STAGE THREE FINAL REPORT

Making the Case

Early Years **Self-evaluation** Collaborative

Involving Community Food and Health (Scotland), Evaluation Support Scotland and six community food and health projects.

Community Food and Health (Scotland) or CFHS aims to ensure that everyone in Scotland has the opportunity, ability and confidence to access a healthy and acceptable diet for themselves, their families and their communities. We do this by supporting work with and within low-income communities that addresses health inequalities and barriers to healthy and affordable food. CFHS recognises that the experience, skills and knowledge of community-based food activity is vital in contributing to, delivering and developing national and local strategic approaches to health improvement through food.

Evaluation Support Scotland (ESS) works with voluntary organisations and funders so that they can learn to measure their impact and through that improve their services and report on the difference they make. They also help funders improve their own systems so that they can more easily gather good evidence about the difference their funds and making.

DrumchapelLIFE Healthy Living Centre, Glasgow

The Hidden Gardens, Glasgow

Peterhead Family Centre

Burnfoot Community School, Hawick

Fife Community Food Project, Kirkcaldy

Edinburgh Community Food Initiative

Foreword

by Ruth Campbell, Infant Nutrition Co-ordinator for the Scottish Government

The National Performance Framework outlines the Scottish Government's vision for an outcomes-based approach to achieve its core purpose of creating a more successful country, with opportunities for all to flourish, through increasing sustainable economic growth. All government and public sector services, including the NHS and local authorities, must identify how the delivery of their activities contributes to national outcomes.

Community and voluntary organisations are also expected to demonstrate the impact their activities have on vulnerable families and individuals in Scotland. Self-evaluation is a useful tool in that process. This report describes the support provided to build capacity within a small number of initiatives to self-evaluate.

Community food and health initiatives have long recognised Early Years as a key priority in local communities and have been successfully reaching and supporting families in low-income areas for many years. Learning from these activities is extremely important for funders as well as policy makers. This report from the collaborative will inform wider understanding about the valuable and significant contribution that the community and voluntary sector plays. The logic model produced by the collaborative has been used to inform the logic model currently being developed for improving maternal and infant nutrition in Scotland.

I am confident that the experiences of the participating initiatives will be used in a variety of ways, not least by those tasked with measuring health outcomes for children and wider outcomes for Early Years at local and national level.

Ruth Campbell RD, RPHNutr
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Introduction

'Making the Case' is the final report from the Early Years Self-evaluation Collaborative (EYSEC), a three-stage pilot support programme provided (over two years) by Community Food and Health (Scotland) or CFHS, and Evaluation Support Scotland (ESS), to support six community food and health initiatives improve their evaluation skills.

The collaborative was developed as a result of discussions with CFHS and community food and health initiatives working with parents and children in the 0-5 age range. These initiatives had already recognised Early Years as a priority area of activity at local level, especially through work aimed at and involving parents and children. This was before the launch of key policies such as Equally Well, HEAL and the Early Years Framework, where policy at strategic level identified Early Years as a key priority.

Discussions with community initiatives raised a common theme that support for initiatives to promote the impact of their work to policy makers and funders was needed. CFHS identified that providing support to initiatives to develop capacity to evaluate their work was a key priority.

This report will provide:

- An overview of learning from earlier stages of the collaborative (copies of earlier reports from stages one and two can be downloaded from www.communityfoodandhealth.org.uk/plugins/publications/children.php)
- A summary of a learning exchange between the collaborative, policy makers and funders.
- Key learning highlighting how the collaborative has improved its capacity to self-evaluate, and how learning is being embedded into its work.

This report is aimed at anyone who is interested in learning more about community food and health activities and evaluation. We hope that the experiences of the collaborative and lessons learned will be of practical assistance to those wanting to develop practice around self-evaluation.

We expect that the report will help inform funders and policy makers' wider understanding of the contribution that self-evaluation outcomes make towards achieving local and national health improvement outcomes.

Why we did this work

CFHS sought support from ESS to discuss the best way of supporting community food and health initiatives with evaluation and raising the profile of their impact to others. ESS works with a range of community and voluntary organisations and funders to provide practical support with evaluation. We both agreed that building the capacity of community initiatives to learn how to self-evaluate would be the best use of our resources. In the autumn of 2007 CFHS commissioned ESS to develop and lead a pilot support programme with a small group of initiatives.

The aim of the Early Years Self-evaluation Collaborative was to support initiatives to:

- improve their self-evaluation skills;
- collect better evidence for their own learning and show the difference their work is making; and
- influence others about their work so that policy makers and funders have a better understanding of what works for whom and why.

We decided that we would write reports on what we did and learned to help other community food and health initiatives learn about self-evaluation.

Six initiatives were recruited from a base group of 33 initiatives from across Scotland. This group consisted of initiatives that were already involved in previous discussions or had received a small grant from us in the previous two years (2006 and 2007).

All the initiatives had common objectives to develop and deliver food and health activities in low-income communities. The settings in which they worked are all similar and they all:

- deliver a range of activities that address health inequalities as well as access to healthy and affordable food;
- work with parents or carers and their children together; and
- use a community development approach.

The approaches that the initiatives were using were recognised locally as:

- highly valued and meaningful to communities;
- relevant, wanted and supported by local communities; and
- changing health and lifestyle behaviours.

However, all experienced difficulty having their work valued outside their community and asked for support to have their work more strategically recognised.

Headline achievements

Over 1000 copies of the Stage One and Stage Two reports have been distributed to help others learn from the collaborative.

825 downloads of the Stage One report from the CFHS website.

Five collaborative members were successful in obtaining their REHIS Elementary Certificates in Food and Health.

The collaborative delivered an energetic and well-received workshop at the CFHS annual networking conference in November 2008 in Glasgow, and presentations at the Annual Public Health Conferences, in Aviemore November 2008 and Peebles 2009, and the annual Association of CHP's conference September 2009.

Fife Community Food Project has supported parents to improve their nutrition and that of their families through attending the Fair Isle Breakfast Club.

The Hidden Gardens has helped isolated parents from BME communities successfully integrate and develop parenting skills through their involvement in a Parent and Toddler Group.

Edinburgh Community Food Initiative through **Little Leithers** Voucher Scheme distributed over 4000 vouchers and 2000 recipes in 2008.

Mums involved in the 'Blend for Baby' project at Burnfoot Community School have increased their confidence and skills to wean their babies.

Even though **DrumchapelLIFE** has not been able to sustain the Food Dragons programme for a variety of reasons, two nurseries from the initial programme have decided to run activities themselves.

Who was involved

Food Dragons (DrumchapelLIFE Healthy Living Centre)

The Food Dragons Project has worked alongside staff in five nurseries in the Drumchapel area of Glasgow. The project's purpose has been to take simple messages about a healthier diet to children and their parents and to support them to develop basic food preparation skills, which they can use at home together.

Parent and Toddler Group (The Hidden Gardens, Glasgow)

The Hidden Gardens is a greenspace and community resource in Pollokshields, Glasgow. Through local links the Hidden Gardens learned that the local resident BME community is especially isolated. In response a weekly Parent and Toddler Group that functions on a drop-in basis was established. The group is facilitated by staff who play a crucial role in supporting parents, co-ordinating activities, and bringing in health professionals to provide additional advice sessions.

Confidence to Cook Group (Peterhead Family Centre)

Peterhead Family Centre is a local authority family centre situated in the north east of Scotland. This group was set up to help parents provide healthy and nutritious food for their families in an engaging way. The group also aims to experiment with new recipes and talk about budgeting and hygiene as part of the overall idea. At the end of the session service users are given a recipe pack for further use.

Unfortunately Peterhead Family Centre had to pull out of the collaborative after completing learning in Stage Two due to pressure in demands of their time.

Blend for Baby (Burnfoot Community School)

Burnfoot Community School lies within a community on the edge of Hawick in the Scottish Borders that faces many challenges. Blend for Baby is a six week project, an offshoot of a larger plan to welcome parents and children in the 0-3 age range into school. The initial aim has been to help parents who are weaning their babies to look at food nutrition and hygiene in a 'user-friendly' practical way.

Fair Isle Mums Breakfast Club (Fife Community Food Project)

The aim of Fife Community Food Project is to improve access to and uptake of a healthy diet within disadvantaged areas of Fife to improve health and wellbeing. The aim of the group is to encourage the mums to make long-term changes in their eating habits, become more positive role models for the children, and have an impact on their families' diet.

Little Leithers Vouchers Scheme (Edinburgh Community Food Initiative)

The Little Leithers Voucher Scheme aims to encourage families from low socio-economic backgrounds to use local shops and to eat and cook more with fresh ingredients. Each recruited family receives a sheet of eight vouchers, alongside simple recipes, every month for use in local shops - fishmongers, butchers (including halal), fruit and vegetable co-op and greengrocers.

Policy background

The Scottish Government's strategic objective of a 'Healthier Scotland' relies on the contribution of many partners delivering outcomes on health improvement, including the community and voluntary sector. As part of the policy context for the Early Years Self-evaluation Collaborative, we must consider the Scottish Government's National Performance Framework.

The National Performance Framework was launched in 2007 as part of the Scottish Government's spending review and was designed to ensure the priorities for Scotland are clear, logical and easy to understand. The framework consists of one overarching purpose, five strategic objectives (wealthier and fairer, safer and stronger, smarter, greener and healthier), 15 national outcomes and 45 national indicators.

This outcome-focused approach details the national level outcomes that the Scottish Government believes need to be met, *'...to create a more successful country where all of Scotland can flourish through increasing sustainable economic growth'.*

As such, the work of the collaborative has considered the contribution that community and voluntary groups that are working in Early Years are making towards relevant national outcomes:

- We live longer healthier lives
- We have tackled significant inequalities in Scottish society
- We have improved the life chances for children, young people and families at risk
- Our children have the best start in life and are ready to succeed

The learning and support provided through the collaborative has sought to help members become more outcomes-focused in their approach to planning and evaluation.

Early Years has been given priority across a range of policy actions and guidance since the beginning of the collaborative in December 2007.

These include:

The **Better Health, Better Care** Action Plan launched in January 2008 which sets out actions for Early Years and tackling health inequalities in deprived communities
www.scotland.gov.uk/Publications/2007/12/11103453/9

A joint action plan for diet, physical activity and obesity, **Healthy Eating, Active Lives,** was launched in June 2008 and includes action on Early Years (maternal and infant nutrition)
www.scotland.gov.uk/Publications/2008/06/20155902/0

Equally Well, from an initial launch to the establishment of eight test sites across Scotland and an implementation plan, laid out an ambitious programme for change across key priority areas to support progress at local and national level.

One of the test sites is in East Lothian: 'Support from the Start' is 'addressing the health needs of the youngest members of our community in the areas where we know that health outcomes are the poorest'.
www.scotland.gov.uk/Resource/Doc/229649/0062206.pdf
www.scotland.gov.uk/Resource/Doc/254248/0075274.pdf

At the end of 2008 the **Early Years Framework** was launched jointly by both the Scottish Government and the Confederation of Scottish Local Authorities (CoSLA). This framework recognises that the early years of life are crucial to a child's development and highlights that parents and communities are fundamental to this.
www.scotland.gov.uk/Topics/People/Young-People/Early-years-framework

At the end of 2008 **Good Places, Better Health** set out the Scottish Government's commitment to creating safe and positive environments which nurture better and more equal health and wellbeing. This plan looks particularly at child health issues and complements activity outlined in HEAL, the Early Years Framework and Equally Well.
www.scotland.gov.uk/Publications/2008/12/11090318/0

Getting it right for every child (also known as "Getting it right" or GIRFEC) is a new, national approach to supporting and working with all children and young people in Scotland. It affects all services for children and adult services where children are involved.
www.scotland.gov.uk/Topics/People/Young-People/childrensservices/girfec

The **Recipe for Success** framework launched in June 2009 sets out next steps for the National Food and Drink Policy and contains recommendations and actions aimed at adults and children for example:
'Support vulnerable groups,...by evaluating the evidence and potential actions around access to affordable healthy food'.
'Increase the uptake of healthy start scheme vouchers for pregnant women and children under 4.'
www.scotland.gov.uk/Topics/Business-Industry/Food-Industry

What we did (Stages One and Two)

ESS devised a three-stage support programme for the collaborative based on its evaluation pathway (see below), which combined learning workshops, group work and one-to-one support.

The Stage One and Two interim reports describe the process and the methods used in the support programme. The Stage One report includes six case studies describing how the collaborative's knowledge, skills and practice improved as a result of its learning. Stage Two includes five mini-evaluation reports describing how the collaborative members are demonstrating the impact of their work.

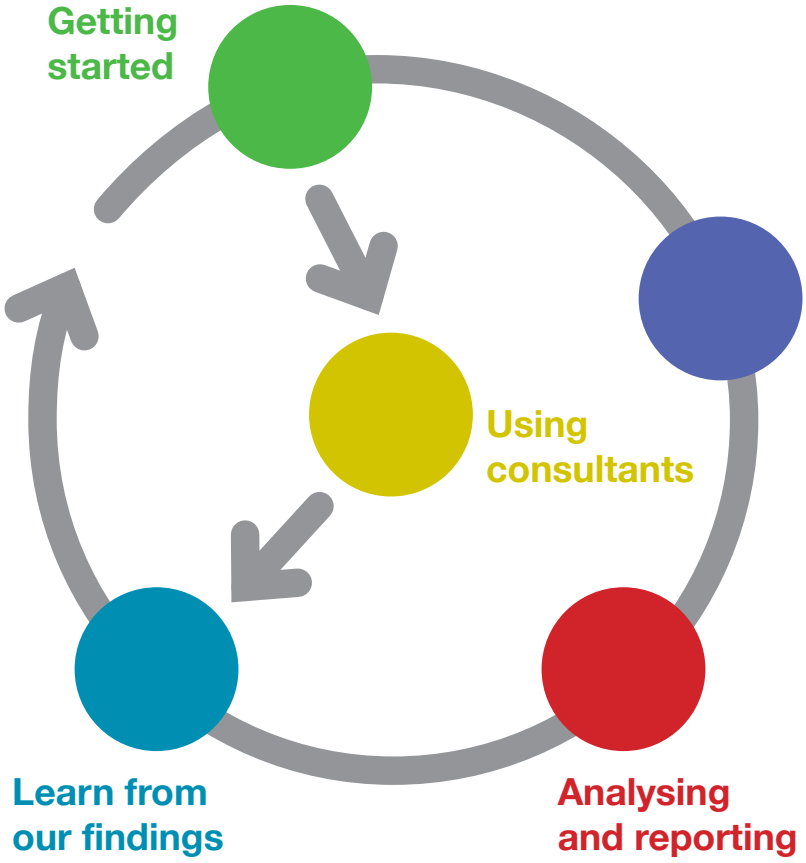
The format of both the Stage One and Two reports was intended to help other community food and health initiatives learn about developing, embedding and reporting on evaluation systems and reflect on the role of evaluation.

"It raises the importance of making time for evaluation, think about the participants views and understanding of evaluation and appropriate methods."
Anonymous comment from feedback form

The Evaluation Pathway

community food and health (scotland)

Evaluation Support Scotland



The pathway is a method for organisations to take responsibility and ownership of evaluation as a tool for learning as well as accountability.

Stage One: Getting started and collecting information

The purpose of the collaborative was introduced and members were supported to examine, clarify and state the aims and outcomes of their work clearly and simply. This support helped participants to begin to plan and develop evaluation systems that would be embedded in their work activities.

Stage One also provided learning about creative ways of collecting information and involving their colleagues, and the parents and children, in the evaluation process. This was important in order to plan what methods or tools would be used so initiatives could recognise changes that would indicate impact as a result of food and health activities.

CFHS and ESS also made site visits to the initiatives to gain more understanding about their work and approaches. This was also an opportunity to assess the development of their self-evaluation systems and resolve any misunderstandings at an early stage.

The following is a summary of learning points and tips from Stage One:

Collecting information

- Consider what you need to ask before collecting information. Refer back to your outcomes regularly to ensure that you show the benefits of your work.
- Consider using creative approaches that are simple and interactive to improve the quality of information collected. Making it easy for community members to be involved ensures that all views are included and recorded.
- Photographs can illustrate baseline and outcome information. Recording participants' comments in a diary strengthens showing the difference your work has made.
- Encourage community members to take photos at home. Involving families in collecting evaluation information helps them have a greater sense of ownership changes to improve their health.
- Consider other learning from information you have collected, eg. one collaborative member placed data in a spreadsheet. This helped them to identify the needs of families they were working with.

Evaluation Process

- It is essential that initiatives integrate the evaluation process into work activities on a continuous basis and not just at the end of a programme. This process helps initiatives monitor activities, identify progress and make improvements to meet the needs of a community.

Case Studies

- Consider writing a case study using evaluation information to help illustrate the benefits of an approach or a piece of work. A case study can be a powerful tool to illustrate change.

Outcomes

- Consider using planning tools such as a Weavers Triangle[1] to plan aims and activities. This tool helps to clarify or identify outcomes of activities.
- When you are identifying outcomes, consider how they can be measured and demonstrated effectively.
- Involving participants in shaping activities encourages them to get involved so you can achieve your outcomes.

[1] www.evaluationsupportscotland.org.uk/article.asp?id=9

Stage Two: Analysing and reporting

Stage Two of the collaborative explored how the six initiatives were continuing to embed evaluation processes in their work activities. When the collaborative members were collecting evaluation information, they learned how to recognise and make sense of findings from self-evaluation.

They also learned about reporting, presenting and explaining evaluation. They wrote evaluation reports describing how the initiatives were learning what worked or not about their approaches, how to improve things and how to report on their outcomes.

The reports also provided opportunities to reflect on the contribution of small initiatives self-evaluations and their wider impact on local and national priorities for Early Years (see Stage Three, page 19).

Peer-learning sessions were particularly successful in assisting participants to review self-evaluation information, share evaluation tools and be inspired by evaluation methods that were successful or unsuccessful.

CFHS and ESS continued to make site visits with dedicated support according to the needs and progress of collaborative members.

The following is a summary of some key learning points from Stage Two:

Sharing Tools

Peer-learning sessions were useful to present examples of evaluation tools used or adapted. Participants could 'see them in action' and discuss:

- advantages and disadvantages of each tool; and
- ways of changing or improving practice.

Analysing Information

A variety of formats, such as photographs, diaries, graphs and pie charts, spreadsheets, individual case studies, timelines and anecdotes can be used for analysing and reporting evaluation information. Sometimes these formats need short explanations to convey to others what they mean or represent. Others may include:

- Colleagues wanting to review how programmes are progressing and improve on future programme outcomes.
- Local community members who are keen to receive feedback and explore how actions led by them are continuing.
- Funders, local partners or planners wanting to look at sustaining funding or activity that is having an impact on health improvement outcomes.
- Policy makers tasked with measuring and reporting health improvement outcomes and targets.

ESS has a number of support guides available to assist groups through the process of evaluation. Collaborative members used these guides to complement their learning and experiencing of collecting and analysing information. A support guide for writing an evaluation report was also supplied.[2]

[2] www.evaluationsupportscotland.org.uk/article.asp?id=128

Visual approaches

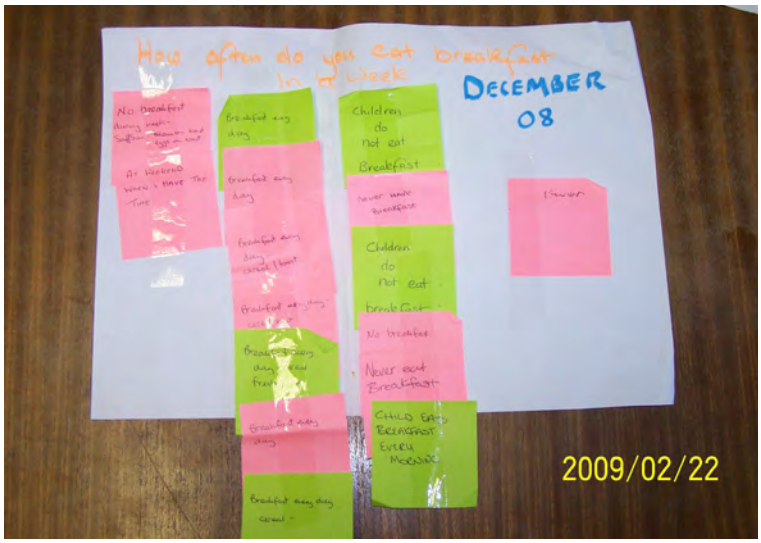
- It is important to explore getting the best use out of photographs and other media when using visual approaches to collect, analyse and report evaluation information. Another ESS guide outlines this as well as responsibilities for permission to use images.[3]

Reporting on outcomes and writing reports

- Read sample evaluation reports to investigate how best to convey and report evaluation with impact.

Promoting the reports

- Self-evaluation reports promote what you are achieving and help others to learn about what you are doing. However, how you do this requires planning and commitment to engage with others about your work.



[3] www.evaluationsupportscotland.org.uk/article.asp?id=17 and www.evaluationsupportscotland.org.uk/article.asp?id=18

The Early Years Self-evaluation logic model

This final stage of the programme explored the contribution of small initiatives' self-evaluations on wider policy for Early Years and their impact on local and national priorities.

Collaborative members identified clear messages they would want to share with others, especially funders and policy makers about their work. This also involved thinking about effective ways of conveying how they see their work contributing to local and national outcomes.

CFHS and ESS both recognised that tools for measuring progress on health improvement were being developed at national and local levels. In order for the collaborative to engage with funders and policy makers in familiar ways they needed to use common tools. We explored current tools such as logic models. [4]

The collaborative was keen to express its ability to grasp and understand higher level policy outcomes and how they link to its activities in local communities. This is especially important in demonstrating the role of the community and voluntary sector in delivering health improvement outcomes. We spent time transferring learning and outcomes from the Stage Two evaluation reports onto a logic model.

Logic modelling is mainly used at the planning stages of programmes or interventions. The collaborative used it retrospectively to demonstrate what or how we felt the work on the ground contributed towards national outcomes.

The EYSEC logic model represents the thinking from five of the projects working in different geographical areas. It contains information that can be evidenced in the evaluation reports. We also added for future outcomes building on sustained changes from shorter outcomes.

A second model shows an example of 'nested modelling'[5] which maps out more complex interrelationships between short, medium and longer term outcomes. The collaborative reported that the time spent on developing a logic model was valuable, however the process of doing it was challenging:

"Logic modelling was difficult to get my head around – this was the only thing that was rushed due to time pressures and it did leave me thinking 'need to go back and look at it to try and understand'. It was worthwhile exercise but wouldn't feel drawn to do it again."

ESS has developed a practical guide to developing Logic Models which can be downloaded from www.evaluationsupportscotland.org.uk/downloads/Supportguide1.2logicmodelsJul09.pdf

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[4] A logic model tells the story of a project or programme in a diagram and a few simple words. It shows a causal connection between the need you have identified, what you do and how this makes a difference for individuals and communities. In constructing a logic model we articulate and become more explicit about the linkages between aspects and our underlying assumptions. We also take stock of influential external factors.

[5] 'A nested logic model depicts in greater detail a specific component or activity that is part of a larger program-level logic model.... A nested logic model takes one component of the entire logic model, such as professional development, and provides greater detail than can be captured in the program-level logic model'. www.citizensforsocialjustice.com/back/documents/Developing%20Your%20Logic%20Model.pdf

Self-evaluation Collaborative
Simplified full logic model

Situation
To improve access to healthier foods through skills development, raising awareness, confidence building in low-income areas for children and families.

Assumptions
Community development is an effective way to deliver sustainable change in people/communities
Working in early years intervention is a positive way forward
Getting them early works
Tackling health inequalities is a priority

Inputs

Community Resources
Meeting and training spaces
Support services

Funding
CFHS Small Grants (07/8)
Big Lottery Fund
Fairer Scotland Fund
Project Core funding

Staff
Community Food Development Workers
Family Workers
Homelink Workers
Head Teacher and teaching staff
External Professionals e.g. Health Visitors, Oral Health, Cooking Tutors

Community Partners
Local shops (e.g. vouchers scheme)
Food co-ops (access to fresh foods)
Professional advice (e.g. healthy weight/ smoking cessation/ oral health)
Steering groups (direction)
Guest speakers

Outputs - Activities

Breakfast Club

Taster Sessions

Creating Shopping Lists

Shopping Trips

Information Sessions (simple messages, nutrition, weaning, food safety)

Food Preparation/ Cookery Sessions

Pack provision

Parent and Toddler Group

Voucher scheme (voucher tracking)

Engaging with local shops (voucher scheme)

Healthy Weight

Smoking Cessation

Peer support

Outputs - Participants

Target Audience

Parents

Nursery children and their parents

BME parents

Others Involved

Project workers

Chef

Local shop staff

Food Co-ops

Nursery/School staff

Young children/ toddler

Borders Healthy Living Network

Health Professionals

Parent and Child Teams

Teachers

Community Learning

Family Centre

Outcomes over time...

Parents have the confidence to engage in activities

Parents are better able to make the connection between food and health

Increase people's comfort in discussing food and food issues

Increase people's comfort around fresh food and while food is being prepared from scratch

Increase parents knowledge of healthier foods

Parents recognise the importance of regular eating patterns

Improve cooking skills, knowledge and confidence

Parents understand what influences children's attitudes to food

Parents recognise the importance of leading by example

Improve skills and confidence in food shopping

Parents recognise how they can influence children's attitude to food

Parents have strategies to manage change in children's food behaviours

Mums/parents are more confident to try different foods

Parents have healthier eating habits

Children are eating healthier

Parents and children work with food together

National Outcomes

We live longer healthier lives

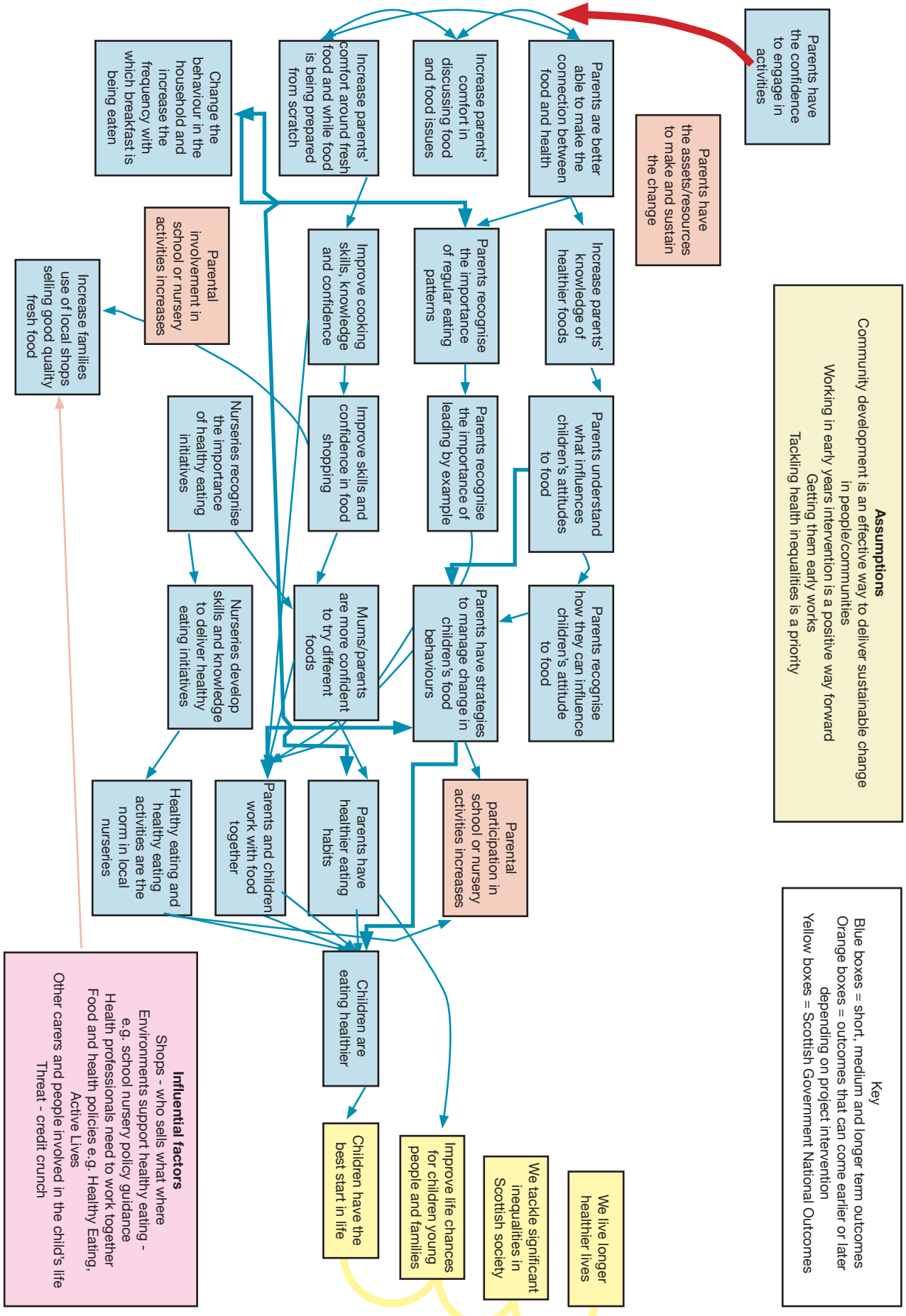
We tackle significant inequalities in Scottish society

Improve life chances for children, young people and families

Children have the best start in life

Influential factors
Shops - who sells what where
Environments support healthy eating - e.g. school nursery policy guidance
Health professionals need to work together
Food and health policies e.g. Healthy Eating, Active Lives
Other carers and people involved in the child's life
Threat - credit crunch

Self-evaluation Collaborative more detailed outcomes logic model



Pure Orange Juice

Stage Three: Making the Case - using the learning to influence others and learning from findings

The self-evaluation reports from Stage Two contain information and evidence that was used to discuss the contribution of small projects' outcomes towards delivering local and national priorities.

Sharing Stage One and Two reports nationally created a lot of interest from the CFHS and ESS networks and key stakeholders. Using our contacts we organised a learning exchange between the collaborative, funders and policy makers. This event was significant as community initiatives rarely have the opportunity to have a clear and frank discussion with funders and policy makers.

The current policy environment encourages outcomes-focused planning, which is contributing to improved reporting systems. This way of planning should lead to more open forums for community food and health initiatives to highlight their impact and links to local and national priorities. Support to ensure that everyone can communicate using a common language and shared understanding of impact is important.

Many complex and thoughtful issues were uncovered during the Learning Exchange, which we hope will encourage further thinking and discussion from across wider forums at local and national level.

The aim of the Learning Exchange was to reflect on and discuss:

- the learning from Stage Two of the collaborative;
- the role and influence of small community food and health initiatives on wider policy for Early Years; and
- self-evaluation and its impact on national priorities and targets.

Participants included the Scottish Government, NHS Health Scotland, The Big Lottery and a representative from East Lothian Council who is involved in the work of the Equally Well test site for Early Years. The event also provided a timely opportunity to share experiences and findings from the collaborative with others new to the work.

Sharing key messages

Participants were divided into two groups. The collaborative shared key messages about their evaluations in small and large groups. Feedback included:

- The interventions described by the collaborative were 'brought to life' and provided clear evidence of impact. The reports highlighted learning used to inform work activities and identify gaps where more action was required.
- Understanding the impact of collaborative members' activities needs to be seen alongside wider interventions and influences that surround their specific pieces of work.
- Impact can be affected by doing something at the right time, in the right location, with the right people, driven by need rather than chasing a target.
- The importance of 'buy-in' from others to the monitoring and evaluation process was raised. When support from others is achieved, planning and practice can be progressed more effectively. Some collaborative members stated that had this been stronger in some situations more could have been achieved.
- As funders and policy makers are more outcomes-focused, this approach of telling others and providing evidence of impact was recognised as very appropriate and refreshing.
- Collaborative members and parents were engaged in the process of evaluation so they were able to track their own progress in achieving outcomes. This approach encouraged parents to maintain relationships with services and stay involved in activities.
- Parents valued peer-support, eg. members of the Parent and Toddler group (Hidden Gardens), many of whom were from BME communities, spoke of feeling more aware about their similarities rather than their differences as parents.

What does the report tell us about the role of small community food initiatives in wider food and health policy for Early Years?

The EYSEC logic model (see page 16) was introduced at the learning exchange to open up discussion about the links between outcome-focused community food and health activities and national priorities.

Some background to the development of this logic model was given:

- The logic model was a useful process that helped the collaborative demonstrate logical pathways between its outcomes and higher level outcomes. The higher level outcomes included in the model were taken from the 15 national outcomes that the Scottish Government want to achieve. The 'outcomes over time' were gathered from the five evaluation reports contained in the Stage Two report. Some were grouped together to avoid duplication.
- The logic model had been developed over two sessions. A lot of time was focused on clarifying language to ensure clarity when describing outcomes.
- The logic model was developed after the completion of the evaluation reports. In this context it has been used for information sharing as opposed to a planning process.
- Some pathways were similar for some collaborative members and occurred at different stages depending on the needs of local communities. These are represented in the more detailed logic model using orange boxes, as they can occur at different times depending on the group or community, eg. 'parents have the assets/resources to make and sustain the change'.

Some of the comments and thoughts shared during this session included:

- Where does the process of logic modelling and reporting on outcomes 'fit' with funders and policy makers' priorities? Should it 'fit' with higher level outcomes related to government priorities or local outcomes (Single Outcome Agreements/SOAs)? It was agreed that the two should be complementary with local outcomes key for local community initiatives. Engagement between local authorities and small project evaluation is very relevant to demonstrate how SOAs are being achieved in local areas.
- There is a shared focus within the collaborative that the work and outcomes achieved go beyond those related to food and health – food can be a vehicle for initiating other changes.
- Referring to the collaborative logic model the issue of 'availability and affordability of an acceptable diet' should be given greater emphasis.
- Language is important to ensure clarity.
- The logic model, particularly its insight at intervention level, made it an ideal complement to other logic models being developed at national levels by contributing to the detail or 'nesting'[6] of logic models.

The EYSEC logic model has influenced national logic models that are being developed nationally, eg. Outcomes Framework Healthy Weight, and the Scottish Government Maternal and Infant Nutrition Strategy being developed for improving maternal and infant nutrition in Scotland. The model contains practical examples of evidence that is informing their work.

Conclusions

In conclusion to this discussion we had more questions than answers. These questions are recorded here as they are useful points for further discussion and consideration.

- How can the collaborative develop the work of the logic model? How can other projects be supported to plan and think in a more outcome focussed and logical way?
- Does the logic model reflect a story or does it reflect pathways that are explained by evidence gathered through self-evaluation activity? Are pathways common for groups/individuals? It would be helpful to follow through pathways and continue to track parents' journeys.
- Which connections within the logic model are evidenced and how robust is the evidence within each connection?
- Is the logic model the most appropriate approach for sharing results of small project evaluation? Results need to be communicated in the most effective way that is appropriate for small projects.

[6] 'A nested logic model depicts in greater detail a specific component or activity that is part of a larger programme-level logic model....A nested logic model takes one component of the entire logic model, such as professional development, and provides greater detail than can be captured in the programme-level logic model'.
www.citizensforsocialjustice.com/back/documents/Developing%20Your%20Logic%20Model.pdf

Self-evaluation – what is the challenge for policy makers, funders and voluntary organisations?

The learning exchange highlighted the value of self-evaluation. There are different ways of telling the 'story' of impact as illustrated by the different projects that came through strongly in their self-evaluation reports.

A final discussion helped to tease apart different perspectives about promoting small project self-evaluation to others.

Qualitative evaluation versus quantitative evaluation

Members are concerned that qualitative information is sometimes considered as not meeting monitoring or analysis requirements. This could reduce opportunities for some funders/decision makers to acknowledge the richness of qualitative information and the outcomes that projects they fund or support are achieving. Valuable information about outcomes could be lost if qualitative information is excluded from self-evaluation.

How to present evaluation information

Funders and policy makers may not have the capacity to review large amounts of qualitative data. It was agreed that quantitative data was not enough on its own but funders might find it easier to digest. Some participants suggested presenting evaluation information in different formats that could be tailored for specific audiences. These included:

- invitations to visit projects
- short headline achievement fact sheets
- DVDs
- working collectively with others
- speaking with local champions

Different formats could also be used to attract media attention and to initiate or facilitate discussions with local authorities, health boards and other agencies.

Making sure evaluation information gets to the right people

Learning from this session highlighted the value of continually sharing self-evaluation and outcomes with stakeholders. Self-evaluation can inform and influence evidence and practice as well as linking what is happening locally with local and national priorities. What happens to self-evaluation information and how it could be used by others to demonstrate outcome targets and priorities was discussed. This raised the question: do community food initiatives know where and how evaluation information can get messages across about the impact of their work to others?

Using evaluation to build relationships

Participants debated who to build relationships with, how to maintain them and the challenges of changing structures and personnel within organisations. Sustained support is necessary to ensure effective communication between funders and policy makers and those working on the front line. This is not just the responsibility of local groups to highlight what is happening but others have a responsibility to find out what is taking place in their local area.

A database for self-evaluations

The community and voluntary sector is continually asked to evaluate its work to demonstrate impact, effectiveness, and value for money to others. A lot of evaluation information is available for others to use. This raised the question: where can small project evaluation information be collated and stored so that others tasked to demonstrate impact at higher levels can access it?

There is a potential risk of this information being overlooked when measuring progress towards achieving outcomes at local and national level. Some potential databases were suggested and will be explored in terms of their usefulness and application. One funder also shared that grant recipients are invited to an event each year to share learning with both funders and the Scottish Government.

Learning - for and from the collaborative

The successes and challenges of the collaborative and the key learning from this support programme are summed up in this section. Information about learning in Stages One and Two is contained in the reports, which can be downloaded from www.communityfoodandhealth.org.uk/plugins/publications/children.php

The learning exchange has already been described on page 19. Members took part in one-to-one interviews to evaluate and reflect on the overall impact of the programme.

In summary the collaborative has:

- increased understanding of self-evaluation;
- clarified the aims and outcomes of its work activities;
- improved their evaluation skills; and
- improved confidence to practice skills.

The collaborative worked because it had:

- brought initiatives working similarly together;
- a supportive learning environment;
- peer-learning between collaborative members; and
- a flexible and adaptable approach.

The collaborative was challenging as:

- the expectations and commitment required was underestimated;
- it was difficult to organise dates to get everyone together;
- keeping motivation up was difficult when work activities were not happening;
- staff members from initiatives changed in the collaborative; and
- report writing was more difficult than anticipated.

The collaborative is continuing to embed learning into practice with colleagues and within organisations. This is an ongoing process that is challenging. These challenges include:

- collaborative members not feeling confident to support others;
- issues around organisational capacity; and
- difficulty to get buy-in and commitment from external partners and funders.

We hope that lessons learned from our experiences have been effective and will help others in the future.

You can read about learning in more detail in the following pages.

Did the collaborative improve their self-evaluation skills?

We asked collaborative members to consider how they felt their self-evaluation knowledge and skills had developed.

Understanding

All members had an **increased understanding of self-evaluation** and commented that their evaluation skills had developed significantly. Their comments indicated that they were making changes to their evaluation practice:

"I have a greatly increased understanding of self-evaluation."

"...evaluation should start within the preparatory work of a project, not at the end – it should be considered from the beginning."

"I learnt that you need to dedicate quite a lot of time to doing evaluation."

A clear introduction to evaluation helped members to examine and **clarify the aims and outcomes of their work activities.** This was vital to help members to develop and plan evaluation systems more effectively:

"...the main thing was realising the importance of being clear about what you are trying to measure."

Skills

Collaborative members reported that they had **improved their self-evaluation skills** especially planning evaluation more effectively, eg.

"Skills have improved – mostly in relation to designing evaluation as opposed to the mechanics of gathering data."

"..it did make us realise that we needed a baseline...and we realised we had good ways of evaluating but it wasn't as robust as it could be."

"This has been our biggest piece of learning about evaluation – to ask questions which demonstrate change as opposed to enjoyment."

They have improved and developed practical skills for gathering information and reporting on evaluation evidence, eg.

"I wouldn't just do a questionnaire now – I would try to explain to people other methods which could be used."

"..have developed my skills around using visual methods for evaluating and creatively gathering evidence we need."

"We have found that anecdotal information and case studies are a good way of providing evidence for funders."

All initiatives had different experiences of self-evaluation when joining the collaborative. Although one initiative had received some evaluation training it continued to develop these skills through the work of the collaborative:

"We already had good evaluation systems in place within the organisations but the collaborative gave us space to focus our thinking away from everyday work."

Practice

Collaborative members commented that they had **improved their confidence** to put their learning about self-evaluation into practice. This included confidence to continue to develop these skills and to use learning from evaluation and share it with others.

"I...feel more confident about putting it into practice. It has been a big learning curve for me. I am now better equipped for carrying out evaluation since joining the collaborative."

"Learning gained from the collaborative has given me the confidence to carry out evaluation in creative and proactive ways. I have confidence to try new things and try new ideas...now my approach is more confident, widespread in being open to other suggestions...to try new ideas."

"I'm more confident...Also I am more mindful now about what doesn't work and learning why something hasn't worked. This learning should be shared with others."

Finally, collaborative members reflected feeling more **ownership of the self-evaluation process** and the learning from it. For some this was about asking the right questions to ensure that evaluation findings were relevant. For others it was about taking control of evaluation and recognising the importance of using it to influence future activities, as well as feeding back to funders:

"Monitoring and evaluation was always a scary subject and was more about funders and their requirements for information...Now I realise that evaluation is something that you can and should take control over and not be told to do it."

"I often felt like evaluation was a chore... but it is important to pay attention to how you feel something has gone and the need to take account of the learning – it is not just about the reporting but also about the learning."

This combination of improved understanding and developing practical abilities highlights that **participants have improved their self-evaluation knowledge and skills**.

What made the collaborative work?

Commonality

All the initiatives recruited for the collaborative were undertaking work around early years, though not exclusively. When members were asked if this **common approach** was valuable or if learning from others working in different topic areas would have been more effective, their consensus was that the 'commonality' of early years was important:

"Other networks that I am involved in have common themes but when you have a similar agenda you can be more specific and share more learning."

"The projects were different and the purposes were different but we shared a common ground around early years and parents and the different issues relating to early years. We all have a basic level in common and didn't have to explain where we were coming from."

Learning together

CFHS and ESS delivered a support programme combining a range of learning opportunities over three stages. Each stage led the collaborative through the process of evaluation clearly and simply. This approach gave members time to understand the process and build evaluation systems into their work with support. Although the collaborative were pursuing diverse individual approaches they were united and stimulated by learning and sharing experiences together.

"This 'collaborative' I believe has proven an effective way of going about this business. The same format could be used for similar bits of work".

The collaborative commented that **the learning environment** contributed to the success of this approach:

"The collaborative provided a very supportive environment."

"At the beginning there was a feeling of anxiety and feeling unsure about if you were doing the right thing but there was an acceptance that we needed to be honest and this helped everyone to share and learn that others were in the same position."

The learning environment also helped to establish trust and members felt able to reflect honestly and openly with others:

"..it was invaluable how comfortable you felt within the collaborative around like minded, supportive people...A trust was built up which was very valuable to the collaborative – this was one of the positive things for the collaborative that the connection within the group was developed."

Members of the collaborative reflected that opportunities for 'the group to discover for themselves' was part of the learning journey and experience. This open and inclusive approach to learning was largely viewed as positive; however, for some this was difficult:

"Sometimes it would have been easier just to be told the answers. Sometimes having to discover for ourselves was quite painful."

"...trying to get the group to a place where they knew the answers for themselves without being told...sometimes it is nice just to be told and provided with an explanation...some discussions that we had didn't seem planned and sometimes we needed to take a 'detour'. It was not always straightforward from A to B to C and the detour provided valuable information but this did result in discussions taking longer than intended."

Peer-learning

Peer-learning sessions were introduced to enable collaborative members to share experiences and approaches in their work as well as sharing their learning about evaluation and how they were using it. These sessions helped to develop relationships within the collaborative and contributed to its success. The importance of this was reflected by everyone.

"We did have good opportunities for peer reflection...The time spent for peer reflection was valuable".

In particular, the collaborative reflected that a one-and-a-half day residential workshop was crucial in supporting **peer-learning between members**:

"In hindsight this was the best way to do it – to get away and spend the dedicated time with the group."

Flexibility

Delivering a support programme over three stages was very challenging for all the collaborative members. There was a planned timeline to deliver and complete the programme. However, every collaborative member was at different stages of developing and delivering activities. Keeping up momentum within the collaborative was difficult at times.

In addition to mixed learning opportunities **the collaborative needed to be flexible and adaptable** to meet the needs of everyone involved. This approach worked very well, with all participants reflecting on the value of both group and one-to-one support:

"Each individual project got our own individual support as each project was different and it was good to have individual support. Both approaches were really beneficial. The mixture was brilliant – the more people together the better – sharing ideas and talking about things."

The purpose and input of site visits were specific to the needs of each collaborative member and designed to focus on particular aspects of support needed at any given time. The opportunity to receive focused support was much appreciated, especially in times of difficulty. The participants felt that by receiving one-to-one support they did not have to continually explain their work as CFHS and ESS had seen and experienced it during site visits.

In addition, all participants valued the time as a group:

"The collaborative provided an opportunity to share and reflect with others – learning that what you are doing might be ok. Getting feedback and sharing ideas and experiences with others was very valuable."

"I am now confident, from the bank of ideas and strategies the collaborative have generated, for deciding the best way to evaluate."

What was difficult for the collaborative?

Time

There was a clear timeline for the delivery of the programme of support however, the **expectations and the commitment required** were underestimated:

"[We] didn't have expectations at the beginning but think we did misunderstand what it was all about."

"It was such a big commitment for a small project."

The timeline was extended during the programme to accommodate demands on collaborative members' time. The facility to be flexible to continue the work and 'see it through to the end' was welcomed by the collaborative:

"..when starting out I didn't know what the commitment would be, but that wasn't a problem."

"At the beginning was not clear that work would go on for two years, but this is a positive thing. The collaborative was a considered and sustained piece of work."

Due to the nature of the collaborative, members were coming together from across Scotland. It was difficult to **organise dates, times and venues for meetings** that were suitable for everyone:

"The timings and venues were a little difficult in terms of the practicalities of getting to the different venues."

"The group work was good/valuable but the travelling time was difficult."

Motivation

It was difficult to make the programme work when some members had **few or no activities to evaluate**. To give an example: two of the group members had to wind down activities for a period of time while funding for their organisation was negotiated. This had a knock-on effect on the delivery of their work with parents and children when activities did not take place. It also impacted on their involvement in the collaborative.

"The difficulty within the collaborative was that [the project] was not always happening and it was frustrating not being able to implement the learning gained from working with the collaborative, within an active project."

Keeping everyone motivated during these times mentioned above was difficult. One collaborative member had to eventually drop out after completing the learning in Stage Two due to conflicting demands on their time. This experience reinforced that the programme needed to be flexible and focused on the collaborative needs.

Staff

The support programme had asked for two members of each initiative to be involved. This could not be achieved as all of the initiatives involved were small with limited members of staff. It was difficult for single members of staff to drive the process of evaluation forward.

In addition some **staff changes** occurred during the support programme. Some collaborative members were replaced during periods of long-term leave and others moved on to be replaced by new staff members. For individuals joining the collaborative part way through this meant they missed stages or sessions and were 'playing catch-up whilst involved in the collaborative'. Additional site visits and training opportunities were put in place to ease the settling in process.

Although staff changes had an impact for the initiatives involved, the collaborative successfully maintained a trusting and comfortable learning environment:

"There were lots of people changes within the collaborative for different projects but the group still stuck with it and continued to connect."

Some new members who joined later did not always get the opportunity to put learning into practice, especially where their predecessor had already submitted a report.

Report writing

The collaborative found **writing case studies and reports challenging**, primarily due to time pressures. Assistance with writing a report was given to the group and individually. ESS circulated resources for writing reports such as guides and templates. Writing and reviewing together was important to explore different ways to report on outcomes and impact. Preferred options were explored so that the collaborative could write coherently while at the same time present 'their own voices'.

Once completed, collaborative members read all the reports and gave feedback to each other on key messages and learning. This process was very useful and helped members to confirm the reports were on course.

Members commented on their sense of achievement from having written the report:

"The achievement that I felt through doing the reports. In school [Burnfoot] I think : wow, I was involved in writing that report."

"Also realised that the organisation has not always appraised and celebrated food work and this should happen."

Some collaborative members commented that peer review and feedback on individual pieces of work was a positive and useful approach to report writing:

"The collaborative focused on pieces of work which the members brought - this was unique. The evaluation was from the basis of the project without considering the requirements of others (i.e. funders) – this was a different experience and possibly what kept people involved."

More support than anticipated was required to support collaborative members to complete written tasks. Clear and simple reporting on evidence from self-evaluation is a skill that needs to be developed. Input on writing skills may have made this easier.

Trying to enforce deadlines for report writing may have conflicted with individual needs. It was not always possible to let people go at their own pace all the time due to the timescales.

Learning into practice

Collaborative members reported that they are still in the process of a 'learning journey'. **Putting learning into practice** and using the skills they have developed through the collaborative will continue to develop.

"It's more about doing evaluation and putting into practice the learning from the collaborative."

"It would be useful to have a local monitoring and evaluation forum where people in community and voluntary sector could come together and provide peer support and bring together knowledge, skills and experience locally."

"It would be good to get the opportunity to use skills/learning with others experiences. Most people evaluate their own work but it would be great to get the opportunity to evaluate something else and try something new."

Embedding learning about evaluation

We explored how learning from the programme has been shared with colleagues and embedded within initiatives. There are a number of examples where this has begun to happen. For example, one initiative found that 'learning gained from the collaborative fits very well with other pieces of work within the organisation' such as preparing information for funders and having a staff management role to oversee evaluations.

"Recently we just produced information... detailing the evaluation tool which will be used for...the Big Lottery funded programme [we] will be delivering...this would have been more difficult to do two years ago...we felt good about the list that was produced and the range of techniques within it."

Two other collaborative members have continued to use self-evaluation skills with other pieces of work, for example:

"We used a similar layout/method and outcomes to evaluate the different groups. The learning from the collaborative was transferrable. It was good to have the confidence and be comfortable to explain why we were evaluating."

"We are using the learning with all the parenting courses which are run through the school. We have evaluated parenting courses several times before but now we are being more specific and looking at the outcomes during the learning programme."

However, feedback that collaborative members are **transferring their learning from one piece of work to another** does not demonstrate sharing of learning with their colleagues and within organisations. The findings indicate that members are able to transfer learning within their own work but less so within their organisations so that they can evaluate independently:

"Group work within the school is part of our work anyway...We are taking forward some of the ideas from the collaborative but we haven't had a group work session looking specifically at evaluation."

"It informs the worker but does not necessarily become embedded within the organisation's policy and practice due to issues of little time and issues of staff consistency within the organisations."

One of the reasons for this may be that collaborative members **do not feel confident enough to support others**. This was apparent for one member who, when asked on a scale of 1-10 how confident they felt in their ability to support others to do evaluation they said:

"When not linked with the project it would be a 6 but when working with my own project ideas it would be 8."

Collaborative members particularly highlighted challenges when trying to share learning within organisations. These challenges included issues of time, staff turnover and other priorities when working with groups:

"The learning around evaluation is really useful but it is sometimes hard to put the learning into practice when working with groups – other things often happen on the day...sometimes other things take priority."

"It has been difficult, have not really been able to [share learning] so far... There have been a lot of staff changes... including changed managers."

Some collaborative members experienced issues with **organisational capacity and management arrangements**:

"Capacity within the organisation is our biggest issue."

"We didn't have a manager or a director so there was no one to talk to about doing additional things. It would have been good to discuss things to find opportunities for doing additional things. I did what I had to do."

One member also mentioned the difficulty of 'getting participants of groups and sessional staff to support them to realise the value of evaluation...we really need extra capacity to do that.'

Buy-in

Some members experienced difficulties with getting **buy-in and commitment from external partners and funders** to support meaningful evaluation. An example highlighted a partner viewing food and health activity as an opportunity to achieve an output, rather than seeing the activity as having delivered an outcome.

"Not all public funding bodies have got their head around just looking for numbers – which is just mechanical and doesn't actually tell you anything, just numbers that you can pass on to others. No qualitative appraisal of anything."

Collaborative members commented that further effort will be required to raise awareness of the value of outcome-focused activity, and the associated learning and impact with others outside their organisations.

"There is not always the opportunity to share and present evidence to others but then it is about creating these opportunities."

It is important that buy-in to a support programme like the EYSEC is sought very early on from managers and colleagues as it is difficult to pursue without support from others. While others may recognise the value of evaluation this needs to be matched with resources such as time and co-operation.

Developing resources to engage managers and colleagues could be useful to attract support with evaluation. This could help others to be more engaged in evaluation approaches and make progress more achievable.

Collaborative members commented that they would need to talk to others more to encourage change with and within organisations, which can take time to progress.

Other sources of support

The evaluation carried out with participants at the end of the collaborative asked about any other sources of support for self-evaluation that they might have accessed. The majority of participants commented on only the Evaluation Support Scotland materials and those available for download from the website:

"Evaluation Support Scotland website – looking at mostly the same resources – all the things we had gone over. It was helpful to have them as a refresher or if I didn't have my notes at hand. There are also useful examples on the website."

"Not looked at any other websites – only the information that has been provided through the collaborative."

In addition to this, a couple of participants referred to other programmes of support that they have been involved with. For one participant this was a coaching programme that a member of their senior management team had been involved in and the work from the two programmes successfully complemented each other:

"The two different programmes were beneficial in terms of gaining learning and then progressing the learning."

For others it was evaluation that was built into other areas of their work. One participant delivers a specific programme for young people and this has a robust evaluation for accreditation purposes. Another participant had been offered evaluation support as a result of other grant funding they have received. This support is being offered in the form of a 'one-hour virtual forum and bi-monthly sessions'. At the stage of evaluation the participant had not used this support yet. These findings suggest that participants have not experienced much support for developing their self-evaluation capacity – other forms of support appear to be more tailored to particular pieces of work.

Final thoughts

This report has described and reflected on how the collaborative has been supported to develop and improve its self-evaluation skills to demonstrate its impact.

The collaborative members have shown in their evaluation reports (Stage Two) that they are achieving their planned outcomes and more.

There have been many challenges throughout the support programme, however all collaborative members have made significant progress and are eager to continue embedding evaluation systems into their work. Our learning from the collaborative suggests some thinking about helping this process along.

The collaborative has learned and experienced how to connect their activity to and evidence their outcomes and present a clearer picture of their impact. We hope you have learned from the collaborative's experiences and this report has helped to inform your understanding of the wider impact of self-evaluation.

Everyone has had to develop evaluation skills to demonstrate their impact more systematically. The initiatives involved in the collaborative give a small snapshot of community food and health initiatives impact on delivering health outcomes. There are numerous others evaluating their work and in a position to help those tasked with measuring outcomes.

The contribution and impact of community food and health initiatives both locally and nationally cannot be underestimated.

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