

Measuring what matters:

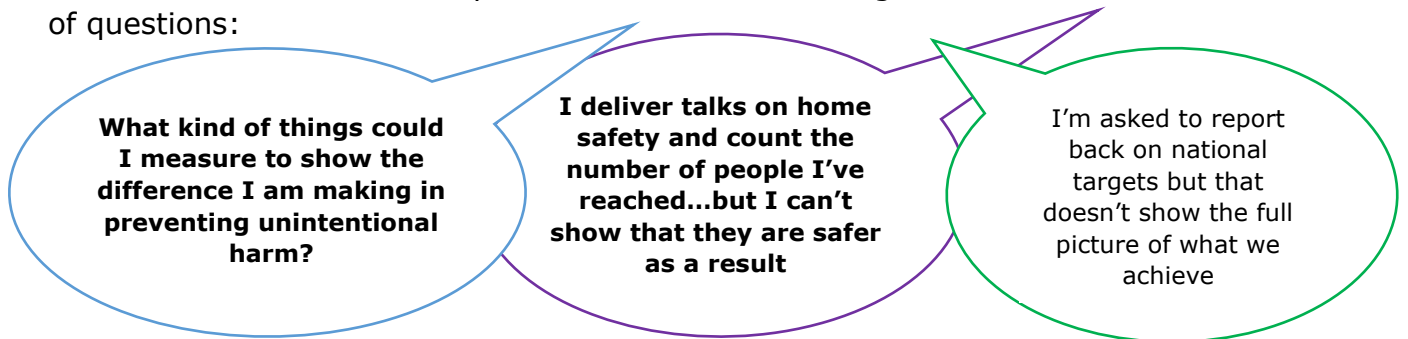
**An evaluation framework to support practitioners
delivering activities to prevent unintentional
harm or injury**

May 2019

1.0 How to use this framework?

This guide has been developed by practitioners, for practitioners, to help support them in evaluating their activities to prevent unintentional harm.

We think it will be useful for practitioners who are asking themselves these kinds of questions:



Step 1: Find your broad activities within the logic model in Section 3. You may be working with a specific priority group or you may be engaging with the whole population.

For example:

Activity – provide home safety visits for everyone in my local area, prioritising older people who may be at risk of falling

Step 2: Think about what you expect to achieve by running these activities. Then chose a short-term outcome for your work.

For example:

Outcome – the people I work with have a better understanding of risks

Step 3: Have a look through the indicators in Section 4 and pick two or three which would work for your target group. Indicators tell us when our outcome is being achieved and give us clues about where to collect evidence from.

For example, indicators for the above outcome might be:

- Can share knowledge of risks with others
- Can suggest ways to stay safe
- A family member says they are talking about risks

*you may want to tailor these to the context of your activities

Step 4: Have a think about what the best method for collecting this type of feedback. This framework has some suggested principles for collecting evidence. Go to Section 5 for our tips on selecting or developing methods.

2.0 Why have we created this framework?

2.1 Purpose

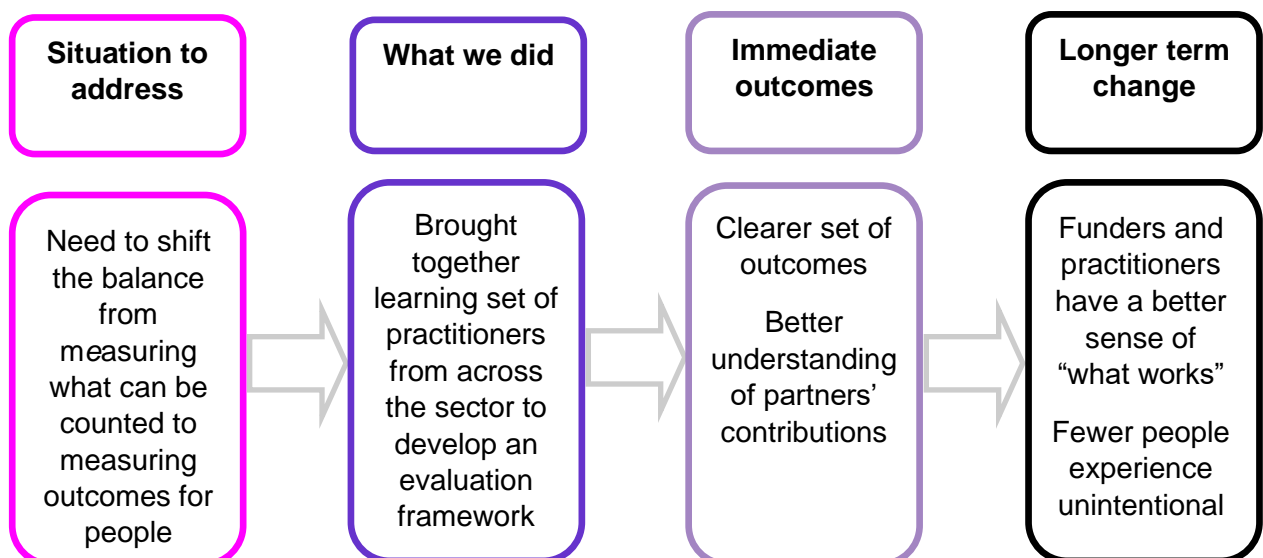
This framework helps to shift the balance from measuring only what can be counted (such as number of people, number of events) to measuring what matters in order to focus on outcomes for people. By using this framework practitioners will:

- Be better able to show the impact of their work on people and communities
- Have a better understanding about “what works” in delivering preventative activities and be able to share this with others to promote learning

2.2 How we created the framework

This framework has been shaped by a range of practitioners working directly with people and communities at the local level to tackle unintentional harm. You can see the list of practitioners who were involved in creating this framework in section 6. The framework reflects the broad range of activities that are already being delivered with different priority groups to tackle unintentional harm. These are delivered by a diverse range of organisations including third sector organisations/community groups and statutory services. Some activities are informed by a substantial evidence based while others are informed by practice experience. Collecting evidence by using this set of indicators will help us improve the evidence base for “what works” in addressing unintentional harm.

2.3 What we did



2.4 Principles for this framework

The practitioners who helped develop this framework over three sessions felt that the framework should help practitioners demonstrate the impact of their work by being:

- Be brief and simple
- Straightforward and useful
- Not sit on a shelf
- Value practitioner knowledge and experience
- Be inclusive (for the different types of evidence we collect from data to case studies, stakeholder voices)
- Adaptable to those working across a range of areas/services
- Tool for learning (by helping practitioners understand the factors that made the activities successful)

2.5 Priority groups

The priority groups mentioned in this framework have been identified by the Building Safer Communities Strategy and include older people, children under 5 and people from low income areas. Different groups of people tend to experience different types of unintentional injury and at disproportionate levels. For more detailed information about areas of priority please visit <http://www.bsc.scot/>

Step 1: Chose the part that reflects what you do. We don't expect you to deliver all these activities to all these groups.

2.6 Assumptions about the model:

- Created **by** practitioners, **for** practitioners
- No expectation that people will use all the outcomes. It is designed as a resource for practitioners to dip into to help support their measurement of prevention activities
- Not all outcomes in the model will be relevant for all people. For example, some people may have a good understanding of the risk that stairs pose to their children and are looking for ways to access safety gates
- This framework is not a proven theory of change
- These activities may also lead to other positive benefits, such as improved health and wellbeing

The learning set members who created this framework felt that it was important to highlight that **how** activities are delivered is very important in achieving outcomes for people.

- Activities which are participatory and interactive are more effective in achieving outcomes because participants feel more engaged
- By having good quality conversations, we are more likely to achieve our outcomes
- People aren't always ready to change their behaviour so activities should be shaped to motivate people to act. This may particularly be the case if people have not experienced unintentional harm. Sustained behaviour

change is more likely to be brought about by multiple interventions over time

- Practitioners should aim to reflect and share learning about what works and what doesn't work in achieving outcomes to promote peer learning within the community safety sector

3.0 Measuring what matters – logic model

Situation we are tackling	Activities which practitioners currently deliver to achieve outcomes	Short term outcomes	Medium term outcomes	Longer term change
<p>People are experiencing unintentional harm which could have been avoided or prevented if they were enabled and supported to identify risks and make appropriate interventions to manage that risk.</p> <p>We know that some groups are at greater risk of unintentional harm, including: older people, young children and people from low income areas.</p>	<p>Older people</p> <ul style="list-style-type: none"> strength/balance classes exercise social activities peer support falls screening home safety visits risk self-assessments conversations about home/personal safety falls roadshows provide adaptations/equipment referral to falls/bone health pathways for those who have fallen 	<ul style="list-style-type: none"> more socially connected improved confidence in balance and walking more people can afford the equipment they need to stay safe better understanding of risks 	<ul style="list-style-type: none"> improved/maintained strength and balance increase/maintain social activity less socially isolated reduced fear of falling understand the steps they need to take to stay safe more motivated to make changes use appropriate equipment to keep safe 	<ul style="list-style-type: none"> fewer people experience unintentional harm reduced falls reduced fatalities from unintentional harm health inequalities reduced in relation to unintentional harm people feel more empowered to stay safe more resources directed to unintentional harm prevention unintentional harm is a well understood and prioritised policy issue strengthened communities
	<p>Parents and carers</p> <ul style="list-style-type: none"> information/advice conversations about child safety demonstrations/talks information about risk associated with stages of child development helping access/install equipment 	<ul style="list-style-type: none"> better understanding of risks for children have equipment they need to keep children safe 	<ul style="list-style-type: none"> understand steps to take to stay safe more motivated to make changes use appropriate equipment to keep children safe able to respond when injury occurs 	
	<p>Children and young people</p> <ul style="list-style-type: none"> information/advice conversations about safety demonstrations/talks interactive safety activities 	<ul style="list-style-type: none"> better understanding of risks 	<ul style="list-style-type: none"> understand the steps they need to take to stay safe able to respond when injury occurs more motivated to make changes 	
	<p>People in low income areas</p> <ul style="list-style-type: none"> leaflets/campaigns help to access grants conversations about home/personal safety how to use equipment 	<ul style="list-style-type: none"> better understanding of risks more people can afford equipment they need have the equipment they need to stay safe 	<ul style="list-style-type: none"> understand the steps they need to take to stay safe more motivated to make changes use appropriate equipment to keep safe 	
	<p>Society/whole population</p> <ul style="list-style-type: none"> campaigns talks/information sessions to reach risk groups digital technology for safety physical activity 	<ul style="list-style-type: none"> better understanding of risks increased knowledge of digital technology in relation to health and safety 	<ul style="list-style-type: none"> understand the steps they need to take to stay safe more motivated to make changes more confident to talk to others about staying safe 	
	<p>Professionals, partners, service providers</p> <ul style="list-style-type: none"> partnership working networking training on risks for priority groups influencing policy carrying out research 	<ul style="list-style-type: none"> better understanding of each others services better understanding of those at risk / how to provide support more older people assessed have better conversations with people about safety 	<ul style="list-style-type: none"> decision makers have a better understanding of the issues more professionals champion issues better referral pathways are created more people at risk are identified better understanding of activity which prevents unintentional harm 	

4.0 Indicator bank for outcomes related to preventing unintentional harm

We have provided this list on page 5 onwards to help suggest ways which would indicate your outcome is happening.

Each of these outcomes has been taken from the logic model in section 3. When using this framework, you can make your outcomes even more specific if required.

We have given examples of indicators – things that people might say or do, or that practitioners might observe, which would **indicate** that the outcome is happening. Indicators give you clues about where your evidence will come from.

Indicators should be:

- simple
- specific
- possible to measure more than once

Step 2: Please choose a short-term outcome (or outcomes) which you would expect to see happen through your activities. Outcomes describe the difference you make to people.

If you work with people over a longer period of time you may be more likely to see medium term outcomes happening too.

Step 3: Then choose two or three indicators which would work for your target group.

It is not an exhaustive list and you may be able to come up with better ones for your work. Please do adopt or adapt these indicators to fit your own work. If you would like to have a go at developing your own indicators please take a look at ESS's Support Guide [Working out what to measure](#).

4.1 Outcomes and indicators for older people

Short term outcomes (the difference you make)	Indicators (what would show that the outcome is happening)
Older people are more socially connected	Attendance at classes/groups
	Level of activity outside the class/group
	Giving time to one another
	Levels of volunteering
	Using digital technology to keep in touch with family/friends
	Engaging/talking to other people in classes/groups
	Sharing experiences with others
	Number of times person sees people they don't live with
	"I am taking part in activities"
	"I feel socially connected"
	"I have a peer support network"
"I am connected to people who can help me"	
Older people have improved confidence in balance and walking	Observe changes in posture
	Taking part in physical activities or groups
	Level of confidence using walking aid
	Observe appropriate use of walking aid
	Feelings of confidence in balance and walking
	"I can attend the groups I want to"
	"I no longer need my walking aid"
	"I encourage other people to take part in activities"
	"I am not scared to use the back door/go into the garden"
"I can go out when I want to"	
More people can afford the equipment they need to stay safe	Take up rate of equipment/number of units purchased
	Number of enquiries about equipment
	Number of applications
	"I know how to access grants/benefits in order to buy equipment"
	"I can afford equipment the equipment I need to keep safe"
Older people have a better understanding of risks	Asks for more information
	Suggestions for ways to reduce risks/able to suggest ideas
	Able to share personal experiences about risks
	Can share ways of staying safe with others
	3 rd party (family member) says they are talking about risks
	"I feel able to take some actions"
	"I can identify risks that might affect myself"
	"I can remember what I learnt about Y risks X months ago"
	"I feel safer since I learnt how to do/about X"
	"I feel confident that I can be responsible for my own safety when doing..."
	"I'm aware how to reduce the risk of Y"

Medium term outcomes (the difference you make)	Indicators (what would show that the outcome is happening)
Older people have improved/maintained their strength and balance	Ability to carry out everyday tasks/"I can carry the shopping home"
	Life curve points
	Family members observations
	Ability to take part in activities
	Number of sit to stands in 30 seconds
	Length of time it takes to do 5 sit to stands
Older people have increased/maintained their social activity	"I am taking part in activities when I want to"
	"I feel socially connected"
	"I have a peer support network"
	"I am connected to people who can help me"
Older people are less socially isolated	"I am taking part in activities when I want to"
	"I feel socially connected"
	"I have a peer support network"
	"I am connected to people who can help me"
Older people have a reduced fear of falling	"I can go out when I want to"
	"I can get tasks done around my home"
	"I have adaptations in my home to make me feel safe"
	"I know who to call if I need help"
	"I feel people are looking out for me"
	"I am not likely to fall at home"
	"I feel secure in my own home"
	"I can manage everyday tasks outside the home (getting on the bus etc)"
Older people understand the steps they need to stay safe	"I know what I need to do to keep safe"
	"I know where to go for information/support"
	"I understand what equipment I need"
	"I know how to take action if an unintentional injury occurs"
Older people are more motivated to make changes	Tell us they will make changes/plan changes they will make/"I am motivated to..."
	Sharing information with friends
	Confirming the changes they have made
	Engaged in conversation about the subject
	Ask relevant questions/ask for information
Older people use appropriate equipment to stay safe	They use the equipment
	Others (family member/teacher/practitioners) sees them using equipment
	Thank you for your help
	"I know how to use the equipment"
	Tell others (peers) how to use the equipment
	Tell you about things they can now do
	"I understand the purpose of the equipment"
	"I understand when the equipment is unsuitable (using walking aids designed for other people)"
	"I have the correct walking aid to suit me"
	"I feel safer because..."

4.2 Outcomes and indicators for parents/carers

Short term outcomes (the difference you make)	Indicators (what would show that the outcome is happening)
Parents/carers have a better understanding of risks for children	Sharing knowledge of risks with others
	Asks for more information
	Take leaflets with information
	Suggestions for ways to reduce risks/able to suggest ideas
	Able to share personal experiences about risks
	"I know how to protect my children/family"
	"I feel able to take some actions"
	"I can identify risks that might affect myself or my family"
	"I can remember what I learnt about Y risks X months ago"
	"I have changed how I do X since I learnt about Y"
	"I feel safer since I learnt how to do/about X"
"I know the risks associated with the different stages of child development"	
More people have the equipment they need to keep their children/families safe	"I know where to go for information/support"
	"I understand what equipment I need"
	"I understand the purpose of the equipment"
	"I can afford the equipment I need"
Medium term outcomes	
Parents/carers understand the steps they need to stay safe	"I know what I need to do to keep safe"
	"I know where to go for information/support"
	"I understand what equipment I need"
	"I know how to take action if an unintentional injury occurs"
Parents/carers are more motivated to make changes	Tell us they will make changes/plan changes they will make/I am motivated to...
	Sharing information with friends
	Confirming the changes they have made
	Engaged in conversation about the subject
	Ask relevant questions/ask for information
Parents/carers use appropriate equipment to keep children safe	They use the equipment
	Thank you for your help
	Tell others (peers) how to use the equipment
	"I know how to use the safety gate/CO detector etc"
	"I understand the purpose of the equipment"
	"I feel safer my family is safer because..."
	"I understand how to use the equipment"
	"I understand when the equipment is unsuitable (safety gates only effective for 2 years)"
Parents/carers are more able to respond when unintentional injury occurs	"I know how to take action if an unintentional injury occurs"
	"I know where to go for more information"

4.3 Outcomes and indicators for children/young people

Short term outcomes (the difference you make)	Indicators (what would show that the outcome is happening)
Children and young people have a better understanding of risks to themselves	Sharing knowledge of risks with peers/parents
	Asks for more information
	Able to suggest ideas to reduce risks
	Able to share personal experiences about risks
	Family member/teacher says they talk about the risks
	"I understand X"
	"I know how to keep myself safe"
	"I can remember what I learnt about Y risks X months/years ago"
	"I feel confident that I can be responsible for my own safety when doing..."
Medium term outcomes	
Children/young people understand the steps they need to stay safe	"I know what I need to do to keep safe"
	"I know where to go for information/support"
	"I understand what equipment I need"
	"I know how to take action if an unintentional injury occurs"
Children/young people are more motivated to make changes	Tell us they will make changes/plan changes they will make/I am motivated to...
	Sharing information with friends
	Confirming the changes they have made
	Engaged in conversation about the subject
	Ask relevant questions/ask for information
Children/young people are more able to respond when unintentional injury occurs	Can tell you when they should contact adult/emergency service
	"I know what to do if an unintentional injury occurs"
	"I know where to go for help when X happens"

4.4 Outcomes and indicators for people in low income areas

Short term outcomes (the difference you make)	Indicators (what would show that the outcome is happening)
The people I work with have a better understanding of risks	Sharing knowledge of risks with others
	Asks for more information
	Take leaflets with information
	Able to share personal experiences about risks
	Can share ways of staying safe with others
	"I know how to protect my children/family"
	"I can identify risks that might affect myself or my family"
	"I can remember what I learnt about Y risks X months ago"
	"I have changed how I do X since I learnt about Y"
	"I feel safer since I learnt how to do/about X"
	"I'm aware how to reduce the risk of Y"
"I know the risks associated with the different stages of child development"	
More people can afford the equipment they need to keep their children/families safe	Take up rate of equipment/number of units purchased
	Number of enquiries about equipment
	Number of applications
	"I can afford equipment the equipment I need to keep family safe"
	"I know how to access grants/benefits in order to buy equipment"
More people have the equipment they need to keep their children/families safe	"I know where to go for information/support"
	"I understand what equipment I need"
	"I understand the purpose of the equipment"
	"I can afford the equipment I need"
Medium term outcomes	
The people I work with understand the steps they need to stay safe	"I know what I need to do to keep safe"
	"I know where to go for information/support"
	"I understand what equipment I need"
	"I know how to take action if an unintentional injury occurs"
The people I work with more motivated to make changes	Tell us they will make changes/plan changes they will make/I am motivated to...
	Sharing information with friends
	Confirming the changes they have made
	Engaged in conversation about the subject
	Ask relevant questions/ask for information
The people I work with use the appropriate equipment to keep children safe	They use the equipment
	Thank you for your help
	Tell others (peers) how to use the equipment
	"I know how to use the safety gate/CO detector etc"
	"I understand the purpose of the equipment"
	"I feel safer my family is safer because..."
	"I understand when the equipment is unsuitable (safety gates only effective for 2 years)"

4.5 Outcomes and indicators for the general population

Short term outcomes (the difference you make)	Indicators (what would show that the outcome is happening)
The people I work with have a better understanding of risks	Sharing knowledge of risks with others
	Asks for more information
	Take leaflets with information
	Suggestions for ways to reduce risks/able to suggest ideas
	Able to share personal experiences about risks
	Can share ways of staying safe with others
	"I know how to protect my children/family"
	"I can identify risks that might affect myself or my family"
	"I have changed how I do X since I learnt about Y"
	"I feel safer since I learnt how to do/about X"
	"I'm aware how to reduce the risk of Y"
"I know the risks associated with the different stages of child development"	
The people I work with have increased knowledge of digital technology in relation to health and wellbeing	"I can use fitbits (or similar) to monitor family member's activity levels"
	"I can use fitbits (or similar) to monitor my activity levels"
	"I can use technology to monitor my blood pressure and send to GP"
	"I can speak to family/friends online"
	"I can make an appointment online to see my GP"
	"I can get help through community alarm if I fall"
	"I can get help through telecare technology when I need it Fire detectors/ flood detectors/heat detectors"
	"I'm aware of NHS apps that can help me improve my health and wellbeing"
	"I know where I can go to learn/get assistance with digital technology"
Medium term outcomes	
The people I work with understand the steps they need to stay safe	"I know what I need to do to keep safe"
	"I know where to go for information/support"
	"I understand what equipment I need"
	"I know how to take action if an unintentional injury occurs"
The people I work with are more motivated to make changes	Tell us they will make changes/plan changes they will make/I am motivated to...
	Sharing information with friends
	Confirming the changes they have made
	Engaged in conversation about the subject
	Ask relevant questions/ask for information
The people I work with are more confident to talk to others about staying safe	Understand how to make a referral for more assistance for a family member
	"I am confident to raise concerns with others"
	"I know who to contact"

4.6 Outcomes and indicators for practitioners/partners

Short term outcomes (the difference you make)	Indicators (what would show that the outcome is happening)
Practitioners have a better understanding of each other's services	Shared understanding of risk
	Shared understanding of support services
	"I refer people on to ..."
	"I know who to ask about..."
	"I have asked for training about..."
	"I share information with the community about other services/support available"
	"I try and keep up to date about service provision"
Practitioners have a better understanding of those at risk	Ability to identify risks
	"I understand the challenges faced by particular groups of people in relation to unintentional harm"
	"I try to help people"
	"I understand the challenges faced by older people/carers of young children etc"
	"I know what's happening in my area"
	"I understand how the stages of development in children/ aging in older people/ poverty impacts on safety"
Practitioners have a better understanding of how to support those at risk of unintentional harm	"We regularly access training/support on the issue"
	"We are connected to other groups to improve our practice"
	"We share learning about risk/unintentional harm within our team"
	"I know how to deal with issues when they arise"
	"We offer proactive/preventative services to reduce risk of unintentional harm"
	"I know where to refer people to more help/information/ support locally"
More older people assessed for risk of falling	Number of older people level 1 assessment
	Number of older people level 2 assessment
	Number of home safety visits
Partners/practitioners have better conversations with people about risk	Level of understanding of the value their contribution makes
	Confidence to raise the issue
	Understanding how to raise the issue
	Willingness to raise the issue
	People they work say they feel listened to/say thank you
	Ability/mechanism to make referrals
	"I understand how safety relates to my role"
	"I have the training and support I need to raise issues of safety"
	Know where to refer people to more help / information

Medium term outcomes (the difference you make)	Indicators (what would show that the outcome is happening)
Decision makers have a better understanding of the issues	Decision makers focus on prevention activity
	Decision makers value qualitative and quantitative evidence equally
	Decision makers understand the cost of not acting
	Decision makers encourage/support/facilitate partnership working to create more impact
	Decision makers understand the different causes and needs of the priority groups
	Prevention of unintentional harm is reflected through policies and strategies
	Performance frameworks/evaluation reports/funding applications in relation to unintentional harm prevention recognise and value qualitative and quantitative evidence equally
	Changes in funding
	Unintentional harm prevention becomes a priority within plans
	Decision makers / non-specialist partners or practitioners can articulate why unintentional harm is an important issue
More professional/practitioners champion the issues	Confidence to share information when appropriate
	Share information with colleagues/others
	Raise issues when appropriate
Better referral pathways are created	Practitioners can identify appropriate referral pathway
	Inspection / self-assessment of referral pathways
	Knowledge of pathways
	Numbers accessing pathways
	Satisfaction for those accessing pathways
	"The referral pathway is clear and means I get the support when I need it"
More people at risk are identified	Number of older people assessed for risk of falling
	Number of practitioners having conversations with priority groups about specific Unintentional Injury risks
	Number of referrals on to other services/pathways
	Use of services
	"I get the support when I need it"
	Number of home safety visits
	Number responding to campaigns about UI risks
	Number of practitioners having conversations with families with children / young people about unintentional harm
Decision makers have a better understanding of activity which prevents unintentional harm	Decision makers focus on prevention
	Changes in funding
	Decision makers / non-specialist partners or practitioners can articulate why prevention is important
	Newspaper articles / press mentions

5.0 Choosing evaluation methods

Steps 4: Once you have chosen a few indicators you can now decide what methods will be most suitable to collect this evidence.

Your indicators will give you clues about where your evidence will come from. There are many different methods you can adopt, and it's a good idea to test them out with the people you support to see if they give you evidence about your outcomes. If you don't feel they are working, you can always amend them or try something else. Alternatively, ask the people you support for their help in developing methods. Often people give richer feedback when they have had a say in how it should be collected.

Some tips from us:

1. Aim to **embed** collecting evidence into the activities you are delivering. For example, if you are delivering a training session on safety, you could evaluate the impact on individuals understanding through an activity or quiz
2. Think about what evidence you **already collect**. Examples include attendance lists or case notes.
3. **Tailor** your methods to your indicators. For example, if most of your evidence will be observed change, there's no point developing a questionnaire. It might be better to consider jotting down observations or taking photos (if appropriate).
4. Use a **range of methods** if you can. It is likely you will want to report back numbers of people you have reached as well as their voices.
5. Your evidence will **not always** be **quantitative**. Because the outcomes in the framework relate, for example, to feelings about safety it will be important to collect evidence of peoples' voices and feelings.

For example, for the outcome "Older people have improved confidence in balance and walking" you could choose the following indicators and methods

Indicators	Methods
Taking part in physical activities or groups	Attendance lists
Appropriate use of walking aid	Observations (use a template if helpful)
"I can attend the groups I want to"	"Sticky wall" with statements. Add 1-5 scale and ask people to add their initials
"I can go out when I want to"	
"I encourage other people to take part in activities"	Capture ad hoc comments (use a template if helpful)

There are lots of ideas for methods and tools on ESS's website www.evaluationsupportscotland.org.uk Feel free to download these and tailor them for your context, the people you work with and your indicators.

6.0 Measuring what matters learning set members

The following people attended three meetings in early 2019 to develop this framework:

Name	Role	Organisation
Christine McArthur	NHSH Co-ordinator Prevention and Management of Falls	NHS Highland
Dougie Tait	Local Area Liaison Officer - Scottish Borders	Scottish Fire and Rescue Service
Judith Leslie	Manager	Angus Care and Repair
Carlene McAvoy	Community Safety Development Manager	RoSPA
Laura McDermott	Home Safety Officer	Dundee City Council
Anna Steele	Information and Research Analyst	South Ayrshire Community Safety Partnership
Carolyn Wilson	Falls Service Manager	Perth and Kinross Health and Social Care Partnership
Anne Duncan	Senior Co-ordinator	Roar Connections for Life
Hannah Dickson	National Development Officer	Scottish Community Safety Network

7.0 Your feedback on this framework

- 1. Is the purpose of this framework clear?**
- 2. Could you use it to measure what matters?**
- 3. Have you used it to measure your preventative activities?**
- 4. If you have, what was good about this framework?**
- 5. What could we do to improve the framework?**
- 6. What could we do to help others use it?**
- 7. Any other comments**