Apex Away Day: Using evidence to flourish

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Evidence-informed practice

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1. How other organisations use evidence
2. Evidence use @ Apex
3. Improving use of evidence
4. Tools which can help us improve
1. What **should** the role of evidence be?

2. What **is** the role of evidence?

3. How can we **improve** our use of evidence?
Thinking about what should be and what is...
Feb – March 2011

Social Work focus

- Children and Families
- Older people and physical disabilities

Literature review
Evidence (for our participants)...

Information, gathered from multiple sources, relating to a specific case

*(police reports, previous social work reports, background info etc)*

Research small part of this mix
Importance of evidence...

“Evidence? It is critical. I think that more you have, the more knowledge you have about a situation, whether that is theoretical, practical, the better prepared you are as a practitioner.”
Making judgements...

“ I mean is there ever any judgement made without evidence? Never! Never! ”
To justify decisions…

“...I like to use the evidence and research in my reports 'cause I feel that it helps justify why you are making a certain recommendation.”
Importance of analysis

“I think sometimes I just know workers ‘do’ because they don’t analyse. And if you don’t analyse, all you’re doing is reacting, you’re not necessarily making any, you’re not doing anything”
The role of gut feeling/intuition...

“intuitively I know I’m right here...knowing you’re right is just not enough. So you have to build it (the evidence) up and you have to be a bit of a detective”
Combining analysis & intuition

“Using intuition is not the problem. Indeed it can help us generate flashes of inspiration and pick out ideas that our rational analysis could not. The problem is that we may not then take these intuitive thoughts back to the workshop of analytical thinking and therefore not test our hypotheses with sufficient rigour” (Helm, 2011)
"analytical decision-making is seen to be appropriate in situations where judgment is complex and data is vast, whereas intuition is considered more appropriate when time is limited and information is scarce or conflicting" (Helm, 2011)
Group decision making...

“Formal meetings are really the place where major decisions are made ... Case conferences, inter agency meetings, case reviews, looked after reviews, they're where major decisions are made”
Recording and explaining the analysis

“it is just about the facts, the case, what's happening, what are we going to do next. It is not so much about how I arrived at that decision”
Does experience make a difference?

“...I think probably experienced workers, the gut feeling is probably quite valuable because they've dealt with so many (people)... I am so inexperienced that my gut feeling could be wrong...”
But the more experienced…

“ I think it becomes easier as you gain more experience and the more experienced you become then I think the more you do realise you do need to think a lot more.”
Uncertainty…

“A lot of the issues where social workers have to make assessments are quite complex and there are often grey areas. It’s not often clear cut…the fact that it's not clear cut doesn't mean that people are unwilling or unable to make decisions but actually the reality is that it isn't clear cut”
What is the role of evidence?

What should be the role of evidence?

15 mins discuss

Vote for quotes
Use of evidence
Evidence-informed rationale

Inception: “What Works?” research

Underlying theories & research: Includem’s framework for intervention
Embedding Evidence

“Speaking to people who know”

Academics on the board to feed in new evidence
Outcomes Focus

• LA specify outcomes
• Young person asked what they want to change & what they want from Includem
• Includem connect these
Outcome Focus

• 8 weekly outcomes & progress discussion
• Worker completes outcomes star
• Data logged in central database
Performance & evaluation

• Reported to Includem’s Service and Quality Committee

• Evaluation built in, originally commissioned now in-house
Next steps...

Surveying parents, carers, referring organisation to gain insight into the outcomes achieved
Satisfaction with services

Uses online feedback tool – Viewpoint

Data shared with staff, young people, annual report, Service and Quality Committee
Next steps...

Working to improve visual representation

Add to information packs
Barriers and Challenges

• paperwork and administration

• technical and organisational teething problems
Enablers

• All staff evidence-based toolkit - A Better Life. Approaches and activities

• Monitoring & evaluation team (two people) and an Improvement Manager
Benefits of being evidence informed

1. Strengthening confidence - ‘you know what you are doing is right’
2. Enhances integrity - ‘they know and are open about real performance and outcomes’
3. Ensures continuous improvement
4. Can prove what they do, value for money and the difference they make
5. Ensure they stay focused on the young people, not on the organisational needs
Lesson 1: Build evidence in at a very early stage, making it part of what you do and not an add-on.

Lesson 2: Don’t drown in data! Be wary of gathering too much.

Lesson 3: If you are generating evidence you need to use all of it, particularly using it to improve.

Lesson 4: Get all your staff on board, they need to see the evidence being generated and how it is being used.
10 min discussion with neighbour...

Questions or Comments
Use of evidence at Apex
77% of respondents 'sometimes', 'often', 'almost always' or 'always' use research to inform their work, whilst 23% 'seldom' or 'never' do.

**Chart 1: To what extent is work across Apex informed by research evidence**

- **Always** (6%)
- **Almost Always** (10%)
- **Often** (25%)
- **Sometimes** (35%)
- **Seldom** (21%)
- **Never** (2%)
44% of respondents consult research at least once a week
To access research people most commonly used:

- internet searching (81%)
- websites (73%)
- consulting reports (56%)
- seminars/events (48%)
Why access research?

Improving services (84%)

Preparing presentations (84%)

Designing programmes or services (73%)
Average of 60% of staff perceived that their research skills were excellent or good
Over a quarter of staff (26%) didn’t believe that Apex always / almost always collected & analysed information about the outcomes achieved by the people they support.
Less than half of respondents (44%) believed that Apex always / almost always consulted research when developing policies and guidelines.
91% believed that research should always / almost always be used in applications for funding, to help evaluate our work and as a source of motivation and ideas
Disconnect

91% of respondents believed that research should always/almost always be used in applications for funding but 60% of respondents believed it always/almost always was
A high proportion of staff believed there were no barriers to accessing (29%) or applying research (38%)
When asked if there were any issues or topics they would like to know more about to help them do their job over half of respondents (52%) said no.
10 min discussion with neighbour...

Questions or Comments
Recommendations and Ideas...
1.

Using RSS as a mechanism for improving information access and awareness
2. Develop a list of useful resources and websites
3.

Organise evaluation training focused on demonstrating impact
Support further improvements to outcome recording, analysis and sharing
5.

Develop a bank of standard questions and questionnaires about services and key issues
6.

Support mini-evaluation, developing or signposting staff to self-evaluation templates, guidance and checklists
7.

Explore using the Apex intranet to better share knowledge
Hold 6 monthly knowledge sharing events
9.

Develop 2 example local area profiles about characteristics of the local area and current service provision
10. Develop an Apex report, articulating the evidence base underpinning the organisation
11.

Develop standard business case and project planning documentation with evidence expectations
12.

Arrange 2-3 training and knowledge sharing meetings about research for the 8 Apex research champions
13.

Ad hoc research support and advice
IDEAS GENERATION

What could you do tomorrow to improve your use of evidence?

What could Apex as an organisation do to help you achieve this?
Tools
• Single source for social services workforce
• Promotion of Information Literacy
• Knowledge Management Strategy
• Based on NHS Education Scotland technical infrastructure
• Shared resources with The Knowledge Network

**Information Landscape**
Research Recordings

Want to know more about crime and justice research? You'll find videos and podcasts about research findings and the implications for policy and practice in the crime and justice research collection.

www.iriss.org.uk/crime-and-justice-research-collection
attachment-informed practice with looked after children and young people

Key points

- Unpaid carers are the largest group of care providers in Scotland.
- Although carers often feel positive about their role, the demands of caring can have an adverse impact on carers’ health and well-being.
- Telecare offers an effective means of supporting carers in their caring role, freeing them from unnecessary stress and providing them with greater personal freedom.
- For telecare to benefit more carers, new ways of identifying carers whose situation could benefit from telecare need to be developed.
- More needs to be done to raise awareness of telecare and its benefits among professionals and carers, as well as the general population.
- Telecare needs to be embedded within standard approaches to assessment, care management and review.
- Carers’ input into telecare service design and delivery is necessary to ensure that outcomes for carers (and those cared for) are maximised and sustained.
- Staff and carers should be aware of the need for joint working where community-based services (telecare) overlap with acute services (Telehealth).

improving support for black and minority ethnic (BME) carers

Key points

- BME carers face particular difficulties in accessing and using support services, over and above those experienced by white carers.
- Low uptake of services by BME carers cannot be attributed to their lack of interest in receiving support.
- Many BME carers are unaware of the services that exist to support them.
- A lack of language-matched information is perceived by BME carers to be among the greatest barriers to accessing services.
- There is a need for culturally competent services, based on culturally appropriate and language-matched assessment processes.
- Pioneers and providers of health and social care services have a legal duty to offer services that are accessible and appropriate to all sectors of the community, irrespective of ethnic origin.
The guide includes:

- knowledge of effective team leadership
- evidence relating to the achievement of outcomes for people who use services and their unpaid carers
- training materials: exercises, scenarios, case studies
- audit tool – adapt the manual to team needs