

What makes good evidence? Key points from Summer 2013 events

Introduction

The aim of the *Improving your evidence* project is to develop the evaluation capability and expertise of Voluntary, Community and Social Enterprise (VCSE) organisations who provide services to offenders.

The project has been commissioned by the National Offender Management Service (NOMS) and is being managed by:

[New Philanthropy Capital \(NPC\)](#): A think tank and consultancy for the charity sector as a whole. NPC's overall aim is to help make charities as effective as possible, and for many years we have focussed on impact measurement and evaluation as an approach to this.

[Clinks](#): Clinks is the national membership body for VCSE organisations working in Criminal Justice. Clinks aims to ensure the Sector, and all those with whom they work, are informed and engaged in order to transform the lives of offenders.

In June and July 2013 we held events in England and Wales to explore the question of what makes good evidence and how the VCSE Sector could be supported to use and collect it.

Why is evidence important?

At the start of the events we outlined three main reasons why VCSE organisations should think about evidence:

To communicate aims and achievements: To help secure partnerships, funding and contracts. *We refer to this as the commissioner perspective*

To contribute to the wider evidence base: To share learning and improve the effectiveness of all our work. *We refer to this as the researcher perspective.*

To understand and improve: To get assurance that what we are doing works and to learn how to become increasingly effective. *We refer to this as the provider perspective.*

The three perspectives are complementary and evidence collected to serve one aim should be helpful for another. Nevertheless it's helpful to be aware of the distinction and to understand the slightly different language used - so you can translate the different requirements entailed. It is also worth thinking about which is most important for your organisation as it may affect your priorities.

What makes good evidence?

After describing the reasons for evidence collection we heard from a range of practitioners, commissioners and researchers on the question of ‘what makes good evidence?’ These discussions are summarised below.

Commissioner perspective

Both public and private sector commissioners were represented at the events. Speakers focused on the implications of the Transforming Rehabilitation¹ reforms, but the messages are also applicable to services funded from other sources. In this context, commissioners were asked what good evidence meant to them.

Firstly, speakers recognised that **statistical evidence of the impact on re-offending itself is very hard to obtain**. As such, while it would be valuable to have some evidence on reoffending², it is perfectly possible to commission services without it.

Commissioners acknowledged that **few organisations or services can rehabilitate offenders by themselves** and that there is no single route to desistance (no “silver bullet”). Rather a range of providers are expected to *contribute* to offenders’ journeys from crime. What’s important is that providers understand and can articulate their particular contribution.

Related to this, commissioners saw an understanding of **intermediate outcomes** as an important element of a good evidence strategy. These are the factors known to be associated with reduced reoffending and are often more measureable in the short-term³. Commissioners said they wanted to work with providers who can be clear about which intermediate outcomes they are aiming for, *how* their service will contribute to them; and show some evidence of previous achievement.

Commissioners told us that their ideal mix of services would consist of **flexible packages of support from a range of providers**, which can be tailored to individual offenders’ needs. This will mean having access to a range of expertise and capabilities within provider organisations, including skills, experience and local knowledge. Indeed, an important argument for the distinct value of VCSE organisations is that they better understand local needs and have more credibility amongst the people they work with.

More specifically, commissioners highlighted some of the main issues that they wanted evidence about *prior to commissioning*:

¹ Transforming Rehabilitation is a reform of the way criminal justice services are delivered which reflects the government’s aim of ‘opening-up’ public services and for more local determination of what is delivered. The Ministry of Justice (MoJ) will commission 21 regional contracts to run over a number of years, which it hopes will allow time for the emergence of diverse and innovative supply chains. Commissioners stressed that, for those involved in Transforming Rehabilitation, working practices are likely to change - with more emphasis on collaboration and innovation, as well as on saving money.

² The most likely source would be from the [Justice Data Lab](#).

³ Intermediate outcome are sometimes referred to as ‘soft outcomes’, ‘short-term outcomes’ ‘proxies’ or ‘pathways’. NOMS defines the nine reoffending factors (criminogenic needs) related to criminal behavior that have strong evidence to support their link to reoffending and desistance as; Anti-social thinking and behavior; Pro-criminal attitudes; Social supports for crime (antisocial associates); Drug misuse; Alcohol misuse; Family/marital relationships; Work; Anti social lifestyle, lack of positive recreation/leisure activities; and Homelessness.

- The particular **client group** that providers are targeting and what they know about them (e.g. local data/research about offender types, their needs and context).
- The provider's **understanding of the issues that impact on re-offending for this group** - and what existing evidence suggests are the best solutions.
- **What the provider's service aims to achieve for the client group** (their contribution to intermediate outcomes) and how they plan to do this – see [‘A brief introduction to developing a theory of change’](#) for further information on how you can communicate this.
- Understanding of **how the provider's contribution will complement other services**, and their previous experience of working in partnership.
- The **special qualities of the organisation** and its services; its uniqueness, values, passion and a sense of confidence in the impact achieved.
- **Assurance about the organisation's track record**. This may include output/outcome data from previous projects such as levels of engagement achieved.
- **Systems for assessing whether projects have been successful**. For example, a description of monitoring and evaluation approaches and how the organisation uses evidence to continuously improve.
- **A realistic account of resources, scale and geographical coverage**. Ideally, this might include other sources of funding they can bring to the contract. Another important message is not to over-promise; to start small and build the relationship with the commissioner over time.
- **An accurate assessment of costs**, and a consideration of value for money alongside service quality (and a recognition that services will be delivered within a more limited funding environment).
- **The ability to be flexible and adaptive**. For example, strategies for dealing with challenging cases.

Once contracts are in place, commissioners' evidence requirements will focus more on monitoring that services are being effectively delivered. Therefore they may ask for service level agreements and regular updates on performance indicators such as the number of clients and levels of contact. Providers will be viewed more favourably if they have previous experience of effective monitoring systems - for example approaches to case management and measuring user engagement. However, it would be unwise to invest in new systems until more details of the Transforming Rehabilitation monitoring requirements are available.

It should be noted that there was not complete consensus on these requirements; different commissioners emphasised different evidence priorities. Perhaps the most consistent message was that providers should think carefully about what potential commissioners are looking for – in particular the outcomes they want – and should frame their offer to articulate exactly how the service will contribute to these outcomes (alongside an account of quality standards, costs and scale).

Some panel members were also keen to stress that this is not about doing whatever commissioners appear to want. Innovation is a key aim of the Transforming Rehabilitation reforms, so providers should feel they have license to take ideas, to try to improve them and to feedback to commissioners when they believe there is a better approach. We also heard

the argument that commissioners need to improve their *own* understanding of the existing evidence-base, and that if they really want to understand what works they should be prepared to invest in research and evaluation.

Another observation is that commissioners were more interested in *what evidence shows*, than the standard of evidence or methodology used. The most we can say on the latter is that commissioners are looking for a diverse mixture of sources (quantitative and qualitative), alongside an impartial assessment and reasonable conclusions.

Finally, providers who want to be part of Transforming Rehabilitation were encouraged to act quickly. Contract negotiations will be taking place during autumn 2013 so providers will benefit from marshalling and presenting their available evidence as soon as possible.

Research perspective

The research perspective at the events was represented by NOMS and other delegates who support the aim of basing services on established knowledge of what works. They described an overall vision in which evidence of what works plays an increasing role in the design, commissioning and delivery of services. This vision goes beyond criminal justice and is reflected across all areas of public policy. For example, the [What Works Evidence Centres for Social Policy](#), the [Alliance for Useful Evidence](#) and [Inspiring Impact](#).

The focus of the researcher perspective is less on the performance of individual organisations and services, and more about the general lessons that can be drawn. The key questions are therefore;

- What are the most important pathways through which offenders desist from crime?
- What kinds of services are effective at encouraging and supporting these pathways?
- How is this different for different types of offenders in different circumstances?
- What is good practice when working with offenders and how can we maximise impact?

In trying to answer these questions researchers within NOMS place a high premium on quantitative data and robust methodologies that give confidence in the findings. NOMS '[Commissioning Intentions](#)' outlines their views on the value of different evidence types. There are also some widely accepted standards of evidence such as the [Maryland Scale](#) which rank different methodologies in order of validity.

For researchers interested in improving the evidence base, elements of 'good evidence' are:

- **A theory of change:** Projects should begin with a clear articulation of which client groups will be targeted and how services are intended to work - including a consideration of existing evidence and relevant aspects of [desistance theory](#).
- Like commissioners, researchers recognise the value of **intermediate outcomes** as the way to understand the mechanisms that lead to reductions in offending. To help with this, NOMS have commissioned the development of tools for measuring intermediate outcomes in arts, mentoring and family/peer interventions. These are currently being piloted and will be published in 2014.

- Consideration of the **counterfactual**⁴: In which outcomes can be compared against people who have not received the intervention or service - to more confidently show what impact has been achieved.
- **Differences between client groups and settings**: Researchers are interested in being able to refine their understanding for different segments of offenders. The question 'what works?' is therefore an oversimplification. More accurately, it is 'what works, for whom, in which circumstances?'
- **Consistency of data collection**: If local service providers can collect and share the same information it enables aggregation and more powerful analysis of how and why outcomes are achieved.
- **Quality of data collection and analysis**: This covers a very wide range of issues such as sample sizes, questionnaire design, good response rates, representativeness and proficiency in analysis.
- **Triangulation**: This is the technical term for mixing different evidence sources to create a more detailed and persuasive picture.
- **Impartiality/objectivity**: This can be challenging when providers are evaluating their own services, but in order to contribute to learning it's vital for evaluators to be honest about the limitations of their research and draw reasonable conclusions.
- **A focus on learning**: Researchers are particularly interested in what findings tell us about the client group and lessons for the future – which is often missing from evaluations.

Another focus for researchers is ensuring that the existing evidence base is used and that commissioners and providers understand where there are weaknesses or gaps (so they can try to fill them). NOMS described a number of initiatives that are underway towards this aim:

- NOMS [Commissioning Intentions](#) and [Needs and Evidence Tables](#) include reviews of the available evidence and information about intermediate outcomes.
- More information will be published by NOMS on good practice for working with different segments of offenders - for example what distinguishes offenders who have been convicted of acquisitive crime.
- A number of "better outcomes" guides and rapid evidence assessments (REA) will be published focussing on issues such mentoring, gangs, alcohol, drugs, women offenders, arts and family/peer interventions.
- MoJ is expected to publish a high level summary of the evidence of what works with reoffenders over the Summer – as outlined in the Transforming Rehabilitation strategy document.
- A glossary of the terminology around evidence and a hierarchy of different evidence types will be published for use across Government.

To summarise the researcher perspective, services will be more effective if they are based on existing knowledge of what works in particular circumstances. To ensure lessons are

⁴ How the world would be without the service, this is also known as a 'control group'

learned and the evidence base is improved, we need to develop the evaluation skills and capacity of everyone working on offender rehabilitation.

Provider perspective

Our events were designed to hear the views of VCSE Sector providers themselves on the questions of what makes good evidence and the support providers need. This section highlights key messages.

Good evidence gives VCSE organisations the opportunity to test what they do. Few would doubt the good intentions of VCSE organisations, but intentions do not necessarily equate to impact - so evidence can provide this assurance. This has a moral dimension: VCSE organisations are spending public or donor's money (and service user's time and energy) so there is an obligation to check resources are being used as well as possible.

Good evidence collection should also give VCSE organisations **more detailed information about what is working, and why?** All organisations learn and improve as they go, but the advantages of a more systematic approach include:

- Larger and better datasets which can be mined for hidden insights.
- Better mechanisms for collecting service user feedback.
- More regular and reliable updates of performance.
- An assessment of longer-term outcomes and sustained impact.
- The opportunity to link achievements to costs.
- More opportunities to share learning, both internally and externally.

Similarly, good evidence should highlight **what is not working**. Although this can sometimes be difficult to hear, learning from negative feedback and failed services is often the best way to improve services. Moreover, if we are not sure if a service works it is better to implement it on a small scale and collect evidence quickly - so the cost of failure is minimised.

Another important feature of good evidence is that it enables providers to **demonstrate their achievements to stakeholders**. It provides the basis for telling people about achievements, communicating to commissioners and raising profile. Good evidence also enables stronger business cases and funding applications.

Evidence gives a **voice to service users and frontline workers**. For example, during the events we heard about the challenge of working with offenders who have multiple and complex needs, and the capabilities and personal qualities frontline staff need to have to overcome these. We also heard examples of service user involvement in evaluating services and how this gives authenticity to evaluation. Good evidence highlights these perspectives and enables others to learn from your experiences.

Similarly, good evidence helps charities and **providers influence policy and have better conversations with commissioners**. For example, aspects of good practice, such as the importance of meaningful relationships between offenders and mentors, can be overlooked because they are seen as less measurable. Having evidence on the importance of these features helps reinforce their status. Evidence can also be used to substantiate an

organisation's ethos and mission; answering the question, why do you believe what you believe and do what you do?

Good evidence should not be too difficult or costly to collect. This was highlighted as a real tension: We heard from one provider who suggested that data should be routinely collected on everything, but others highlighted the drain on resources this entails. There is no easy answer to this but we recommend; a thorough consideration of evidence needs before deciding on methods; investigating short-cuts like sampling and online data collection; and feeding back to commissioners if demands seem unreasonable or nonsensical.

A related concern was that the **collection of good evidence should be supported.** It was argued that commissioners and researchers need to recognise organisations' limited resources, be clear about their evidence requirements and provide both financial and non-financial support to help organisations produce it. One area where support was needed was access to reconviction data and the [Justice Data Lab](#) was highlighted as one solution. This offers an opportunity for charities to compare the reconviction data for their service users with a control group, and is therefore a very simple and effective way to get data on reconviction rates (see our [Justice Data Lab briefing](#) for more details).

Evidence can facilitate and be enhanced by **collaboration with other organisations** and partners. For example, delegates felt that common datasets and a shared understanding of intermediate outcomes would lead to greater collective insight and scope to compare their achievements. As a vision this is similar to the goal expressed by researchers; of using evidence as a means for providers to work together and to learn and adapt from one another.

A final feature of good evidence mentioned by providers was that it should be **engaging, interesting and even fun!** Evidence offers new insights and surprises and gives organisations more potential to improve. It can also help to **boost morale** by showing staff, volunteers and service users how the service really makes a difference.