

# HEALTH AND WELLBEING SUPPORT AND SERVICES FOR SURVIVORS OF

# Mother and Baby Institutions, Magdalene Laundries and Workhouses

Guidance Note on Monitoring & Evaluation

GN6/MBMLW

Version 1.0

## Contents

1.0	Introduction and Background	.3
2.0	Definitions, Outcomes, Outputs, Inputs, Activities	.5
3.0	VSS Monitoring and Evaluation Tools	.6
4.0	Guidance for Talking Therapies - CORE Net	.6
5.0	Guidance for Complementary Therapies – MYMOP	7
6.0	Guidance for Health & Wellbeing Caseworkers	8
7.0	Guidance for Welfare Support	. 8
8.0	Guidance for Social Support	9
9.0	Quarterly Outcomes Based Monitoring and Evaluation Reporting	9

Annex 1 Monitoring and Evaluation "Jargon Buster"	10
Annex 2 Monitoring & Evaluation Outcomes Framework	12
Annex 3 Quarterly Feedback Report	13

#### **1.0 Introduction & Background**

- 1.1. This Guidance Note should be read in conjunction with:
  - The Standard Conditions of Grant, in particular Section 5.0
- 1.2 The Victims Survivors Service aims to improve and build upon the existing monitoring and evaluation systems currently in place. This Guidance Note is therefore a live document, and any revisions/updates will be uploaded to the VSS Website.
- 1.3 Why is monitoring and evaluation important?
  - **1 To know whether your services & support are working:** You want to know whether you are making the changes to people's lives that you want it to. You can't know how well it's working without monitoring and evaluating.

#### 2 To help look after the people you work with:

As well as for victims & survivors, internally you need clarity about who's doing what in your work. You won't know who really needs to be involved, who doesn't and who need more support unless you capture people's experiences.

#### 3 To know *how* things are working:

In order to know how things are working, to know which parts of your model are working the best, and which bits you need to change or improve. To do this you need monitoring and evaluation that allows you reflect on the different parts of the model

#### 4 To help you become aware of unintended outcomes:

You need to know the unintended outcomes for your work, whether positive or negative. Positive unintended outcomes mean that more is happening than you thought, negative unintended outcomes means something needs changing. You won't capture these without monitoring and evaluation.

#### 5 So you can be adaptable:

As well as knowing the bigger picture, you want to be able to adjust how you are doing things. Creating real time monitoring feedback helps you to develop your work to respond to needs of the people you're working with and the changing context you're working in. 6 To be better able to communicate the value of your work It's vital to be able to communicate the value of your work in a way that people understand, for many reasons – securing funding, advocacy and collaboration to name a few.

#### 7 To focus your work

Evaluation makes you focus on the key outcomes you want to have for the people you are working with. This is really important for keeping your project focus. It's too easy to get caught up in logistics and lose sight of the changes we're trying to make in people's lives.

#### 1.4 What are the reasons for outcome based monitoring and evaluation?

The aims of implementing an outcome based monitoring and evaluation system are to:

- Demonstrate the impact/benefit/changes to individuals through engagement in funded services and activities.
- Capture the ongoing and complex needs of the individuals that you support.
- Align with the Northern Ireland Executive's Programme for Government Outcomes Framework.

#### 1.5 What is an outcome based monitoring and evaluation system?

<u>**Outcomes**</u> refer to the <u>**impact**</u> that your services, whether they be counselling, complementary therapies or a social support activity such as a respite trip or befriending, has had on an individual.

Whilst counting numbers (outputs) is important, what is more valuable to capture is the **value** of the support – what difference does the funding that we allocate to groups actually make to individual victims and survivors?

Capturing information on **how** the support we fund improves individual's mental health and wellbeing and quality of life, will help us to continually improve our services.

#### 2.0 Definitions, Outcomes, Outputs, Inputs, Activities

2.1 VSS recognise that when discussing monitoring and evaluation a range of terms are used which are often confusing.

In moving towards an outcome based approach, we are drilling down into thinking about the <u>actual difference</u> that the service you are delivering will make to the people you are supporting.

Outcomes are not actions, inputs or outputs but things that matter to the people who you are delivering services to. It is important that we all have a collective understanding of what the different terms mean.

#### 2.2 Outcomes

Outcomes are the specific changes, benefits, learning and effects that actually happen or are expected to happen as a result of your activities. They can be wanted, unwanted, expected or unexpected.

#### **Outcome Indicators**

Outcomes indicators are useful to measure to what extent you have achieved change – How much difference have you made?

#### 2.3 **Outputs**

Outputs are all the detailed services and tangible products that your organisation actually delivers.

#### **Output Indicators**

Output indicators are used to measure to what extent you have delivered your services and quantify the activities that you have delivered.

#### 2.4 Inputs

The resources within the project which will be used to deliver services.

#### 2.5 Activities

What has been done to achieve the change?

2.6 We have compiled a "Jargon buster" which will help to define what we mean. This is attached at ANNEX 1 – Monitoring and Evaluation Jargon Buster.

#### 3.0 VSS Monitoring and Evaluation Tools

- 3.1 We will measure the individual impact of the following services and activities delivered:
  - Talking Therapies
  - Complementary Therapies
  - Social Support services
  - Resilience Programmes
  - Welfare Support
- 3.2 Monitoring and Evaluation systems have been established for talking therapies, (CORENet) and complementary therapies (MYMOP).

All VSS funded support services are **OUTCOMES FOCUSED**. This means that **ALL** projects must demonstrate how they contribute to the achievement of specific outcomes for survivors as outlined in ANNEX 2 – Monitoring and Evaluation Outcomes Framework.

#### 4.0 Guidance for Talking Therapies – CORE Net

Organisations delivering talking therapies including counselling and life coaching shall be required to use the CORE Net system.

#### CORE Net

This is a client self-report questionnaire designed to be administered by practitioners before, during and on completion of therapy. The items of the measure cover four dimensions:

- Subjective well-being
- Problems/symptoms
- Life functioning
- Risk/harm

CORE Net is an online information system which will be accessible to all organisations delivering counselling, talking therapies and life coaching funded by VSS.

Each organisation has a nominated CORE Net lead. This is an individual who is the key contact for each organisation for all CORE Net matters. Staff and volunteers should direct all queries to their nominated CORE Net lead in the first instance. The CORE Net lead will be responsible for overseeing data quality and ensuring that all protocols are followed.

It is a requirement for each organisation to provide the relevant details of staff delivering counselling/talking therapy services funded by VSS in order for VSS to setup user accounts for each member of staff on the CORE Net system.

A full CORE Net user guide is available on the CORE Net website for those who have registered their details with VSS.

Refresher training alongside a "lessons learnt" session will take place on an annual basis or as appropriate.

#### 5.0 Guidance for Complementary Therapies - MYMOP

5.1 Organisations delivering complementary therapies shall be required to use the MYMOP evaluation processes.

#### 5.2 **MYMOP**

Organisations delivering complementary therapies shall be required to use the MYMOP evaluation processes.

The MYMOP (Measure Yourself Medical Outcome Profile version 2) developed by The University of Bristol – Centre for Academic Care, is a client-generated problem specific measure that allows the client to select the most important problem(s) to them that they want to address. It is a free to use, clinically useful measure.

Practitioners must record client data on the template forms during the initial consultation and before the final consultation treatment session.

All completed data i.e. both clients who have completed their treatment plan, and clients who did not complete their treatment plan, should then be entered onto the password protected VSS MYMOP spreadsheet.

Completed VSS MYMOP reports will be provided to VSS on a monthly basis to the designated email address <u>mymop@vssni.org</u>.

#### 5.3 **Submitting information to VSS - Schedule of Dates for Returns**

Reports should be returned to VSS via email by 5pm on or before the second Friday of each calendar month.

#### 6.0 Guidance for Health & Wellbeing Caseworkers

MBMLW Health & Wellbeing Caseworkers will be required to use the **Work and Social Adjustment Scale (WSAS)** as a monitoring tool. The WSAS is a simple 5 item self-report measure which provides an experiential impact of a disorder from the Victims and Survivor's point of view. It looks at how issues may impair the individual's ability to function day to day across 5 key areas. Questions will relate to the individual's:

- 1. Ability to work
- 2. Home management
- 3. Social and leisure activities
- 4. Private leisure activities
- 5. Close relationships

#### 7.0 Guidance for Welfare Support

Organisations delivering welfare support to survivors of MBMLW are required to use an IT system such as Advice Pro to ensure consistent reporting on:

- The number of individual's engaged
- The number of sessions delivered
- The nature of the advice given
- Geographical spread
- Financial maximisation for the client

VSS will may also request case studies to illustrate how welfare support improves the health and wellbeing of those survivors of MBMLW who are in financial need.

#### 8.0 Guidance for Social Support

Social Support services and activities include:

- Personal, Professional Development
- Befriending/outreach
- Resilience Programmes

The monitoring and evaluation systems for social support may include (but may not be limited to) focus groups, online questionnaires, qualitative evaluation reports and quarterly support visits.

This will be based on the type of monitoring and evaluation techniques identified within your Letter of Offer which are used to monitor and evaluate services and activities detailed in your Delivery Plan.

# 9.0 Quarterly outcomes based Monitoring and Evaluation Reporting

Organisations are required to closely monitor the delivery and success of VSS funded activities and interventions throughout the funding period to ensure that the aims and objectives of the programmes are being met and demonstrate the achievement of both their outputs and the impact of support and services being delivered.

Quarterly feedback reports (**Annex 3**) should be submitted to VSS on or before the Friday of the week after quarter end.

### Annex 1 – Monitoring and Evaluation Jargon Buster

We have compiled the following "**Jargon buster**" which will help to define what we mean. We hope you find it useful.

Key Term	Definition	Examples
Inputs	The resources (time, money, staff) used to create the services offered	<ul> <li>Staff Salaries</li> <li>VSS grant funding</li> <li>Other funding, external or from own resources</li> <li>In Kind Funding e.g. use of training rooms/volunteer</li> </ul>
Outputs	The services and products made service users e.g. counselling sessions/ therapy sessions /respite trips/befriending visits	<ul> <li>Number of Counselling sessions delivered</li> <li>Number of Complementary therapy sessions delivered</li> <li>Number of Befriending visits</li> <li>Number of drop in coffee mornings held.</li> </ul>
Outcomes	The changes (benefits), learning that happen /are expected to happen as a result of the activity (outputs)	<ul> <li>Improvement in health and wellbeing:</li> <li>Improvement in anxiety/stress/sleep</li> <li>Friendships built</li> <li>Members feeling less socially isolated</li> </ul>
Indicators	Well defined qualitative or quantitative measures that demonstrate progress towards achievement of outputs and outcomes	<ul> <li>Output indicators e.g.</li> <li>Number of people receiving a service</li> <li>Number of sessions held</li> </ul>
		<ul> <li>Outcome indicators e.g.</li> <li>Increased number of a survivors who report an increase in their health and wellbeing as a result of completing talking therapies</li> </ul>

		through VSS funding. Increased number of victims and survivors who report an improvement in anxiety/stress/sleep as a result of availing of complementary therapies funded through VSS.
Targets	A performance measure agreed in advance. May relate to inputs outputs or outcomes	<ul> <li>Output targets</li> <li>25 sessions of counselling will be delivered by March 2021</li> <li>50 members will attend 2 respite trip during 2021-2022</li> </ul>
		Outcome target • 60% of clients will report an increase in their health and wellbeing by the end of their counselling sessions
Milestones	Intermediate stages and key points which indicate progress towards the achievement of outcomes or outputs	<ul> <li>Recruitment of volunteers</li> <li>Training provided for staff</li> <li>Publicity materials produced</li> </ul>

Thematic Area	Strategic Outcome	Potential Indicators	How will this be measured?
Health & Wellbeing, Social Support and Resilience Programmes	Improved health and wellbeing of victims and survivors	<ol> <li>Improved mental health</li> <li>Reduced risk</li> <li>An improved physical and social function</li> <li>Reduction of symptoms</li> <li>Positive Attitude</li> <li>Improved Integration</li> <li>Improved quality of life</li> <li>Reduced Isolation and improved social networks</li> <li>Improved family relationships</li> </ol>	<ul> <li>CORENET (Talking Therapies) Collects client reported outcome measures and uses this to manage therapeutic outcomes. <u>http://www.coreims.co.uk/About Core Tools.html</u></li> <li>MYMOP (Complementary Therapies) Client-centred and individualised outcome questionnaire focusing on specific problems but also general wellbeing <u>http://www.bris.ac.uk/primaryhealthcare/resource</u> <u>s/mymop/</u></li> <li>Work &amp; Social Adjustment Scale (WSAS) A Client-centred self-report scale of functional impairment attributable to an identified problem</li> <li>Case Studies</li> </ul>
Personal and Professional Development	Improved access to opportunities for learning and personal development	<ol> <li>Enhanced self-esteem and self- worth</li> <li>Enhanced opportunities to contribute to the wellbeing of others</li> </ol>	<ul><li>Case Studies</li><li>Surveys (pre and post-training)</li><li>Other measurement tools</li></ul>
Welfare Support	Victims and survivors, and those most in need, are helped and cared for	<ol> <li>Improved Financial Support</li> <li>A greater sense of responsibility and independence in addressing practical needs</li> <li>Increased access to benefits and support</li> </ol>	<ul> <li>Surveys</li> <li>Welfare Changes and Support reporting</li> <li>Other measurement tools</li> <li>Case Studies</li> </ul>

## Annex 2 – Monitoring & Evaluation Outcomes Framework

#### Annex 3 – Quarterly Report Template

#### Mother & Baby Institutions, Magdalene Laundry Workhouses

#### Health and Wellbeing Support and Services.

#### QUARTERLY FEEDBACK REPORT

#### Period 2022-2023

Funding Ref No:	Delivery Plan Areas Funded (select all that apply with $\checkmark$ )
Group Name: Quarter End:	<ol> <li>Talking Therapies</li> <li>Complementary Therapies</li> <li>Befriending/Outreach</li> <li>Personal &amp; Professional Development</li> <li>Welfare Advice and Support</li> </ol>

#### **Explanatory notes:**

The report, once completed, should be signed and dated by the staff member funded through the Programme and then countersigned by a Committee Member (preferably the Committee Chair).

Should you have any difficulties in completing this report, please do not hesitate to contact your Programme Officer.

	Anticipated Outputs As per your Letter of Offer ANNEX 2 - Delivery Plan	Reported clients on CORE as of <u>xx/xx/xx</u>	Anticipated Outputs as at 31/03/23
Talking Therapies		<ul><li>xx adults</li><li>xx individual attended sessions</li><li>xx individual DNA's</li></ul>	
<b>J</b>		Reported clients on Monitoring Spreadsheet as of xx/xx/xx	
		<ul><li>xx children</li><li>xx individual attended sessions</li><li>xx individual DNA's</li></ul>	

Complementary Therapies	Anticipated Outputs As per your Letter of Offer ANNEX 2 - Delivery Plan	Reported clients on MYMOP as of xx/xx/xx	Anticipated Outputs as at <u>31/03/23</u>
Петаріез		xx unique individuals xx individual attended sessions	

Befriending/Outreach	Anticipated Outputs As per your Letter of Offer ANNEX 2 - Delivery Plan	Reported clients of xx/xx/xx	Anticipated Outputs as at <u>31/03/23</u>
		xx unique befriendees. xx unique befrienders.	

Personal & Professional Development	Anticipated Outputs As per your Letter of Offer ANNEX 2 - Delivery Plan	Reported clients as of xx/xx/xx	Anticipated Outputs as at 31/03/23
		xx unique individuals	

Social Support	Anticipated Outputs As per your Letter of Offer ANNEX 2 - Delivery Plan	Reported clients as of xx/xx/xx	Anticipated Outputs as at 31/03/23
Social Support		xx unique individuals	

Personal and Professional	Anticipated Outputs As per your Letter of Offer ANNEX 2 - Delivery Plan	Reported clients on Monitoring Spreadsheet as of xx/xx/xx	Anticipated Outputs as at <u>31/03/23</u>
Development		xx unique individuals	

Welfare Advice and Support	Anticipated Outputs As per your Letter of Offer ANNEX 2 - Delivery Plan	Reported clients as of xx/xx/xx	Anticipated Outputs as at <u>31/03/23</u>
Support		xx unique individuals	

Consumed on Summart	Anticipated Outputs As per your Letter of Offer ANNEX 2 - Delivery Plan	Reported clients on Caseworker Spreadsheet as of xx/xx/xx	Anticipated Outputs as at <u>31/03/23</u>
Caseworker Support		xx unique individuals	

Q1: Briefly describe the extent to which you feel that your organisation has been progressing towards achieving the objectives as outlined in **each** of the ANNEX 2 - Delivery Plan areas.

**Q2:** Are your projects outputs being achieved? Are these on target and within the agreed timeframes as set out in ANNEX 2 - Delivery Plan?

Q3:	Please provide an update on how you are progressing with measuring your outcomes as outlined in outlined in your ANNEX 3 – Monitoring and Evaluation Framework Feedback should focus in the measurement tools outlined in your ANNEX 3 – Monitoring and Evaluation Framework		
Q4:	Have any unanticipated circumstances occurred during this quarter which has had a positive/negative effect on the delivery of any of your ANNEX 2 – Delivery Plan? Please detail below:		
Q5: •	Do you have any concerns with any aspect of the delivery of your ANNEX 2 – Delivery Plan? Your Programme Officer will be in touch to discuss these concerns.		
Q6:	Have you made any changes to your overhead budget? Please detail below:		

Q6:	Have vou made an	v changes to your p	rogramme budget up to th	he value of £1000?	Please detail below:

Please note changes are cumulative

Q7: Do you wish to request any budget changes over the value of £1000 under programme costs?

• If so, please complete a Budget Change Request form and return along with this form.

Please use the space below to provide us with some participant feedback / good news stories from this quarter.

• This could be in the form of evaluation feedback / quotes / case studies etc.

Report completed by:

Signed:

(Project Worker)

Signed:

(Chairperson)

Dated:

Dated:

)