

Evaluation of Rochdale Families Project

Measuring Impact and Developing Key Performance Indicators:

A Suggested Framework for Future Evaluations

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1. Introduction

This report reflects on the use of techniques for measuring the impact and effectiveness of family support projects and the wider provision of support services to vulnerable families. It begins by setting out some of the challenges in measuring the impact and outcomes of specific initiatives. It then distinguishes between process evaluation, measuring outputs and quantifying longer-term outcomes. The report concludes by identifying a set of qualitative and quantitative key performance measures that may be utilised in the future assessment of the effectiveness and impacts of family support initiatives and services.

2. Challenges

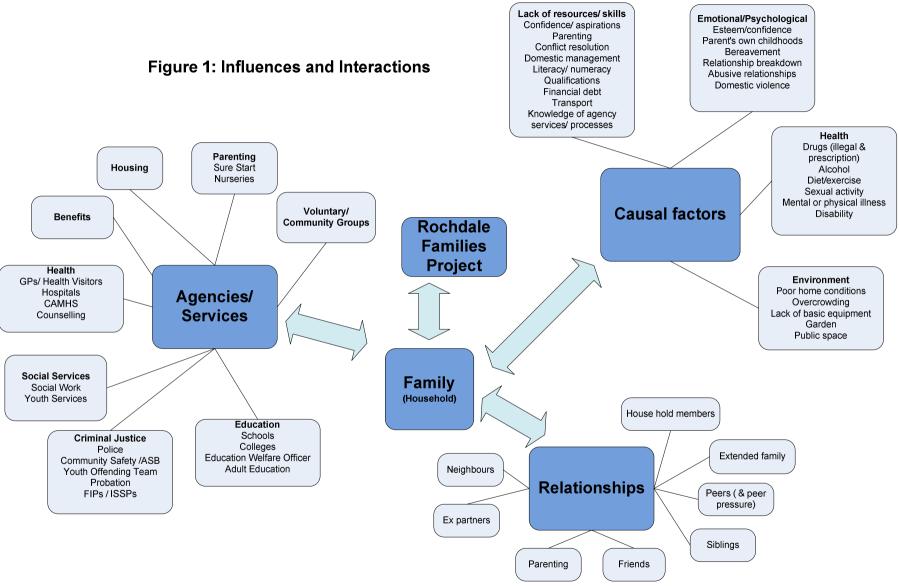
There are a number of inherent challenges facing the robust evaluation of family support projects and initiatives and identifying the specific and direct causal impact of an initiative on outcomes for individuals, households, communities and agencies. These challenges have been discussed at length in previous studies (see Dillon et al., 2001; Nixon et al. 2006; Nixon et al., 2008; Pawson et al. 2009; Gregg, 2010; Wright et al., 2010). There are four in particular that this report will focus upon:

- Attributing causality
- Capturing qualitative soft outcomes
- Assessing cost-benefits
- Resources

Attributing causality

It is incredibly difficult to isolate and quantify the direct causal impact of one specific support initiative on the outcomes for a family. This is for three key reasons. Firstly, as Figure 1 below identifies, a family support service is located within a very complex web of influences and interactions impacting upon a family. These include the underlying and multiple causal factors of vulnerability and problematic behaviour (many of which are multi-generational), the continuing influence of a range of actors and factors, including extended family members, peers and the wider neighbourhood environment (physical, social and cultural), and the range of agencies and organisations who may be interacting with the family. It is also for this reason that control groups and/or randomised control trials (originally considered for this and other evaluations of family support projects) have not been utilised.

Secondly, progression for a family is rarely linear- there are often periods of disengagement, remission and crisis which are often caused by factors external to the support being provided. Thirdly, the time dimension of interventions is complex: services are often addressing long-standing and deep rooted problems; crisis management, stabilising a situation and inculcating improved confidence, esteem and aspirations, enhancing parenting skills and family dynamics are the building blocks to successful outcomes, but many of these forms of progress are hidden and there may be a long time period between this progress and the achievement of more visible and measurable outcomes. It can also take a considerable period of time for project workers to secure the engagement and trust of families and to undertake a robust assessment that accurately identifies the support needs of families. These steps are essential to the likely effectiveness of interventions, but this can be in conflict with performance indicators based upon exiting a family within a particular time period or working with a target number of families. Finally, it is difficult to assess the longer term outcomes and the sustainability and therefore cost effectiveness of interventions as this involves the longitudinal tracking of families in the post-intervention period.



Capturing qualitative soft outcomes

Family support projects and services, in order to be effective, are required to take a holistic, whole-family approach that addresses underlying problems and that develop multi-agency packages of intervention. This means that projects and project workers undertake a range of roles, including engagement, assessment, the development of support plans, the provision of support and exit planning (see Figure 2).

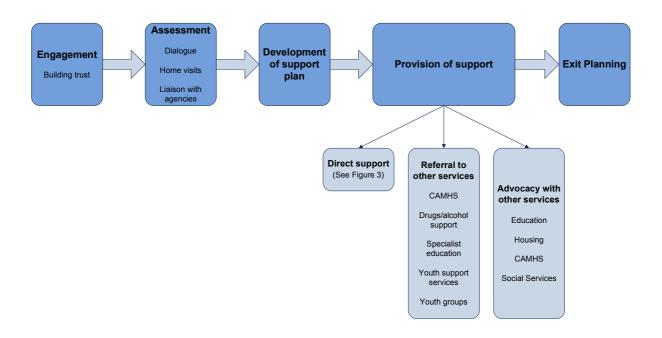


Figure 2: Project Worker Roles

The diversity of these roles, combined with the scale of the problems facing families and the instability in their circumstances make any robust assessment of effectiveness complex. This also highlights the importance of recognising the value of the achievement of less visible and soft outcomes. Figure 3 below provides a typology of outcomes that may be achieved by a family support project or service.

The ultimate aim of family support projects and services is to achieve sustainable transformative change. However, projects and services may also achieve two other categories of outcomes that are both vital in their own right and form the building blocks upon which transformative change may be achieved. A project may, through effective crisis management, reduce the immediate risk of harm and escalation of risk and problematic behaviour. This is very difficult to measure (although see below). However, this can achieve a major cost-benefit to agencies (for example preventing enforcement action or the need for a child to be taken into care) as well as obvious benefits for the wellbeing of families. A project may also achieve incremental but significant outcomes through

stabilising a family and its circumstances. However, none of these outcomes can easily be measured through performance indicators.

Figure 3: Typology of Outcomes

Achieving change: 'Hard' outcomes Improved education (attendance and attainment) Entry to training or employment Reduction or cessation of risky behaviour (drugs, alcohol, sexual, peer groups) Reduction or cessation of anti-social or criminal behaviour Prevention of entry to criminal justice system Prevention of eviction or children being taken into care **Transformative** 'Soft' outcomes Improved self-confidence and self esteem Improved mental and physical health Improved domestic environment and management Improved inter-family relationships and dynamics Improved social and personal skills Raised aspirations **Stabilising** Improving stability: Maintaining domestic environment Maintaining family relationships and dynamics Maintaining family relationships with agencies and services Managing relationships with peer groups and neighbours Ensuring attendance at school and keeping of appointments Ensuring attendance at support service sessions Limiting of drug and alcohol misuse Limiting of risky sexual behaviour Crisis management Reducing immediate risk or harm and responding to trauma: Relationship breakdown Offending incidents Conflict with neighbours or peers Increased use of drugs/alcohol III health (mental and physical) Emotional breakdown or fragility Pregnancy or risky sexual behaviour Imminent risks of enforcement action, sanction or withdrawal of services Escalating child protection or domestic violence risks or incidents

Even where interventions achieve transformative change, a set of soft outcomes, while crucially important and directly linked to the sustainability of progress, can only be captured qualitatively and relate to the domestic environment and individual wellbeing. These outcomes may be assessed through capturing the subjective perceptions of a range of actors, and it is recommended that this forms part of future evaluation processes (see below). But these outcomes cannot directly be related to inputs or cost-benefits.

Assessing cost-benefits

In the current and future period of fiscal austerity (see the following resources section) the funding of projects and initiatives and delivery of services has to be based on the most efficient use of increasingly pressurised resources. However, assessing the cost-benefits of family support projects and services faces a number of challenges. Previous evaluations have indicated that such projects are, ultimately, likely to be cost-effective (Dillane et al., 2001; Pawson et al., 2009). However, this general finding, based on sophisticated economic analysis, is subject to a number of complications. Firstly, it is often based on a counter-factual scenario on the basis of costs that may have accrued if support had not been provided (e.g. a child needing to be taken into care, the issuing of an Antisocial Behaviour Order, eviction, needing to house a family presenting as homeless etc.). However, this cannot be based on a basic baseline/ change or 'before and after' evaluation. Secondly, the cost savings potentially resulting from an intervention will accrue over the lifetime of family members and may not necessarily be recouped within the budget, planning and evaluation periods which local authorities and others have to operate within. Thirdly, the savings to public agencies will be uneven and agencies benefitting from the intervention may not necessarily be those contributing to the funding of a project or service (this is essentially a political issue). Finally, although previous evaluations of projects indicate their cost-effectiveness, it has not been possible to base this on the sustainability of positive outcomes through tracking service users over a longer time period (although see Nixon et al., 2008).

These challenges need to be considered when developing a framework for the future evaluation of family support initiatives and services. This is also linked to a more fundamental understanding, conceptualisation and rationale of what projects and services are trying, and actually able, to achieve. Although, correctly and understandably, funding for such projects has emphasised sustainable transformation and measuring verifiable outcomes, these projects can be effective and achieve very significant outcomes that cannot be easily measured, may not result in transformation (as defined in targets or performance indicators) and are not amenable to economic cost-benefit analyses.

Resources

In developing this suggested framework for evaluation, we are acutely aware of the period of fiscal austerity facing local authorities and their partners. This will, most fundamentally, have a direct impact upon the provision of services and initiatives to vulnerable families. However a secondary consequence will be limited resources to either fund comprehensive and robust external evaluations or to undertake large -scale evaluation activities in-house. This raises challenges as even well funded evaluations undertaken by experienced research teams (such as the study of Rochdale Families Project) face barriers in accessing data and engaging with the necessary range of stakeholders and actors, including service users.

Whilst making the point that robust evaluations should produce the most comprehensive and sophisticated assessments of the impacts and effectiveness of initiatives and services, we have deliberately developed a framework of evaluation activities that may realistically be undertaken

whilst minimising the time required by those undertaking and contributing to these research activities.

The main result of this approach is that we have focused upon a limited number of process evaluation indicators and the transformative outcomes described in Figure 3 above. In particular, we have recommended that indicators that relate to disaggregated inputs or intermediary outputs are not included. We have also recommended a significant qualitative element to the evaluation framework given the limited value of some existing numerical or quantitative indicators.

3. A Suggested Framework for Future Evaluations

In developing a suggested framework for future evaluation, we have been guided by some key principles. The evaluation should:

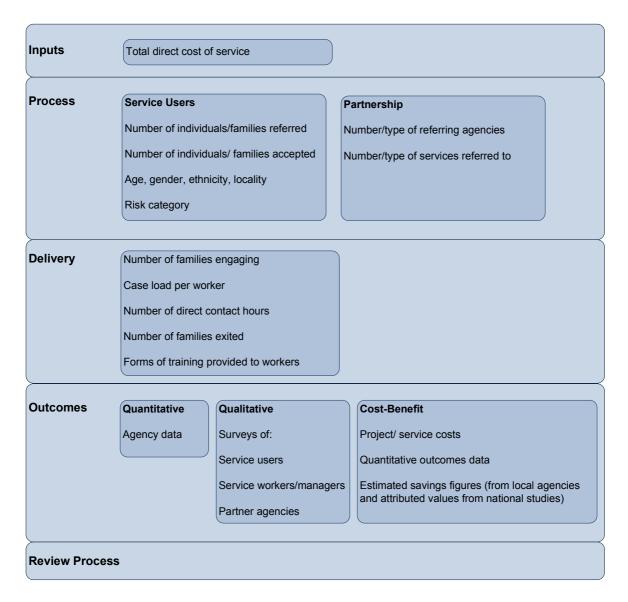
- Be based upon research activities that may be realistically undertaken and achieved
- Be limited to a small number of key indicators whilst remaining meaningful
- Include inputs, process, delivery and outcomes and be linked into a review process
- Focus upon outcomes rather than outputs
- Include the perspectives of a range of stakeholders
- Involve qualitative and quantitative measures
- Capture crisis management, stabilising and 'soft' transformative outcomes

The evaluation framework is presented in Figure 4 below. Each of the stages of the suggested evaluation is now described. Further details are provided in the technical annex at the end of this report.

Inputs

The inputs to the project or service are defined, for the purposes of the evaluation, as the direct total and easily calculated financial cost of the service- that is the financial resources allocated to the project in terms of total budget (to include staffing, purchase of services etc.). As discussed in the technical annex, this will not capture all of the costs associated with the project.

Figure 4: A Suggested Evaluation Framework for Family Support Projects and Services



Process

Evaluations of process are important, particularly for the monitoring and revision to a project or service whilst it is being delivered. However, process indicators can often be numerous and targets linked to processes are often not directly linked to positive outcomes. Given the emphasis on outcomes in this suggested evaluation framework we would propose the following key indicators:

Service Users

• **Number of individuals/ families referred-** This is an important measure of the awareness of the service amongst partner agencies and organisations.

- Number of individuals/ families accepted- This enables the number of families working with
 the project to be identified. This can also be compared to the number of referrals to assess
 both the capacity of the project and the appropriateness and robustness of referral
 processes.
- Age, gender, ethnicity and locality- These variables for individuals who receive the support of the project or service are important in measuring whether the project/service is achieving the planned targeting of specific groups or whether it is not reaching key groups. They can also be important in terms of equal opportunities legislation and statutory requirements.
- Risk category- The identification of individuals by risk category (for example the Rochdale Family Project was envisaged as working with 'amber' case classifications, as used in Rochdale borough) enables measurement of whether the project/service is reaching its intended target group or providing (or not providing) support to a particular risk group. This information is also important in providing a baseline for change in one of the proposed quantitative outcome measures (reduction in risk levels).

Partnerships

Number/ type of referring agency- This measure is important in assessing whether referrals to the project/ service are being received from a range of agencies and organisations. Although this may be simply recorded as a total numeric value, we suggest that it is more important to record the types of agency/sector referring cases (e.g. education, housing, police, etc.). This enables any gaps in referral mechanisms to be addressed in the review process. This will also supply details of the referring agencies to be included in the qualitative outcomes research stage discussed below.

Number/type of services referred to- This measure is important in assessing the extent and range of partner agencies and support mechanisms that the project or service is linking individuals and families to. As above, although this may be simply recorded as a total numeric value, we suggest that it is more important to record the types of support service being referred to (i.e. counselling, cognitive behaviour therapy, addiction services, specialist education, mediation etc.). This will enable any gaps in referral support services to be identified. It is important that this information includes liaison with other agencies as well as formal referrals (for example liaison with a housing provider to resolve an accommodation or neighbour conflict issue).

<u>Delivery</u>

Number of families engaging- This is an important indicator of the extent to which a project or service is able to establish the trust and rapport with an individual and/or family which is a prerequisite to achieving positive change. This can be measured quantitatively, for example attendance at project sessions and length of time actively interacting and participating with project interventions. It can also be gauged more qualitatively through the subjective assessments of project workers and service users themselves. The number of families engaging can be compared to the number of families accepted on to the project (and any patterns, for example relating to age, gender, ethnicity or risk category can be identified).

Case load per worker- This indicator can be used both to assess the achievement of a process target and co compare with the number of direct contact hours (see next indicator) to provide an indication of whether the required intensity of support is likely to be delivered.

Number of direct contact hours- This indicator is crucially important as the evidence from the evaluation of the Rochdale Families Project and other national evaluations identifies time and the quality of worker-family relationships as key factors in achieving positive change. We suggest that direct contact time is recorded and differentiated from other time spent on an individual case (although other activities such as liaison with other agencies and services are, of course, a vital element of a project worker's role).

Numbers of families exited- This indicator should include both 'positive' exits- where outcomes have been achieved and/or a post-intervention support package has been put in place and 'negative' exits where a family have disengaged or progress has not been achieved.

Forms of training provided to workers- The evidence from the evaluation of Rochdale Families Project and other national evaluations identifies the skills of project workers as a key factor in achieving positive change. Although many of these skills are 'informal', relating to personal background, attributes, empathy and communication, there are also some more formal skills sets and training that are important in increasing the effectiveness of a project or service. Rather than recording the numerical number of training session or courses attended, we suggest that the forms of training provided be recorded. This can identify gaps and be compared against any skills needs identified by project workers or managers (see below).

Outcomes

The outcomes indicators are the key measure of the effectiveness of a project and service. The indicators described in this section should be considered in relation to the typology of outcomes identified in Figure 3 above. There are three forms of outcomes indicators: quantitative, qualitative and cost-benefit. In order for these outcomes indicators to be robust, they need to capture a baseline (i.e. the situation prior to project/service intervention), the situation at the end of the intervention and a period of time following the intervention. Further details about these indicators are provided in the technical annex at the end of this report.

Quantitative Indicators

Table 1 identifies a set of quantitative outcome measures and indicators, their data sources and the timing/frequency of data collection. We have limited the numbers of indicators and sought to include those that may be realistically and practically utilised. These indicators are the primary mechanism for identifying transformative change arising from the project or service intervention.

Table 1: Quantitative Outcome Measures

Outcome	Indicators	Data source	Timing/ Frequency
Improved engagement with education	School attendance	School/ college records	Baseline
	Exclusions	Educational Welfare records	End of service intervention
	Truanting		12 months after end of service intervention
Improved educational attainment and	Qualifications	School/ college records	End of service intervention
improved basic literacy/numeracy skills	Courses completed		12 months after end of service intervention
Improved employment skills	Training courses completed	Training providers	12 months after end of service intervention
	Qualifications	Jobcentre Plus/ Connexions/ colleges	
Accessing employment	JSA and IB claims	Benefits data	12 months after end of service intervention
Reduction in crime/ anti-social behaviour	Police incidents	Police	Baseline (prior to service intervention)
benaviour	Housing management incidents	Registered social landlords	End of service intervention
	ABCs/ ASBOs/ Parenting Orders	Community Safety/ASB Teams	12 months after end of service intervention
	Entry to criminal justice system	Youth Offending Teams	
Reduction in risk levels	Assessed risk category	Social Services	End of service intervention
	Child protection status	Registered social landlords	12 months after end of service intervention
	Children accommodated by local authority		
	Eviction proceedings		

Qualitative Indicators

As described above and illustrated in Figure 3, 'hard' indicators of transformative outcomes will not capture soft outcomes or the importance of crisis management or stabilising a family's circumstances. The purpose of including qualitative measures is threefold. Firstly to capture these other outcomes; secondly, to enable the perspectives of a range of key stakeholders to be gathered and thirdly, to identify the specific contribution or additionality of a project/service and how the project/service may be improved. Table 2 presents the qualitative outcomes measures that we suggest. The technical annex includes exemplars of the questionnaires that may be used. It is important to acknowledge that there is a trade off between ensuring the comprehensiveness and usefulness of the data generated through questionnaires and ensuring that questionnaires are not overly onerous and will be completed. There are alternative forms of research that could be utilised, such as interviews and/or focus groups, but these are more resource intensive. It should also be noted that some family members are likely to require assistance in completing questionnaires.

Table 2: Qualitative Outcomes Measures

Stakeholder	Data Source	Timing/Frequency
Family	Questionnaire	End of service intervention
		12 months after end of service intervention
		On-going
Project Manager	Questionnaire	End of service intervention
Project Worker	Questionnaire	End of service intervention
Partner/ referral agencies	Questionnaire	End of service intervention
		12 months after end of service intervention

The questionnaire for service users and referral or partner agencies would seek to capture general satisfaction with the project/service, changes/additionality achieved by the service/project (including 'soft outcomes') and recommendations for change. The questionnaires should be sent to the agencies that referred individuals to the project/service. If resources allow, additional questionnaires could be issued to each of the agencies working with an individual and/or family. The questionnaires for project/service workers and managers would seek to identify positive changes/additionality achieved, the effectiveness of processes, the skills and capacities of workers and partnership arrangements.

Cost-Benefit Outcomes Measures

The cost-benefit outcomes measures aim to establish, in financial terms, the effectiveness and value for money of a project/service. A full account of these measures is provided in the technical annex.

Review Process

In addition to identifying the headline evaluation findings of cost-benefits and transformative outcomes, the review process following an evaluation should also provide an opportunity to reflect on existing processes and practices. In particular, the process and delivery indicators and especially the qualitative elements of the suggested evaluation framework provide a mechanism for identifying patterns in support take up and engagement, partnership working, and gaps in referral processes, service provision or skills. They also provide a mechanism for weaknesses to be identified and suggested improvements to be articulated.

4. Ethics and Data Protection

Our suggested evaluation framework would retain the confidentiality and anonymity of individual families, family members and worker/officers of projects/services and partner agencies at the level of any published evaluation reports (some disclosure of identities is necessary in the initial collation of the evaluation data). It is still essential that service users give their express informed and written consent for personal data about themselves to be provided by a range of agencies *for the specific purposes of evaluation*. This can be included in agreements linked to engagement with, and the receipt of, intervention services. In our experience the majority of service users are willing for this data to be used for the purposes of evaluation. Service users should also retain the right to withdraw their permission, at any time, for their personal data to be used for the purposes of evaluation. The effectiveness of the evaluation will also be dependent upon efficient record keeping, particularly by the project/ service and the appropriate data sharing mechanisms and protocols being in place between the relevant partner agencies.

5. Conclusions

This report has sought to identify some of the challenges facing the evaluation of intensive family support projects and family support service more generally. In particular it has argued that traditional, commonly-used and primarily quantitative performance and monitoring indicators are simply unable to capture some of the important impacts and outcomes that may be achieved by these projects and services. It has also identified the limitations of cost-benefit analysis (including the weaknesses of measures and the inability to identify direct causal impacts and assess the sustainability of longer-term outcomes) in addition to the wider points about the appropriateness of placing a financial value on improving the wellbeing of the most vulnerable families and communities.

The report has set out a suggested framework for future evaluations of family support initiatives, which, whilst limited due to the resource constraints now facing local authorities and their partners, enables inputs, process and delivery to be measured and a range of qualitative and quantitative indicators to be utilised in attempting to assess the effectiveness of such initiatives in terms of hard and soft outcomes and the basic cost-benefits of these initiatives. Although the evaluation framework is focused upon assessing specific projects and initiatives it has been designed to be scalable and therefore elements of the evaluation may be applied to larger service user populations and more generic and large-scale family support services.

References

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Technical Annex

A. Quantitative Outcomes Indicators

The quantitative outcomes indicators within the suggested evaluation framework may be accessed from the following sources:

- School attendance, exclusions and truanting data is available from centralised pupil records held by local authority education departments
- Truancy data and records of any enforcement action taken in relation to truanting is held by local authority educational welfare departments
- Qualifications and details of completed courses are available from centralised pupil records held by local authority education departments and records held by colleges and adult education providers.
- Individual-level data about vocational and employment-based qualifications and completed courses are held by Job centre Plus. Connexions and local colleges may also hold individual data
- Individual- level data about employment, Jobseekers Allowance and Incapacity Benefit claims are held by Jobcentre Plus on their Labour Market Systems, which also incorporates a range of other data sets.
- Police command and control data can provide information for individuals and individual address points.
- Registered social landlords should keep records on housing management incidents, including anti-social behaviour (this is dependent on an individual or household being tenants of the registered social landlord)
- Community Safety Teams and Anti-social Behaviour Teams should have individual data about Acceptable Behaviour Contracts, Anti-social Behaviour Orders, Parenting Orders, evictions linked to anti-social behaviour and other enforcement mechanisms.
- Youth Offending Teams maintain data on individuals' entry into the Criminal Justice system. The Jobcentre Plus labour market system also records criminal records, but our understanding is that this coverage is patchy nationally.
- Social services departments hold data on the assessed risk category of individuals or households, the child protection status of cases and children being accommodated by a local authority.

 Registered social landlords have data about evictions (linked to anti-social behaviour and rent arrears). Community Safety Teams and Anti-social Behaviour Teams may hold data about evictions linked to anti-social behaviour.

B. Cost-Benefit Outcomes Assessments

The calculation of the cost-benefit effectiveness of a project or service involves linking three sources of data:

- The total direct cost of providing the service
- Changes in quantitative indicators
- Attributing a public cost to an agency action

Calculating the real and entire cost of service provision is incredibly complicated. For example, family support projects often draw upon in-kind support from other services, such as officer time or informal or not-charged for forms of support. Disaggregating or projecting this level of financial detail is not feasible. Therefore, we recommend that the cost of a service is taken as the cost of its direct budget allocation (this may be provided by one or multiple revenue sources).

Not all quantitative outcome measures can be attributed, or easily attributed with a projected agency saving (for example school attendance, educational qualifications or vocational training courses completed, child protection status etc.).

However, projected cost savings for other indicators can either be directly calculated (JSA or IB claim costs) or attributed a value based on national research calculations. For example, the estimated costs of Anti-social Behaviour Orders, children being accommodated by local authorities and evictions have all been calculated (see Pawson et al., 2009). In addition, although not included as an indicator in our suggested evaluation framework, the lifetime costs of problematic substance misuse have also been calculated (see Flint et al., 2010).

In addition, local agency partners, such as the police or registered social landlords may also be able to provide an estimated average cost for dealing with an incident of anti-social behaviour.

The total reductions in incidents or preventions of enforcement or child protection action attributed to a project can be generated. Financial values can then be assigned to these reductions and the total financial value of these savings can be compared to the direct total costs of providing the service. This will generate a general assessment of the cost-effectiveness or value for money of the project or service. The cost-benefit outcomes measure is summarised in Table AN1 below:

Table AN1. Cost-Benefit Outcomes Measure

Measure	Source		
1. Total project/service cost	Local authority/ funder and/or project delivery agency/organisation		
2. Savings			
Reduced JSA and IB claims	 Actual value of non- claimed benefits 		
Reduced use of Anti-social Behaviour Orders			
Children not being taken into care	 Cost saving attributed from national studies 		
Eviction not being used			
 Reduced police time attending/ dealing with incidents 	Locally estimated costs		
 Reduced housing management time dealing with incidents 			
2 Cost Panofit Calculation	<u>'</u>		

3. Cost-Benefit Calculation

Savings (as at 2. above) minus total project/service cost (as at 1. above)

C. Qualitative Outcomes Questionnaires

Exemplars of the questionnaires proposed to capture qualitative outcomes within the suggested evaluation framework are provided below:

Questionnaire for Service Users

(This survey is aimed at adults/parents. Other methods, such as focus groups or interviews are more appropriate in eliciting the views of children and young people. It should be noted that many individuals are likely to require assistance in completing this questionnaire).

Name:			
1. Thinking about the project/service, please say family with the following things:	whether the project	t helped or did no	o t help you and your
	Did Not Help	Helped a bit	Helped a lot
How we get along as a family			
Looking after my children/ being a parent			
Looking after my home			
Paying bills and looking after money issues			
Making sure my children attended			
school/nursery/college			
Making sure we attend appointments			
(for example at the doctors or school)			
Keeping out of trouble with the police			
Getting involved in leisure activities			
How we get along with our neighbours			
My confidence and self-belief			
Feeling good about myself			
Being able to sort problems out			
Having a healthy lifestyle			

2. Did the project help with any of the following?				
	Did Not Help	Helped a bit	Helped a lot	
Improving my children's attendance at				
school/nursery/college				
My children doing better at school/				
nursery/ college				
Me, my partner or my children				
getting qualifications or certificates				
Getting into training				
Getting a job				
Reducing use of alcohol or drugs				
Being more settled as a family				
3. How important were the following types of supp	ort to you and yo	ur family?		
	No :		uite Ver	-
	impor	tant impo	rtant impor	tant
The project workers spending time with me	Г			1
The project workers spending time with my children	ь Г			<u>.</u>]
Project workers helping me to communicate with a				_
(like schools, the Council or housing)	Scricies -			1
	_			_
Getting counselling for me or my children			1	1

Learning new skills

(for example about being a parent)

4. What was the most important thing or things that you wanted the project to help you with? (Write in the box)
5. Did the project help you with this? Yes No Don't Know
6. What is the most important thing that has changed for you since you worked with the project?
7. What has been the best thing about the project?
8. Is there anything that the project could have done better?

Questionnaire for Referral Agencies

(This could also be adapted for other partner, but non-referring, agencies working with a family)
Name of Individual/ Family:
Your Name/ Position and Organisation:
1. Why was the individual/family referred to the project/service?
2. What did you hope that the project/service would be able to achieve with the individual/family?
3. For each of the following possible outcomes , please say whether, in your opinion, these have been
achieved. Please comment on your response and state whether, in your view, the project/service was an important factor in this and why.
Has there been:
a. A reduction in problematic or risky behaviour/family vulnerability: Yes No Don't Know
Comment:

b) An increase in positive behaviour/family circumstances: Yes No Don't Know
Comment:
c) An Improved engagement by the individual/family with your service: Yes No Don't Know
Comment:
d) Addressing underlying causes of problems: Yes No Don't Know
Comment:
e) Improved co-ordination/partnership working in the management of the case: Yes No Don't Know
Comment:
4. How sustainable do you think any positive outcomes achieved for the individual/ family are likely to be and
why?

5. In terms of working with the individual/family and what was describe it as any or all of the following? (<i>Please tick all the app</i>				
Crisis management Stabilising a situation Bringing about positive and sustainable change				
None of these				
6. How would you rate the following?	Very Good Fair Poor			
	Good			
Communication between the project/service and your				
agency/service				
Communication between the project/service and the family				
The skills and knowledge of the project/service workers				
The effectiveness of the project service/workers				
The appropriateness and effectiveness of the project/service				
interventions				
The additionality that the project/service provided?				
7. Would you refer individuals/families to the project service response.	in the future? Please give a reason for your			
8. Is there any way that the project/service could be improved	1?			

Questionnaire for Project/Service Workers

(This could be adapted for project/service managers)			
Name			
Please describe your role/position in the project/service:			
1. Thinking about all of your family cases, how successful do	o you think that yo	ou have been in th	ne following?
	Successful in	Successful in	Not successful
	most cases	some cases	in most cases
Building up trust and rapport with the families			
Ensuring family engagement with the project/service			
Ensuring family engagement with other services			
Spending the required time with families			
Being able to assess and establish family needs			
Providing effective direct support to families			
Co-ordinating case management/interventions			
with other agencies			
Being able to access/ refer to other relevant services			
Increasing/adapting other agencies' support to the family			

	Achieved in	Achieved in	Not achieved		
	most cases	some cases	in most cases		
mproved education (attendance and attainment)					
Entry to training or employment					
Reduction or cessation of risky behaviour					
Reduction or cessation of anti-social or criminal behaviour					
Prevention of entry to criminal justice system					
Prevention of eviction					
Prevention of children being taken into care					
3. Thinking about all of your family cases, to what extent have relevant to the families' circumstances been achieved?	ive the following o Successful in	utcomes (<u>where</u> Successful in	<u>these are</u> Not successful		
	most cases	some cases	in most cases		
mproved self-confidence and self esteem					
mproved mental and physical health					
mproved domestic environment and management					
mproved inter-family relationships and dynamics					
mproved social and personal skills					
Raised aspiration					
4. In terms of working with the individual/families and what was achieved by your project/service, would you describe it as any or all of the following? (Please tick all the apply)					
	ging about positiv	e and sustainabl	e change		
Crisis management Stabilising situations Brin	None of these				

6. What training were you provided with during the project/service and how useful was this training?
7. Are there further skills/ training that you would benefit from and what are these?
8. What have been the key factors in achieving positive change for the families?
9. What have been the main barriers to achieving positive change for the families?
10. What are the key lessons to be learnt from your experience of the project/service?