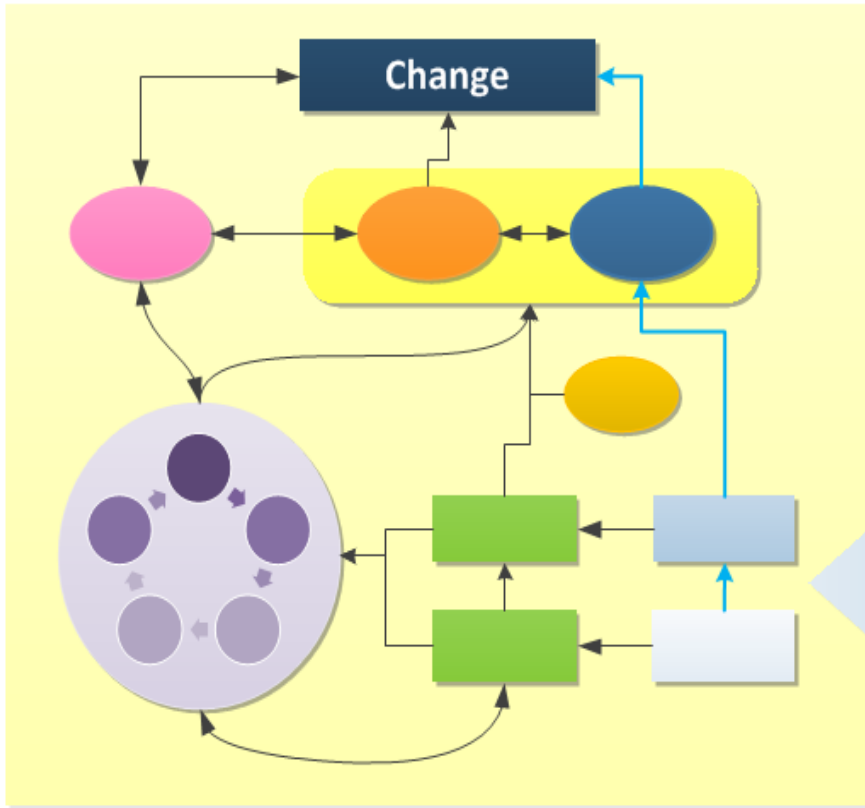
NB. It's OK (maybe even preferable) to work backwards

So how exactly are ToC and logic models related?

	Theory of change	Logic model
View	Wider (bigger picture)	Narrower (components)
Focus	All pathways to change	A change pathway
Sequence	Develop first?	Arises from ToC?
Presentation	Diagram + narrative	Flow chart or matrix
Appearance	Anybody's guess	Linear, can template
Causality assertion	Perhaps loose association	More detailed reasoning

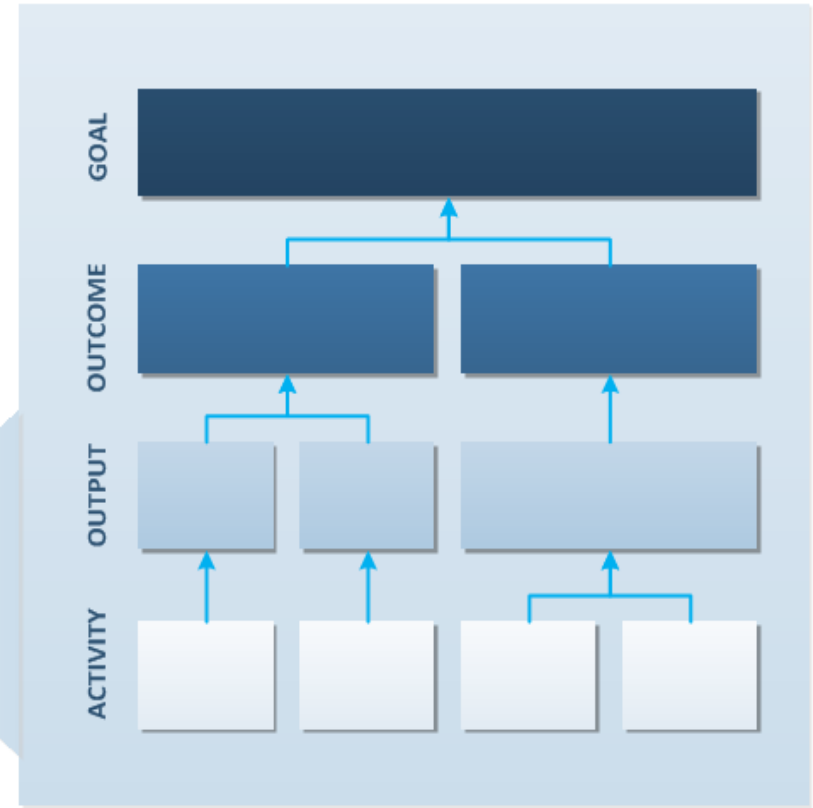
Theory of Change

Shows the big picture with all possible pathways – messy and complex



Logical Framework

Shows just the pathway that your program deals with – neat and tidy

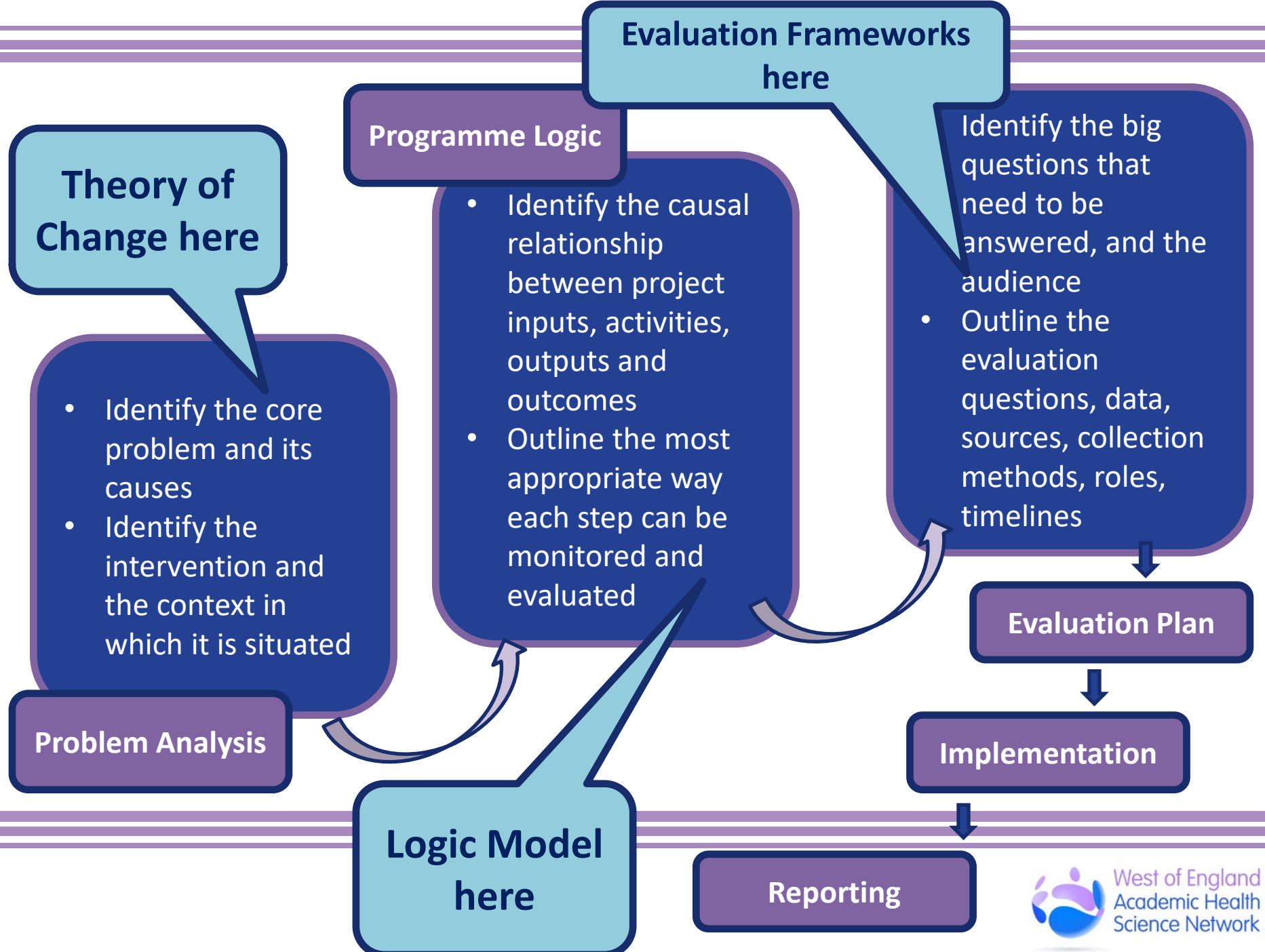


<https://whatworks.org.nz/logic-model/>

How does evaluation relate to LM or ToC?

- Evaluation involves **testing** of a theory of change
- Logic models can help populate a framework for evaluation:
 - What data to collect, at what point
 - What to prioritise, given limited evaluation resources
- Evaluation might concern any or all of:
 - Process (inputs, activities, outputs—fidelity of implementation, etc.)
 - Outcomes (short or medium term—what works, what doesn't, what harms, etc.)
 - Impact (longer-term outputs—overall cost-benefit assessment)

Note - there are other types of evaluation too



Dark Logic Models: theorising harmful consequences

- Young People's Development Programme (YPDP) was delivered across England with the aim of reducing teenage pregnancies, drug use and school exclusions for young people age 13-15. <https://jech.bmj.com/content/69/1/95>
- Teachers, social workers and other professionals identified those at risk of identified adverse outcomes, and them referred to their local programme.
- Youth workers to provide recipients with additional education, arts and sports activities, mentoring and other components.
- The evaluation was quasi-experimental, prospectively comparing 27 YPDP sites with 27 control sites matched by evaluators on region, deprivation and teenage pregnancy rates.
- Young people in control sites (n=1087) were recruited using similar processes and criteria as YPDP recruitment (n=1637), and were followed up at 9 and 18 months to examine self-reported outcomes.

What the evaluation found..

- Nearly four times as many pregnancies among girls in the intervention group than in the control group, almost three times as many young people engaging in sex and over twice as many young people truanting from school
- Attrition in the study was high because of the challenges in following up very vulnerable young people, but weighting increased the ORs of adverse outcomes
- Because of the large effect sizes that remained in all analyses, evaluators concluded that the intervention was at best ineffective and **probably harmful**
- The evaluators developed post hoc ideas about *how* the intervention might have caused harm, but had developed no a priori hypotheses about these and thus could not examine them quantitatively

Summary

- Theory of change describes pathways needed to get to where we want to go
- Logic model: think 'chain of reasoning'
- Consider / test all your assumptions both +ve and -ve (dark logic models)
- Evaluation is the process of testing the ToC
- Evaluation frameworks make use of logic models as planning aids



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Benefits of doing a Theory of Change

October 2021

Lou Hall
Evaluation Lead, SW AHSN

Working together to achieve
better health and wellbeing





Why Do We Evaluate?



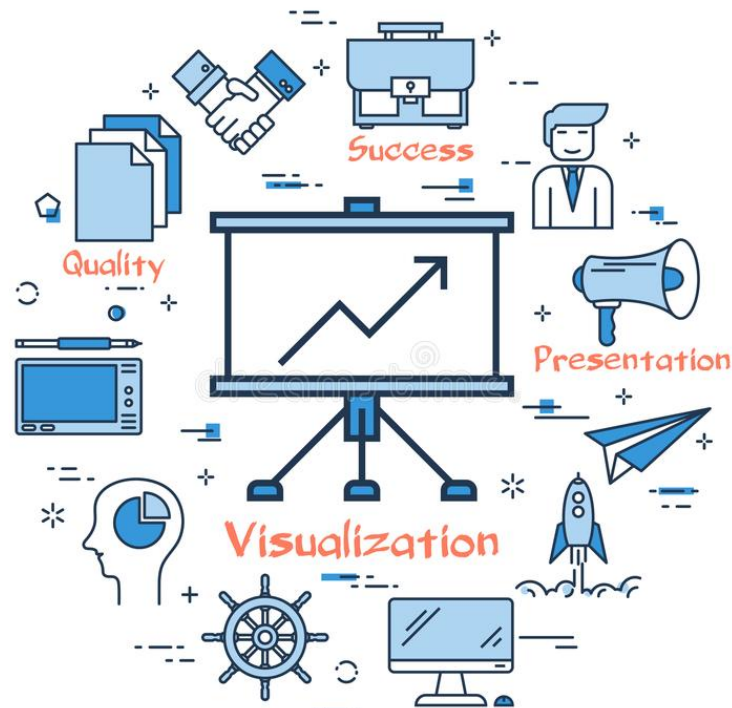
Before we invest millions, maybe we should test it and see if it works.



freshspectrum.com



But Evaluation is So Much More





Logic Model (stage 1 of the Theory of Change)

Problem: [Clearly articulate the problem the project is trying to solve. Include “who, what, why, where, when, and how” in your statement.]

Goal: [What is this project trying to accomplish? The answer to this question is the solution to your problem statement.]

Activities

[Activities are the actions that are needed to implement your project and achieve your outcomes.]

Outputs

[Outputs are the tangible and direct products or results of your project activities. Make sure your outputs have activities and resources associated with them.]

Outcomes

[Outcomes express the results that your project intends to achieve if implemented as planned. Outcomes could relate to patients, staff, organizations or systems during or after the project, but must be as a consequence of the project activities. It is important to remember that these outcomes must be within the scope of the projects' control or sphere of reasonable influence.]

Impact

[Impact is what you hope to achieve as a consequence of attaining your outcomes. Your project may have a less direct influence on impact, or maybe beyond the timeframe of your project].

Assumptions

[What are the conditions which your project needs to succeed? These conditions already exist and likely cannot be changed.]

Resource

[Identify the resources you need to deliver your project, this could be staff (paid and in-kind), equipment, materials.]

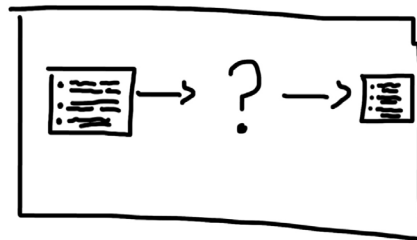


Bring Together Stakeholders





To Assume.....



Could you provide us with a little more detail on step two?

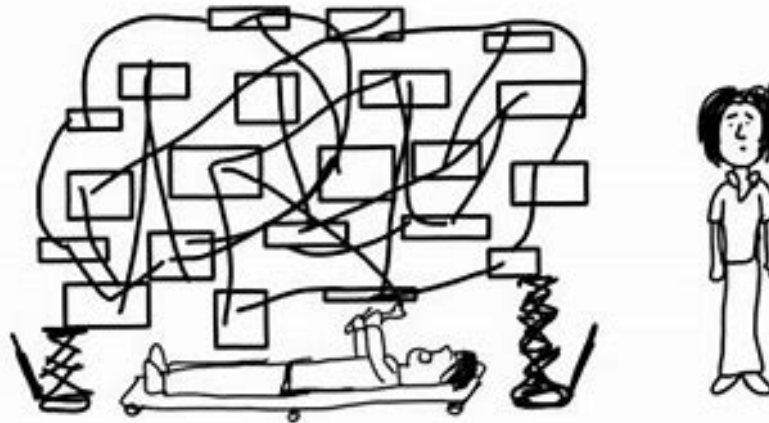




It is Complex, But Worth It!



At the logic model repair shop ...



So, I'm guessing this is for a comprehensive program-level intervention



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“Logic modelling” The Wessex AHSN approach

Emily Hunter
Jackie chandler

LOGIC MODELLING The Wessex AHSN approach



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Innovation Insight



LOGIC MODELLING AND THE THEORY OF CHANGE

Is a method to systematically make **connections** between project inputs activities, outputs, outcomes and impacts, and in evaluation and can involve 3 core processes:



Describes the **theory of change** of the “thing” and how it is expected to work (mechanisms of action).

COVID Oximetry @home

Pulse oximeters are being provided to patients supports people at home who have been diagnosed seriously unwell.

Describes the **plan to implement** the “thing” e.g. implementation strategies



Describes the **plan to evaluate** the ‘thing’, to explain whether it,
a. it worked as expected
b. it was implemented as planned.





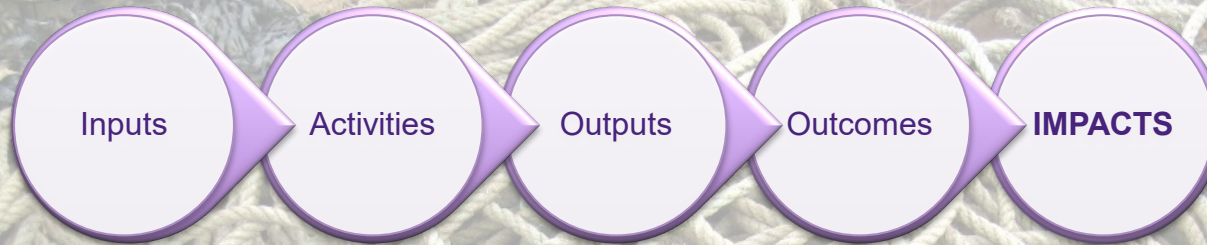
STORYTELLING

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LOGIC MODEL BUILDING SESSIONS - DISENTAGLING



The problem and the proposed solution -
how does it work?

What is needed **to enable it to work?**

How will you know that **it has worked?**





The challenge is here

"I think you should be more explicit here in step two."



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LOGIC MODELLING IN PRACTICE

Advice and
guidance

Limited
experience

ToC is a
first step





Virtual ToC/logic modelling

Preparation

Share a running order with participants – interactive, lots of discussion, describe change/success

Have cues and prompts ready

Facilitation

- MS Whiteboard
- We start at the end – ultimate change(s)
- Facilitator adds post-it notes for each point made
- Aim to work backwards BUT
 - non-linear
- Challenge high-level or aspirational statements of intent
 - Want specific change statements

Always

S c h e d u l e a b r e a k







What works well / what's been tricky



Good participation – rarely need to use prompts

MS Whiteboard works – others available

Taking it slowly – don't expect a complete ToC after 2 hours



Energy levels – always schedule a break

Getting beyond 'change story' to describing and picking apart the mechanisms for change N.B the real strength of ToC.





Taking ToC forward

Need time
to review

Ownership

Discuss
implementati
on

Map to logic model framework



Dark Logic

Dark logic models (Bonell et al 2015) – as a matter of good practice should we consider potential harms?

Theory and methods



'Dark logic': theorising the harmful consequences of public health interventions

Chris Bonell,¹ Farah Jamal,¹ G J Melendez-Torres,² Steven Cummins³

► Additional material is published online only. To view please visit the journal online (<http://dx.doi.org/10.1136/jech-2014-204671>).

¹Department of Childhood, Families and Health, Institute of Education, University of London, London, UK

²Department of Social Policy and Intervention, Centre for Evidence-Based Intervention, University of Oxford, Oxford, UK

³Department of Social & Environmental Health Research, London School of Hygiene & Tropical Medicine, London, UK

ABSTRACT

Although it might be assumed that most public health programmes involving social or behavioural rather than clinical interventions are unlikely to be iatrogenic, it is well established that they can sometimes cause serious harms. However, the assessment of adverse effects remains a neglected topic in evaluations of public health interventions. In this paper, we first argue for the importance of evaluations of public health interventions not only aiming to examine potential harms but also the mechanisms that might underlie these harms so that they might be avoided in the future. Second, we examine empirically whether protocols for the evaluation of public health interventions do examine harmful outcomes and underlying mechanisms and if so, how

However, the assessment of unintended and adverse effects remains a neglected topic in evaluations of public health interventions⁷ other than in areas such as suicide prevention and illicit drug interventions.⁸⁻⁹ Since harms are generally not measured in a consistent manner across studies, they are rarely examined in systematic reviews.⁷⁻¹⁰ This is problematic as some harms are insufficiently common to be detected by single studies, but could be detected by meta-analyses.

More recently, interest in the potential harmful effects of public health intervention has increased, with attempts made to categorise types of harm.^{2,7} Lorenc and Oliver offer the following typology: direct harms (eg, sports participation causing injury,





5 minute break: Return at

Questions to think about...

- What could you put into practice tomorrow?
- What else do you need to research?



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Check in:

In one word how are you feeling about Theory of Change?

Join at
slido.com
#994 453



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Theory of Change in Natural England

Dr. Tom Marshall – Senior Evaluation Specialist

About Natural England



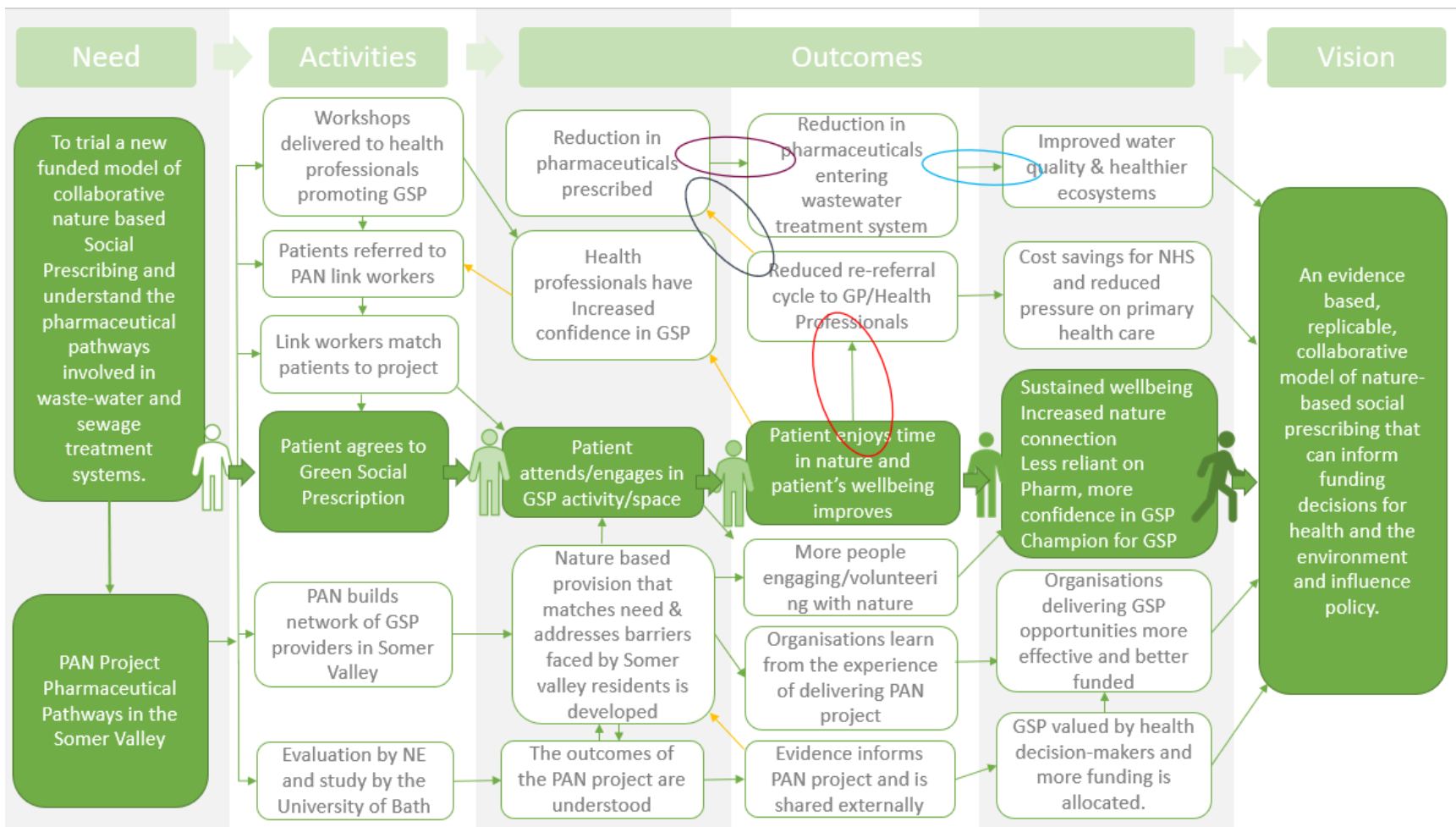
- Natural England is a non-departmental government body, sponsored by Defra.
 - “Our purpose is to help conserve, enhance and manage the natural environment for the benefit of present and future generations, thereby contributing to sustainable development.”
 - We use Theory of Change for:
 - Strategy development
 - Quality improvement
 - Evaluation



- Theory of Change is not an evaluation technique *per se*.
 - Theory of Change is a tool for understanding an intervention and framing an evaluation.
- Theory-based evaluations are a family of evaluations.
 - There is no one single methodological approach.
- Not all Theories of Change will be suitable to support evaluation:
 - Getting the frame of reference of your ToC right is crucial.



- There are many options for theory based approaches to impact evaluation.
 - E.g. contribution analysis, realist evaluation, QCA, process tracing.
- Theory-based approaches have several common features.
 - An inductive approach (testing whether expected impacts from an intervention have happened);
 - Collecting data at different stages of the Theory of Change to see whether or not, or how far, the desired changes have occurred; and
 - Exploring the causal links between changes at the different levels to test assumptions, and to confirm or reject the theory linking the levels.
- Demonstrating causation is essential:
 - Variation in methods essentially results from differences in the best way of demonstrating this causation, based on:
 - Data availability;
 - The nature of the intervention being evaluated.





Break Out Room Activity

For 10 minutes

In breakout rooms of 3 people

Discuss the question below

1. Turn on your camera and unmute your microphone
2. Introduce yourselves (First name of the alphabet first A→Z)
3. **Do you think you'll be able to use ToC in your role? What else do you need to be able to use ToC?**



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Break Out Room Activity

For 10 minutes

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Discuss the question below

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Share your reflections in the chat box

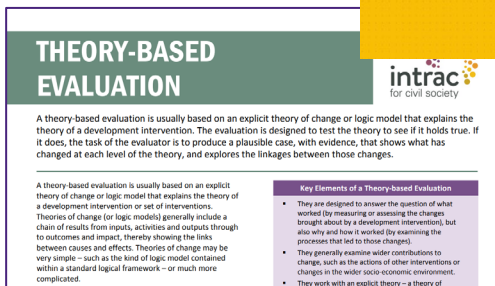
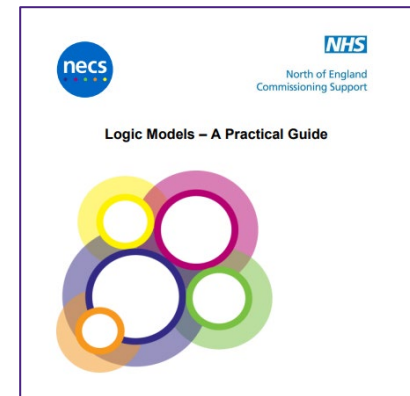
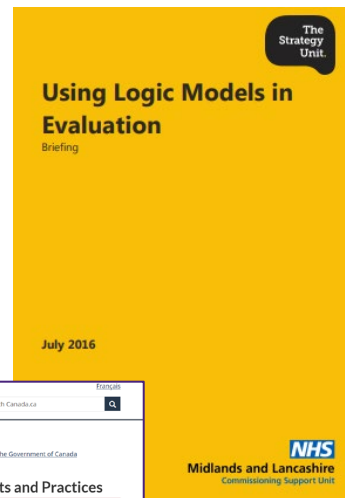


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Where to go next...

- Join the evidence and evaluation online network
- Visit the Evaluation online Toolkit
- Resources





Wrapping up

Our aims for today's session

- An introductory **understanding** of Theory of Change
- An understanding of **using** Theory of Change in practice
- An opportunity to **discuss** Theory of Change in small groups
- Signposting to online resources for **further info**.

Reflect at the end of the session:

- What could you put into practice tomorrow?
- What else do you need to research?



Reflection

Take a moment to reflect on

- something you can **put into practice tomorrow**

In the chat box: *I will put into practice...*



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FEEDBACK



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Thank you and well done



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