**Evaluation: Importance for your practice**

**Abstract**

This article discusses the importance of evaluation of service delivery in nursing practice which is becoming increasingly used and led by nurses who are well placed to evaluate service and practice delivery.We start by defining evaluation of services and wider care delivery and its relevance in current NHS practice and policy, setting the current healthcare context. We help you think about how evaluation of services or practice is different from research and audit activity and to consider why and how you should use evaluation in your practice. The steps that can be involved in planning for an evaluation are presented, which will help you design a service evaluation. Evaluation in the healthcare context can be a challenging activity and some of the potential issues of such work are presented, alongside suggestions as to how these challenges might be overcome. Finally, we highlight further resources and guidance on evaluation activity to support your ongoing development.

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**Key words**

Evaluation planning and design, public involvement, evaluation challenges, disseminating findings.

**Aims and intended learning outcomes**

This article aims to help you appreciate the importance of evaluation for nursing practice and to understand how evaluation of services and practice is conducted. The paper also provides you with some insights into how to plan to undertake an evaluation, highlights some of the potential challenges that might arise and suggests how these might be overcome. After reading this article and completing the time out activities you should be able to:

* Discuss the importance of service and practice evaluation
* Describe how evaluators plan to undertake an evaluation
* Identify some of the challenges of undertaking evaluation in practice
* Identify sources of further guidance on evaluation activity

**What is evaluation and why is it important to nursing practice?**

Evaluation is used to help us make a judgement about how well something is working and can help inform decisions about how effective a service is and what changes could be considered to improve service delivery going forward. Whilst evaluation can be seen as a subjective assessment made by individuals, it can also refer to the use of a formalised or systematic process undertaken by healthcare practitioners, researchers or professional evaluators (Moule et al, 2017). More nurses are becoming involved in evaluation and are leading them (see example [Case studies - Evaluation Works](http://www.nhsevaluationtoolkit.net/resources/case-studies/) http://www.nhsevaluationtoolkit.net/resources/case-studies/). This is necessary as nurses are well placed to evaluate their services and practice to develop an evidence-base for quality care delivery. The development of internal evaluation is also seen as important in developing a wider evaluation skill base and to promote the wider acceptance of evaluation evidence, However an external perspective can be perceived as more objective an accountable and ideally a combination of internal and external and externa evaluators might be considered (Conley-Tyler, 2005).

Evaluation is increasingly important in healthcare, and supports an evidence-based approach to practice delivery. Evidence-based practice promotes the quality and cost-effectiveness of healthcare, which it is suggested should be based on the best available evidence, patient preference and take account of the current clinical judgement (Schmidt and Brown, 2011). The development of collaborative relationships between healthcare professionals, patients and carers, service users, the public, and wider communities is seen as essential to the NHS effectiveness (Seale, 2016) and should ideally be considered as part of developing evidence-based practice. To support the development of evidence-based practice, evaluation can be applied to review existing services or can be included as part of an implementation plan to judge the value of new services. For example, if a new service is being commissioned in the community with the aim of trying to reduce hospital admissions, evaluation can be used to answer questions about how well the new service achieves this.

An increasing use of evaluation in healthcare reflects a requirement to evidence the effectiveness of the NHS as a publically funded service (Department of Health (DH), 1996). A number of key policy papers have called on healthcare providers to ensure they are using resources in the most effective and efficient way and are working to continuously improve service delivery (DH, 2010, DH, 2012). Furthermore, the importance of undertaking real- time evaluation of new models of care delivery features in the Five Year Forward View (NHS England et al, 2014, Ham and Murray, 2015). The range of polices encouraging evaluation activity as part of reviewing existing practice and in the commissioning of new services (DH, 2011) all support evaluation activity in a range of healthcare settings. Given this, and the growing emphasis on demonstrating effectiveness and efficiency, we are seeing an increase in evaluation activity, which many nurses are not only involved in, but are often leading.

**Time Out 1: Think about whether there are any evaluation projects taking place in your own practice areas. Are there any projects looking at current care delivery or is information being collected about how well a new service or practice is working?**

**How is evaluation defined?**

For nurses, one of the main challenges is to differentiate between evaluation of services and practice, research and audit. Within clinical practice these terms are often used interchangeably, therefore it is important to gain an understanding and rationale behind each method to ensure that evaluation is the appropriate way forward. Thus it is important to ascertain what is meant by evaluation.

All three of these approaches do have some similarities. They all start with a question, with the overall aim of influencing future practice, they then (if done correctly) should use a systematic approach to collect, analyse and interpret data, however they each have a different purpose and are situated in a different context.

* Evaluations are specifically designed around the context of the service being evaluated, that is to rigorously and systematically review care provision, or an aspect of a care service (Humphries, 2008). Evaluations review how well a service is actually meeting its aims and objectives. It does not try to produce generalisable data or new knowledge, and does not always need full NHS ethical approval from the National Research Ethics Service of the Health Research Authority ([www.hra.nhs.uk/research-community/before-you-apply/determine-whether-your-study-is-research/](http://www.hra.nhs.uk/research-community/before-you-apply/determine-whether-your-study-is-research/) ).
* Research studies seek to extend or generate new knowledge and data, aiming to answer a clearly defined question (Moule, 2015); as such requiring ethical approval.
* Audits measure an aspect of practice against a recognised standard (Healthcare Quality Improvement Partnership, 2011); these have become routine part of healthcare to ensure current standards meet best practice. Audits require good clinical governance but do not require full ethical approval.

Therefore evaluation can be defined as a systematic method to determine the effectiveness or efficiency of the service provided or an aspect of this service. It relies on the nurse to develop specific criteria on which to judge a service and this may be from a variety of perspectives, such as service users, stakeholders and clinical teams.

**Time Out 2: Make a list of the similarities and differences between the three approaches**:

|  |  |  |
| --- | --- | --- |
|  | Similarities | Differences |
| Evaluation |  |  |
| Research |  |  |
| Audit |  |  |

**Why and how should you use evaluation in your practice?**

Evaluation of service delivery is often overlooked in practice, however it is a crucial part of practice development and is a tool that all nurses should be aware of and be able to use. With the increasing pressures on healthcare resources and services, all nurses, irrespective of banding and seniority have a responsibility to review the wide nursing care they provide that goes beyond the evaluation of care provided to an individual patient or client.

As a nurse you need to be able to undertake a wide evaluation of what you do in order to find out what is working, and therefore what you should continue to do; as well as to identify what is working less well and needs to change. Evaluation can therefore be on a small scale in terms of an individual nurse, or small team of nurses evaluating the care they provide to their patients.

Through disseminating evaluation findings, nurses can contribute to developing the evidence base. This may be particularly important in an area of nursing where the evidence base is weak or unclear, or where the service being evaluated is using a new approach.

When reading evaluation findings, it is important to understand the context of the service/care being evaluated so that you can assess the relevancy of the evaluation findings to the area you are working in. Reading evaluation findings from other studies may help you to think critically about your own practice area in considering alternative ways of developing practice.

**Time Out 3: Consider the following scenarios and make a list of why it might be beneficial to evaluate these initiatives:**

**1. Red trays have just been implemented in the ward where you work to identify patients who** **require support with eating their meal.**

**2. A new medication ordering system has been implemented in a nursing home to prevent medication running out.**

Mixed methodologies and multiple data are often required when conducting a systematic evaluation, leading the evaluator to consider what data they need to collect and why. For example, if you are evaluating a red tray initiative you may need to:

• Observe mealtimes to see what is happening

• Interview patients to learn from their experiences, as well as staff responsible for implementing and using the red tray scheme

• Develop a questionnaire to obtain the views of families of patients who require a red tray

Using the red tray example, the evaluation data might suggest that the red tray scheme helps to improve safety and patient experience as patients receive appropriate support with eating and drinking. However, it might also suggest that when ward occupancy is high, sometimes there are not enough red trays for all of the patients who need them, resulting in some patients not receiving the support they require. If this data is collected systematically and in accordance with good research and ethical principles, it can inform how the red tray initiative should be further developed in order for it to be more effective. Evaluation data can therefore demonstrate quality as well as inform continuous service/practice improvement.

**Time Out 4: Think of an area of your practice or the service you work in which might benefit from being evaluated; what questions would you seek to answer?**

**Process of service evaluation**

In order to complete an evaluation, a process can be used, shown below in Figure 1 and described further in the following sections of the article.

Figure 1- Process of service evaluation

https://www.kingsfund.org.uk/publications/patients-partners

Define aims & objectives

Involve relevant key stakeholders

Consider ethical & governance requirements and address these

Agree the approach, design & data collection tools

Plan & conduct the evaluation

Disseminate the evaluation findings

**How do evaluators plan to undertake evaluation?**

* ***Aims and objectives***

The purpose of evaluation as previously discussed is to review and judge the efficiency and/or the effectiveness of part or all of a service. The evaluation must be systematic with relevant aims, objectives, methods and dissemination, each of which will now be examined. To evaluate a service is to assess its merits and worth. Evaluation cannot be value-neutral because there needs to be aims and practices against which the evaluation is judged (Humphries, 2008), therefore the aims need to be specific to what you are trying to assess.

Evaluation of services relies on the nurse developing specific criteria on which to judge a service and this may be from a variety of perspectives. Within your clinical area senior management may be interested in cost-effectiveness, while service users may be more interested in how changes in the service with effect their experience and local provision, therefore it is important from the outset to understand what you are reviewing and the aims of the evaluation.

* *What is the area of evaluation?* The initial stage is to determine the area that requires evaluation; you may be requested by your managers to evaluate the service or you may have an area of clinical care that you are interested in.
* *Why does this area require evaluation?* This may because of a recent change, or prospective change, it may be that you can see a potential for improvement.
* *What do you want to review?* Patients’ perspective? Cost-effectiveness of a service? The role of the clinical team?

Once you have answered all three questions you have formulated your plan and can then determine your aims. It is important that your aims are not too broad as this will lead to unrealistic expectation (for example the pain management of people who have dementia) nor too narrow as it will lack substance and loose the importance of your work. Think also about the picture in terms of time and resources, there is little value in starting something and then not being able to have the time or access to the right people to achieve your aims.

* ***Involving patients, the public and other stakeholders***

At the beginning of an evaluation, as is the case for all real time studies examining what is actually happening in practice, it is good to identify all the key stakeholders who should be involved (Robson and McCartan, 2015). Stakeholders are people who are likely to have an interest in the service (or the part of the service) you will be evaluating. Identifying the stakeholders will help you determine at the outset the people you need to talk to and engage with.

Stakeholders may be service users, carers, staff, professionals and/or managers. Active stakeholder engagement will help you to develop a more effective and comprehensive evaluation, as each stakeholder will come from a different perspective and have a different view of what is most important to evaluate and why.

If you take a collaborative approach in an evaluation, involving the local stakeholders, you are also more likely to receive support in terms of the actual process of undertaking the evaluation. This is also important as involvement can aid in gaining stakeholder support to implement changes that are identified through the evaluation findings.

Good quality care is acknowledged as care that is safe and effective (NMC, 2015; Darzi, 2008) but also person centred, where patients are treated with “kindness, respect and compassion” (NMC, 2015, p.4). A key component in both the NMC Code of Professional Standards (NMC, 2015) and Lord Darzi’s definition of high quality healthcare is prioritising people and putting the service user at the heart of everything we do. Therefore, if evaluation aims to give us an indication of how a service or an aspect of a service is functioning, we need to include and listen to the service user voice. Patients and the public, therefore, provide an important perspective, which cannot be sought from any other source. They know how it feels to use the service; they know what the experience is like. As nurses, we should all be aiming to provide good quality care. Without inclusion of service users, we will not be able to truly evaluate the care we are providing as we will only have part of the picture.

**Time Out 5**: **Make a list of the key stakeholders who you would involve in an evaluation study about your area of practice.**

* ***Ethics and governance***

Evaluation projects will not necessarily require ethical approval. However, in some circumstances ethical approval may be sought from the National Research Ethics Service (NRES) of the Health Research Authority. The Health Research Authority provide further guidance on to help you determine whether ethical approval is needed ([www.hra.nhs.uk/research-community/before-you-apply/determine-whether-your-study-is-research/](http://www.hra.nhs.uk/research-community/before-you-apply/determine-whether-your-study-is-research/) ). The general principles are that a project meeting any of the following criteria will require ethical approval;

1. There is some randomisation of the study group, ie patients can be allocated to a control and experimental group who receive different treatments (see Moule et al 2017).
2. There will be a change in the normal treatment delivered ie there is a new treatment being planned as part of a protocol.
3. The data and knowledge that will be developed in the project will be generalizable ie. It will be made widely available to the population at large.

If ethical approval is needed, a plan of the study is required (protocol) and information for the participants will be needed that explains their involvement in the study and any risk. The NRES committee will also want to see consent forms used to gain permission from the public to involve them in the study. Often a local research governance office will help guide through this process.

Evaluation of service improvement and evaluation that do not meet the above principles would not normally require NRES approval, though the evaluators may seek approval from an academic institution, such as a university ethics committee. Whilst this is not a requirement it can be seen as good practice. Evaluators may also provide project information for participants and gain informed consent.

Even though NRES approval might not be required, if an evaluation is being conducted within a health service setting there may be a requirement for Research Governance approval. The local Governance office can advise on this and may require notification of the project, a project plan and will review these before giving access to any data.

**Evaluation approach to answer the question**

Evaluation uses many of the tools and techniques that are adopted in other types or research and uses them to answer questions about need, efficiency, effectiveness, appropriateness and acceptability (Moule et al, 2017). Evaluation can be designed with a qualitative or quantitative approach depending on the questions being asked and the type of data that will be generated. Qualitative evaluation tends to focus on language, perceptions and experiences in order to understand and explain behaviour, whereas quantitative evaluation generates data that can be analysed numerically using statistical techniques (Moule et al, 2017). The approach used depends on the type of question being asked.

Sometimes, it is most suitable to use both approaches rather than solely either one. This type of evaluation is called a mixed method evaluation, whereby some quantitative data is collected alongside qualitative data. Advocates of mixed method research suggest that researchers should seek to use as many methodological perspectives as possible when investigating a problem (Denzin, 2009). This means qualitative and quantitative findings can be looked at side by side and the evaluator can get a more rounded picture of the situation. Many nursing questions can be answered using a mixed method approach.

The data can be collected using a variety of research techniques including interviews, focus groups, questionnaires and literature reviews (Moule et al, 2017). Employing these techniques will require appropriate skills and expertise. Initially, developing these skills may seem daunting and you may choose to seek out additional support and training. However, many nurses have experiences of some of these skills in their clinical practice. Nurses draw on a number of difference data sources in their daily practice to help them make judgements, for example, when assessing a patient, a nurse will take quantitative assessments such as blood pressure and temperature, use observational skills to monitor the patient and interview skills in their assessment. These skills can be transferred and used to collect data in an evaluation project.

**Challenges and sensitives surrounding planning, conducting and disseminating evaluations in practice**

Conducting an evaluation can be difficult and you may face some challenges when evaluating practice, but there are often ways of overcoming them. Challenges may involve the setting and clarifying of aims and objectives, selecting the appropriate research design and dissemination of results (Moule et al, 2016) The table below (Table 1) summarises some of the challenges that you may encounter when planning an evaluation and possible ways of overcoming them.

**Table 1: Evaluation challenges and possible solutions**

|  |  |
| --- | --- |
| **Challenges to planning, conducting and disseminating an evaluation in practice…** | **Ways of overcoming challenges** |
| There are different approaches, which can initially seem confusing and daunting to an inexperienced evaluator. | Remember the premise of a good evaluation study is one that uses sound ethical approaches and methodologies. Additionally, there are a growing number of resources being developed to assist you on your way (see below: How do I find out more?). |
| Long-term goals can be difficult to measure. | Start on a small scale and focus on an area of practice you are able to influence. For example, if you are a nurse working in a nursing home, you might want to evaluate how information is communicated within the nursing team. |
| Service provision is often complex, making it difficult to distinguish boundaries. | Having a clear aim and well-defined objectives are important when starting an evaluation study so that you are clear as to what you are evaluating and why. The inclusion of stakeholders is also important in order to support you to maintain focus. |
| The evaluation team may not have sufficient expertise or experience | Seek support from local research and development departments and try to find a mentor within your clinical practice. There are many online resources available to support you (please see below) and try to start small at first. Including stakeholders from the beginning can also help with ensuring the stakeholders can see the value of the evaluation and support it. |
| It may be challenging to conduct the evaluation alongside your clinical responsibilities | It is difficult to juggle research, audit and evaluation time with other clinical responsibilities. Speak to your manager and team at the planning stage of the evaluation to ensure a realistic evaluation with appropriate timeframe and resourcing is planned. |

Many of these challenges can be avoided or their impact minimised by careful planning and having a clear protocol at the beginning of the evaluation. The protocol is followed throughout the evaluation to make sure it is completed on time and within any resource or budget constraints. Considering challenges at the onset and creating plans to avoid or minimise them can ensure the evaluation is not unduly disrupted. Involving stakeholders at appropriate stages can reduce local concern and resistance. Involvement of the local stakeholders can increase support for the evaluation and creates a team approach, which aids successful evaluation. The table below highlights some potential challenges that can be encountered with stakeholders.

**Table 2: Potential stakeholder challenges**

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| --- | --- |
| Staff can feel threatened when their provision is being evaluated | Partnership working and the involvement of staff stakeholders might help to overcome some potential difficulties. |

|  |  |
| --- | --- |
| Staff may be resistant to the evaluation and restrict evaluators access to the necessary data, service users or staff | Clear plans and defined roles and responsibilities can help towards overcoming this barrier. Also, to ensure that staff are aware of the purpose of the evaluation. It can help to reduce this tension if staff feel involved with the development and design of the evaluation. |
| Service users may be resistant to the evaluation | Partnership working and the involvement of public stakeholders might help to overcome some potential difficulties. Ensure that public are aware of the purpose of the evaluation and kept informed of the progress, findings and involved as far as possible in any service redesign or change. |
| If the evaluation is externally funded, the funding body may have unrealistic expectations about what the evaluation can achieve | Through discussions at the planning stage regarding all stakeholders expectations, with respect to what can be achieved, in what timeframe and at what cost, can limit misunderstandings, frustrations and disappointments during the evaluation. |

**Time Out 6: Using the example of an evaluation you thought of in Time Out 4, what challenges may you face? Think about the impact these challenges may have on the evaluation and write down some ideas to minimise this risk. Write a brief action plan to minimise potential challenges.**

***Dissemination***

Dissemination is a vital part of evaluation. The findings need to be disseminated in a way that is accessible to the audience, for example, using language that is simple and understandable. It is important findings and recommendations for practice change are communicated to both those directed involved in the evaluation and to those who have the power and influence to act upon the findings. Sometimes evaluation findings identify the need for practice change and result in changes to services that may not be popular and can impact on service users, staff and the public. Such findings need to be disseminated sensitively to limit harm and increase understanding for the rationale behind the proposed changes

**Time Out 7: Write down five reasons why is it important to disseminate?**

**How do I find out more?**

Given the increasing emphasis on evaluation in healthcare there are a growing number of resources and materials being developed that you might find useful to access.

* The Health Research Authority ([www.hra.nhs.uk/research-community/before-you-apply/determine-whether-your-study-is-research/](http://www.hra.nhs.uk/research-community/before-you-apply/determine-whether-your-study-is-research/) ) offer the Research Governance Frameworks for Health and Social Care that help you to define your study
* The Collaborative for Health Research and Care (CLAHRC west) ([www.clahrc-west.nihr.ac.uk/evaluation](http://www.clahrc-west.nihr.ac.uk/evaluation) offer information and training in evaluation as well as linking to other resources
* The West of England Academic Health Science Network ([www.weahsn.net/what-we-do/using](http://www.weahsn.net/what-we-do/using)-evidence-based-healthcare/evaluation-for-a-qi-project) offer a series of three short videos on evaluation
* The Avon Primary Care Research Collaborative (APCRC) ([www.apcrc.nhs.uk/evalaution/](http://www.apcrc.nhs.uk/evalaution/) provide an on toolkit, Evaluation Works to support evaluation activity.
* The Health Foundation, an independent charity working to improve the quality of health care in the UK provide information on quality improvement and service evaluation (www.health.org.uk).

**Conclusion**

Evaluation is increasingly a requirement of new service commissioning and required as part of maintaining evidence-based and resource effective practice. A number of nurses are involved in local evaluations and are developing skills and expertise in the area.

Nurse should have knowledge of why evaluation is important, what it is, how it is planned and conducted and appreciate some of the challenges of undertaking such activity in healthcare settings. The evaluation process outlined in figure 1 guides the process of designing and conducting a service evaluation.

This continuing professional development article provides key information to support nurses in completing evaluation and also points to further online resources that provide more in-depth information and toolkits.

**Time Out 8: Having completed the article, you might want to visit the online sites and join the evaluation community.**

**References**

Conley-Tyler, M. (2005) A fundamental choice: internal or external evaluation? Evaluation Journal of Australasia. 4 (1,2), p.3-11.

Denzin. N (2009) The research act: A theoretical introduction to sociological methods. 4th Edition. Somerset, NJ: Transaction.

Darzi, A. (2008) High quality care for all: NHS Next Stage Review. http://webarchive.nationalarchives.gov.uk/20130107105354/http://www.dh.gov.uk/prod\_consum\_dh/groups/dh\_digitalassets/@dh/@en/documents/digitalasset/dh\_085828.pdf. (Last Accessed: 11 November 2016.)

Department of Health (1996) Towards and evidence based health service. London : DH.

Department of Health (2010) Equity and Excellence: Liberating the NHS. <http://goo.gl/8o4M6M> (Last accessed 9 November 2016.)

Department of Health (2011) NHS Future Forum: Summary report on proposed changes to the NHS. http://goo.gl/om0dZW (Last accessed: 28 November 2016.)

Department of Health (2012) Health and Social Care Act 2012, Available at: <http://services.partliament.uk/bills/2010-12/healthandsocialcare/documents.html>. (Last accessed 8 November 2016).

Ham C, Murray R (2015) Implementing the NHS Five Year Forward View: Aligning Policies with the Plan. htpp://goo.gl/DrgCW7 (Last accessed: 28 November 2016.)

Healthcare Quality Improvement Partnership (HQIP) (2011) A Guide for Clinical Audit, Research and Service Review: An educational toolkit designed to help staff differentiate between clinical audit, research and service review activities. http://goo.gl/CCXiot (Last accessed: 28 November 2016.)

Humphries, B. (2008). *Social work research for social justice*. Basingstoke: Palgrave Macmillan.

Moule P, Armoogum J, Dodd E, Donskoy A-L, Douglass E, Taylor J, Turton P (2016) Practical guidance on undertaking a service evaluation. Nursing Standard. 30 (45), 46-51.Moule P, Aveyard H, Goodman M (2017) Nursing Research : An introduction. 3rd Edition. London: Sage. Moule P (2015). Making sense of research in nursing, health and social care. London: Sage.

NHS England, Care Quality Commission, Health Education England, Monitor, Public Health England, Trust Development Authority (2014) NHS Five Year Forward View. http://[www.england.nhs.uk/oyrwork/futurenhs](http://www.england.nhs.uk/oyrwork/futurenhs) (Last accessed: 6 November 2016.)

Nursing & Midwifery Council (NMC) (2015) The Code: Professional Standards of practice and behaviour for Nurses and Midwives. London: NMC.

Robson, C., and McCartan, K. (2015) Real world research. 4th edition. Chichester: John Wiley and Sons.

Seale, B. (2016) Patients as Partners. The King’s Fund. <https://www.kingsfund.org.uk/publications/patients-partners>. (Last accessed: 5 January 2017.)

Schmidt, N. and Brown, J. (2011) Evidence based practice for nurses. 2nd Edition. Massachusetts: Jones and Bartlett Publishers.