



# MOVE NORTHAMPTONSHIRE

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## Evaluation Support Offered by Move Northamptonshire

### Move Northamptonshire and Evaluation

- Sport England and the Office for Health Improvement and Disparities advocate the implementation of a whole-systems public health approach towards enabling physical activity opportunities. This is because opportunities to be physically active intersect across societal inequalities that cannot be addressed by one agency, department, or organisation. The World Health Organisation outlines the public health approach into four cyclical steps:
  1. **Understand the problem**
  2. **Design solutions**
  3. **Evaluate impact**
  4. **Make it work in practice**
- This four-step process requires the continuous use of data, insight, and evidence to inform planning and decision-making. The use of data to design and evaluate physical activity programmes is an emerging area that Move Northamptonshire would like to develop in Northamptonshire. To help develop our understanding, Centre for Physical Activity and Life Sciences have created a framework to help guide Move Northamptonshire and its wider partners through the key steps of a programme evaluation.
- Move Northamptonshire recognises that the new framework and programme evaluations are still new to the system. Therefore, there is a journey for all partners to go on to develop the capability and capacity to undertake evaluations. Move Northamptonshire will provide support to all partners to help them make better use of data, insight, evidence, and evaluation.

### Purpose of this Intervention Evaluation Framework

- Move Northamptonshire would like you to use this framework through the planning, delivery, and reflection of the programme to help you share learning with system partners. The framework is intended to help you work through the steps of the public health approach by identifying, accessing, and using suitable data to plan, deliver, and evaluate programmes.

### The Role of Evaluation

#### What is an evaluation?

- Evaluation is a systematic assessment of the design, implementation and outcomes of an intervention. It involves understanding how an intervention is being, or has been, implemented and what effects it has, for whom and why. It can identify what can be improved and estimates its overall impacts and, in some cases, cost-effectiveness. Evaluation can inform thinking before, during and after an intervention's implementation. Different questions are answered at each stage:

#### Before:

- What can we learn from previous evaluations of similar interventions?
- How is the intervention expected to work?
- How is the intervention expected to be delivered?
- Provides evidence that informs the intervention design, how best to implement the design and what the likely outcomes might be.

#### During:

- Is the intervention working as intended?
- Is the intervention being delivered as intended?
- What are the emerging impacts and why?
- How can the intervention be improved?
- Are there unintended consequences of the intervention?

#### After:

- Did the intervention work? By how much? At what cost?
- What have we learned about the intervention's design and its implementation?
- Provide a report on the design, implementation and outcomes, drawing out lessons for the future and providing an assessment of the overall impact of the intervention.



## What is Good Evaluation?

- Evaluations are designed based on the intervention's aims, intended outcomes, delivery, context, and target audience. Therefore, there is no set structure that an evaluation should follow. Instead, there are four principles that can make high quality interventions:

<b>Useful</b>	Provide findings that stakeholders can use to inform their decision-making.
<b>Credible</b>	Be transparent with why, how, and what data was collected, analysed, and interpreted.
<b>Robust</b>	Where possible, use validated data collection tools to collect data, such as surveys. If validated tools do not exist, then use previous evidence such as theories and frameworks to inform what questions to ask, how, and why.
<b>Proportionate</b>	Not all interventions require the same level of evaluation. The general guide is that 5-10% of a project budget should be spent on evaluation. For some interventions, this may mean simple monitoring of the number of people participating in the intervention, feedback from participants, and reflections from the intervention leaders.

- The Maryland Scale (Figure 1) demonstrates how confident you can be that an intervention made a difference by the type of evaluation design that was used. Of course, the standard of evaluation that can be delivered is dependent on the programme's budget as well as the capability and capacity of those conducting the evaluation.
- Move Northamptonshire would expect most interventions to aspire to a level 2 evaluation on the Maryland Scale. Over time, Move Northamptonshire wants to invest into partners' capability and capacity to evaluate interventions, so the quality of evaluation in Northamptonshire progresses up the Maryland Scale.

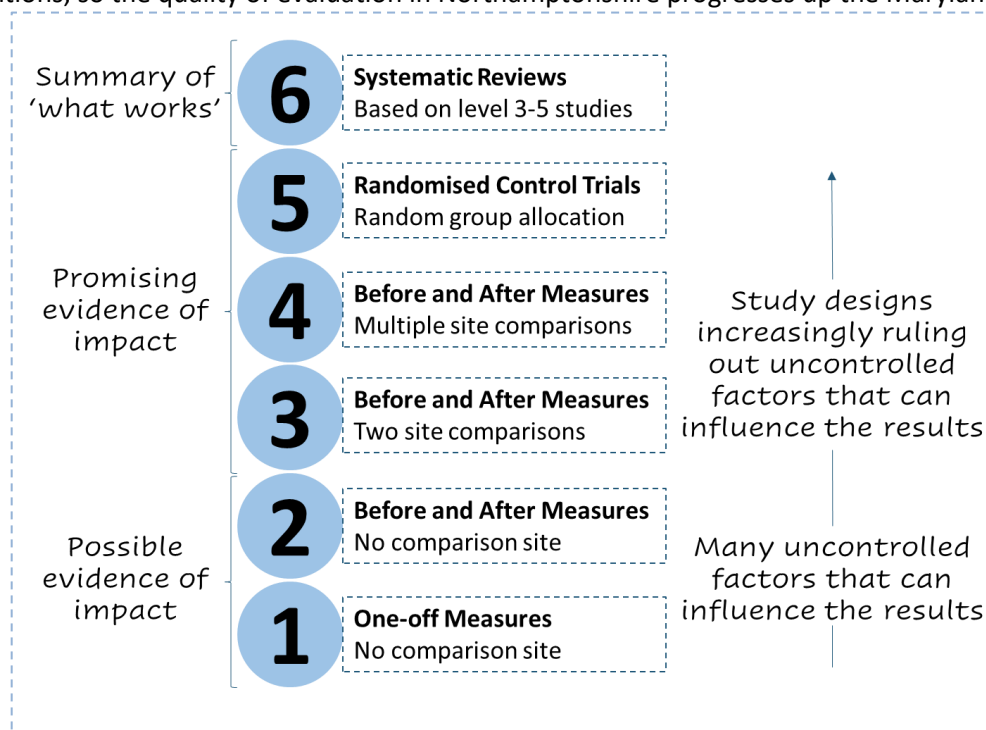


Figure 1. Maryland Scale for evaluation design.

## Definitions for the Types of Intervention

- Central to an effective public health approach to enable physical activity is the implementation of interventions that successfully address barriers and enabling factors in individuals, families, communities and populations to increase physical activity at a community and/or population level.
- Physical activity interventions are described as operating in various contexts, which are defined in the table below, and at various level of the socio-ecological model (Figure 2).

Contexts of intervention to enable physical activity	
<b>Universal</b>	Aimed at a general population.
<b>Proportional Universality</b>	Proportional universality describes an approach to the resourcing and delivery of services at a scale and intensity proportionate to the degree of need. At a global, national and subnational level, there is a need to focus efforts on reducing inequity in the opportunities for physical activity. Therefore, proportional allocation of the resources to the actions needed to engage the least active and those who face the greatest barriers to increasing participation should be a priority.
<b>Primary Care</b>	Health care provided in the community for people making an initial approach to a medical practitioner or clinic for advice on disease prevention and management. It is the first point of contact for someone when they contract an illness, suffer an injury or experience symptoms that are new to them.
<b>Secondary Care</b>	Health care that is provided by a specialist or facility upon referral by a primary care provider and that requires more specialized knowledge, skill, or equipment than the primary care practitioner can provide.

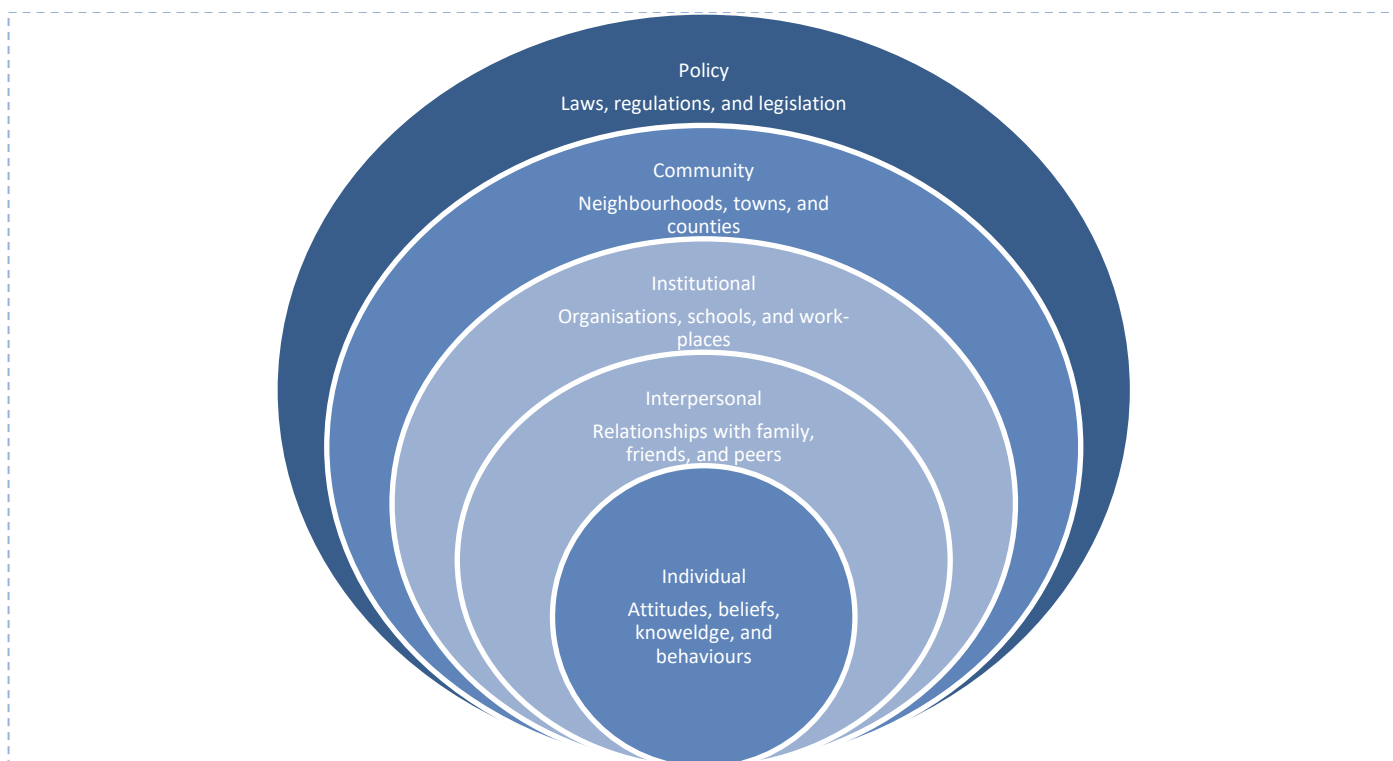

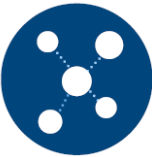









Figure 2. The socio-ecological model.

## How was this Intervention Evaluation Framework Developed?

- The intervention evaluation framework incorporates the World Health Organization's public health approach and Global Action Plan on Physical Activity, Sport England's Uniting the Movement and Monitoring and Evaluation Guidance, NELPs 9 Conditions for Tackling Inequalities in Physical Activity, and the Move Northamptonshire Framework.
- The National Evaluation & Learning Partnership (NELP) and Sport England have developed a guide to outline the enabling conditions for physical activity across the intersecting layers of society, which are listed below, taking into account and addressing the power dynamics that disadvantage people with characteristics, identities and/or lived experiences throughout every condition. We have mapped these conditions across the evaluation framework to help you implement them into your day-to-day work. Look out for the symbols throughout the framework to identify alignment with NELPs 9 conditions.

Condition	Definition	Rational
 <p><b>Identifying the barriers and enablers of physical activity in the local context</b></p>	There is process for developing understanding and shared knowledge of what supports or prevents people being physically active within the local context.	<p>Actions which are based on a deep understanding of the barriers and enablers of physical activity are more likely to lead to effective and sustainable outcomes.</p> <p>Actions which are based on shallow or skewed understanding of the barriers and enablers of physical activity could inadvertently widen inequalities.</p> <p>Sharing knowledge of barriers and enablers can help drive a common purpose and common strategy - increasing likelihood of collective impact on what matters most.</p>
 <p><b>Distributed and collective leadership</b></p>	People are enabled to act within their sphere of influence, make decisions, and create the conditions for people to be physically active. This occurs across multiple layers of society.	<p>When decisions making, resource and initiative are less centralised, more people can act to enable active lives.</p> <p>Everyone has a role to play. Established leaders can use their power to legitimise physical activity (alone or as a recognised aspect of wellbeing/thriving/prevention), challenge prevailing views and structures which create inequalities, and prioritise whole system and place-based ways of working.</p> <p>Individuals across multiple layers of society, including people who are inactive, can make decisions about what works to enable physical activity. This can lead to better strategies and outcomes.</p>
 <p><b>Collaboration within and across organisations</b></p>	There is productive partnership working around aligned interests and a common purpose.	<p>Working with different organisations can help to drive innovative physical activity policy and practice by drawing on different skill sets and efficiencies by reducing duplication and/or pooling resources.</p> <p>Working with different organisations can support shared problem solving and unravel contradictions in local systems which prevent physical activity or contribute to inequalities.</p>
 <p><b>Capacity and capability across the workforce, volunteers and in communities</b></p>	There are strategies to recruit, reward or build skills, attributes, values, mindsets, knowledge, networks, and capacity for responsive, place-based systemic, and collaborative working to enable physical activity.	<p>Specific skill sets and attributes are needed to for this type of responsive working. (E.g. to understand barriers and enablers, distribute leadership and collaborate).</p> <p>These skill sets and attributes are not inherently present amongst the existing workforce, volunteers, and communities.</p> <p>Alternative skill sets and attributes can actively block progress.</p> <p>Strategies for building capacity and capability, tailored to the local context, can increase competence and motivation to act in ways which are conducive to tackling physical activity inequalities.</p>
 <p><b>Facilitative processes for agile collaborative working and proportionate, representative governance</b></p>	Administrative processes within key public services have been implemented to ensure accountability and support the flow of information, data, power, and resources (including funding) in ways that are equitable, proportionate, agile, and responsive.	<p>Administrative processes are typically designed to reduce risk to organisations and encourage competition. These purposes can inadvertently prevent collaboration and distribution of resources and decision-making power to people best placed to act to enable physical activity.</p> <p>Conversely, processes which are flexible, proportionate and responsive to emerging contexts can support and legitimise collaboration, distributed leadership, shared problem solving and reciprocal feedback loops.</p>

Condition	Definition	Rational
 <p><b>Co-production, local people-led initiatives (community power)</b></p>	Physical activity strategies are anchored in community priorities, initiatives, and assets.	When community members engage at their pace and in spaces that they can shape, they are more likely to engage and collaborate. This approach often leads to more appropriate actions that enable physical activity, actions that the community has a sense of ownership and control.
 <p><b>Cultures and practices for wellbeing and physical activity</b></p>	There is a culturally inclusive social environment for physical activity that enables people to have the freedom to be active in ways that suit them.	Shared ideas and social influences shape attitudes and involvement in physical activity. Strategies, practices, and communications that consider traditions, customs, values, beliefs, behaviours, and assumptions of groups who are inactive, are more likely to be appropriate and effective.
 <p><b>Physical environments that enable wellbeing and physical activity</b></p>	The local natural and built environments encourage activities which are appropriate, accessible, affordable, and safe.	Actual and perceived characteristics of the natural and built environment affect physical activity behaviours. Accessible, appropriate, affordable and safe environments are unequally distributed in society. This may include access to blue and green spaces, urban planning, and workplace design.
 <p><b>Cycles of learning and action</b></p>	There are appropriate methods in place to elicit data and reflections, articulate and frame issues, and improve the design of the systems affecting physical inactivity.	Physical inactivity inequalities are the result of multiple interacting influences, which makes it difficult to understand cause and effect in simple terms. We have to accept that some degree of uncertainty and partial knowledge. We can, however, build better understanding of how particular actions and ideas work and the contexts in which they typically do or do not. Gathering and apply this information can provide 'decision support' to guide future actions in context.

## How to Use this Intervention Evaluation Framework

### This intervention evaluation framework can be used by:

1. Intervention leads to self-evaluate their interventions.
  2. Intervention leads to help them plan their interventions.
  3. Independent evaluators to conduct process and impact evaluations of interventions.
- Throughout the document, advice is provided to help you understand, plan, and conduct your evaluation. Hyperlinks are embedded throughout the advice to signpost you to further guidance.
  - Question and answer boxes are then provided to help you conduct your evaluation. Please provide as much detail as possible for each question to help others learn from the work you have done. Question and answer boxes are presented as a peach-coloured header with purple and white response areas. Some questions include checkboxes, which you left click your mouse on to select. See the example below.

### Example question and answer box:

What intervention context is this?		
<input type="checkbox"/>	Universal	Aimed at a general population.
<input type="checkbox"/>	Proportional Universality	Proportional universality describes an approach to the resourcing and delivery of services at a scale and intensity proportionate to the degree of need. At a global, national and subnational level, there is a need to focus efforts on reducing inequity in the opportunities for physical activity. Therefore, proportional allocation of the resources to the actions needed to engage the least active and those who face the greatest barriers to increasing participation should be a priority.
<input type="checkbox"/>	Primary Care	Health care provided in the community for people making an initial approach to a medical practitioner or clinic for advice on disease prevention and management. It is the first point of contact for someone when they contract an illness, suffer an injury or experience symptoms that are new to them.
<input type="checkbox"/>	Secondary Care	Health care that is provided by a specialist or facility upon referral by a primary care provider and that requires more specialized knowledge, skill, or equipment than the primary care practitioner can provide.

- Response boxes are provided as a guide, but you may want to add further columns, rows, graphs, tables, qualitative themes, case studies, and information to help articulate the findings.
- This intervention evaluation framework is designed to be used before, during, and after the delivery of your intervention. So, please take time to read through the framework before you plan your intervention.

#### How can I make best use of this evaluation framework?

1. When you are notified of your successful grant outcome, use the **Project Overview** section to revisit what you said your project would aim to achieve. In the **Project Overview** section, you can confirm:
  - Which partners are involved in the project,
  - What are the aims and objectives,
  - What type of intervention you are delivering, and
  - How the outcomes of your intervention align with the Northamptonshire Serious Violence Strategy.
2. Arrange a meeting with the NSport to discuss your collective **understanding of the problem that the intervention aims to address** and how you can use **existing evidence of 'what works'** to help you design your intervention.
3. Firm up the design up your intervention by **identifying your target audience** and creating a **Theory of Change** to help you understand how your planned intervention can lead to the improved outcomes that you hope to achieve. Take time to detail your **planned activities** so they can be replicated more easily if there is an opportunity to expand your intervention.
4. Review the **Reach** and **Effectiveness** sections before the start of your intervention to plan how to monitor attendance (Reach) and how to obtain feedback from your target audience (Effectiveness), which could be done by using a survey, interview, or case studies, for example. Meet with the NSport so they can help you to plan your Reach and Effectiveness measures.
5. Deliver your intervention, ensuring you monitor attendance (Reach) and get feedback from the people attending your activities (Effectiveness).
6. The **Adoption**, **Implementation**, and **Maintenance** sections can be completed during project meetings either during or towards the end of your intervention. Use the questions in these sections to help your team and partners reflect on the delivery of the project.
7. Finally, at the end of the project, **share your learnings and the recommendations** that you would make to others to help them deliver similar interventions.

- Remember, this intervention evaluation framework is intended to be used as a training resource to develop your evaluation skills.
- Do not worry if you cannot answer a section of the framework.
- Keep in contact with the NSport team, so they can support you through your evaluation journey.






## Project Overview

### Overview of the Intervention

<b>Intervention Title</b>	
<b>Please provide a description of the intervention</b>	
<b>Start Date:</b>	
<b>End Date:</b>	

### Partners Involved

	Partners involved in the intervention	What are their roles and responsibilities	Why have they been given these roles and responsibilities

### Aims, Objectives, and Expected Outcomes of the Intervention

Aim	Objectives	Intended Outcomes

**To insert more rows:** Click on the bottom row, right-click the mouse, select 'Insert', select 'Insert Rows Below.'

### Intervention Context











What intervention context is this?		
<input type="checkbox"/>	Universal	Aimed at a general population.
<input type="checkbox"/>	Proportional Universality	Proportional universality describes an approach to the resourcing and delivery of services at a scale and intensity proportionate to the degree of need. At a global, national and subnational level, there is a need to focus efforts on reducing inequity in the opportunities for physical activity. Therefore, proportional allocation of the resources to the actions needed to engage the least active and those who face the greatest barriers to increasing participation should be a priority.
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## Move Northamptonshire Alignment

Enablers		Aims	
<input type="checkbox"/>	Great Start	<input type="checkbox"/>	Embed active play within all early years' settings.
		<input type="checkbox"/>	Support all schools to offer '60 Active Minutes' a day.
		<input type="checkbox"/>	Make all PE lessons inspiring and motivating for all children and young people.
		<input type="checkbox"/>	Sustain a confident and capable workforce within schools.
		<input type="checkbox"/>	Create easy pathways from school to community provision.
		<input type="checkbox"/>	Support 'whole school' approaches around healthy active lifestyles (including school meals, family involvement, active travel and staff wellbeing).
<input type="checkbox"/>	First-Rate Communication	<input type="checkbox"/>	Establish system-wide consistency in language and terminology.
		<input type="checkbox"/>	Co-ordinate regular and system-wide campaigns that inspire more people from every background to be active.
		<input type="checkbox"/>	Commit to the 'Open Active' data standards, publishing information in an open and consistent way.
		<input type="checkbox"/>	Build and support a team of 'Move Northamptonshire' champions to advocate for physical activity within their setting, this could be a community, workplace or interest group.
		<input type="checkbox"/>	Maximise the opportunity to use digital platforms and IT solutions to make finding out about and participating in physical activity opportunities easier.
<input type="checkbox"/>	Tailored Choices	<input type="checkbox"/>	Support the core network of clubs, leagues, events and competitions to continue their recovery from the pandemic and tackling the cost-of-living pressures.
		<input type="checkbox"/>	Provide opportunities for people who need extra support post-pandemic and those most effected by the cost-of-living pressures.
		<input type="checkbox"/>	Deepen our understanding and insight around physical activity inequalities.
		<input type="checkbox"/>	Prioritise resources more carefully, targeting those that need the greatest support.
		<input type="checkbox"/>	Support communities to build their own capacity to be active.
		<input type="checkbox"/>	Work hand-in-hand with people in considering and creating the opportunities that will support active lifestyles.
		<input type="checkbox"/>	Broaden the diversity of the professional, voluntary and community workforce, at all levels.
		<input type="checkbox"/>	Explore ways of reducing cost for those who can least afford activities.
<input type="checkbox"/>	Integrated Offers	<input type="checkbox"/>	Embed physical activity and movement into the health offer locally, working with Public Health, the Integrated Care System, Primary Care Networks and voluntary sector providers to address wider health needs.
		<input type="checkbox"/>	Deepen the integration of physical activity and movement into social prescribing networks and referral pathways making opportunities inclusive and easy to access.
		<input type="checkbox"/>	Utilise physical activity within wider local government objectives and services around anti-poverty, levelling up, community engagement, regeneration, economic development and the green agenda.
		<input type="checkbox"/>	Embed movement and active lifestyles into the Active Ageing work in Northamptonshire.
		<input type="checkbox"/>	Review leisure provision to ensure it is sustaining existing activity levels and increasing take-up by those who can least afford it.
		<input type="checkbox"/>	Support the incorporation of physical activity into workplaces, supporting employers to provide the facilities, incentives, policies and programmes to improve the wellbeing of their staff.
<input type="checkbox"/>	Active Environments	<input type="checkbox"/>	Transform local planning policy and processes to better support active lifestyles.
		<input type="checkbox"/>	Designate a series of 'Active Zones / Quarters' across the county, where priority effort and additional resource is directed into increasing use for physical activity.
		<input type="checkbox"/>	Accelerate the construction of new, safe, routes for cycling and walking.
		<input type="checkbox"/>	Create 'Healthy Streets' across the county, bringing together communities and local authorities, to increase the amount of cycling, walking and playing in our local areas.
		<input type="checkbox"/>	Ensure we have a built facility infrastructure that meets community need and insight, especially those groups where inactivity is greatest.
		<input type="checkbox"/>	Reduce the impact of climate change by identifying more sustainable ways of operating leisure and sport facilities, working towards a carbon neutral target by 2030.
<input type="checkbox"/>	Active Ageing	<input type="checkbox"/>	Embed physical activity into whole system community approaches that support improved outcomes for older adults, including models of social prescribing across the county.
		<input type="checkbox"/>	Create stronger connections with health and adult social care providers to build an integrated offer for older adults.
		<input type="checkbox"/>	Apply insight and person-centred approaches to better understand older adults and provide opportunities and activities to benefit them.
		<input type="checkbox"/>	Collectively promote and advocate the benefits of maintaining an active lifestyle, including strength and balance into later life.

## Designing your Intervention

### Understand the Problem that the Intervention Aims to Address

<b>Demographics</b> Sport England split their research into different demographics to help you understand why some people are less active. Click on any of the groups below to discover the reasons behind their activity levels.				
 <a href="#">Inactive People</a>	 <a href="#">Children and Young People</a>	 <a href="#">Ethnicity</a>	 <a href="#">Faith Groups</a>	 <a href="#">Gender</a>
 <a href="#">Disabled People</a>	 <a href="#">LGBTQ+</a>	 <a href="#">Lower Socio-Economics Groups</a>	 <a href="#">Older Adults</a>	 <a href="#">Health Conditions</a>

- The first step of the public health approach is to review the existing data and insight to understand barriers and enablers that contribute to the likelihood of physical activity occurring. These barriers and enablers can then be addressed with a suitable intervention. Your understanding of these barriers and enablers should be informed by credible evidence, such as strategic needs assessments, government and Sport England reviews, and local community engagement.
- The below questions are there to guide you through the evidence review process. They start with the end in mind and work backwards to help you identify the target population and their barriers and enablers that contribute to the likelihood of physical activity occurring.
- Given the wide range of physical activity interventions, some of these questions may be more or less relevant to your intervention. You are not expected to know all the required insight to answer these questions, so please contact Move Northamptonshire for advice and insight about the available evidence to answer these questions.

#### Other evidence sources you could use:

- [Sport England Active Lives Data Tool](#)
- [Public Health England \(2021\) Understanding and Addressing Inequalities in Physical Activity](#)
- [Scottish Government \(2021\) Outdoor Recreation: Understanding the Drivers of Participation](#)
- [Local Government Association \(2024\) Reaching the Less Active: A Guide for Public Sport and Leisure Services](#)
- [West Northants Public Health Joint Strategic Needs Assessments](#)
- [North Northants Public Health Joint Strategic Needs Assessments](#)

## Identifying the Problem

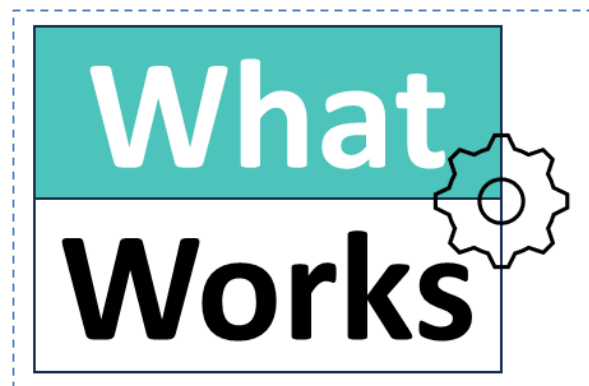


Questions you could consider. From your understanding...	Response	Supporting Evidence Sources
...what types of physical activity is this intervention relevant to? – why are these types of physical activity the focus?		
...who tends to be less involved in these types of physical activity? – how is this known?		
...why are these people less involved in these types of physical activity? - what personal factors, peer-group, societal factors contribute to this?		
...where do these people tend to live or work? - how does where they live or work potentially influence their ability to engage in these types of physical activity?		
What insight and data sharing has occurred between the partnership to help understand the problem?		
Any other information?		



## Design Solutions to Address the Problem



- The second step of the public health approach is to review the available evidence to identify what works as an intervention to address the risk and protective factors that you want to target. For this step, you would look for systematic reviews and evidence summaries to get a consensus of interventions that are most likely to work.
- However, the most critical step is to engage with the local communities and partners you intend to implement the intervention with. Engaging with the community and partners as early as possible will help ensure the intervention responds to local needs, culture, and values.



### Evidence sources you could use:

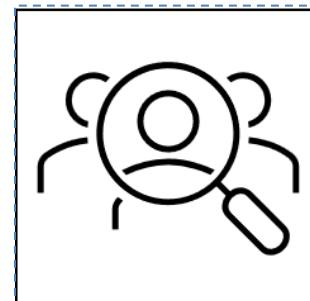
- [World Health Organization's Promoting Physical Activity Series](#)
- [World Health Organization's Interventions on Diet and Physical Activity: What Works](#)
- [GOV What Works in Schools and Colleges to Increase Physical Activity](#)
- [Public Health England Muscle and Bone Strengthening and Balance Activities for Adults and Older Adults](#)
- [Public Health England Identifying What Works for Local Physical Inactivity Interventions](#)
- [Sport England Report Library](#)
- [NIHR Moving Matters Interventions to Increase Physical Activity](#)

### Evidence of 'What Works'

 	Questions you could consider.	Response
	From your understanding, what intervention does the existing evidence suggest using? – What explanations are given?	
	What partners are involved in the development of the local intervention? – Why are these partners involved? - What insight have you used from partners to develop the local intervention?	
	Are the community involved in the intervention's development? – How? Who? How many? Why? When?	
	Any other information?	

## Who is the Target Audience for this Intervention?

- The diversity of the population means not everyone will respond the same to an intervention. Therefore, it is important to clearly document the demographics of the target population for your intervention.
- This will help evidence reviewers understand which communities the intervention is most likely to benefit. It will also help you plan your targeted engagements to promote the intervention to the correct people.



## Audience Demographics



### Sport England has found these groups experience inequalities in physical activity:

For adults these are:

- Disabled people and those with a long-term health condition
- Age 65 or over
- Lower socioeconomic groups (NSSEC 6-8)
- Asian people
- Pregnant women and parents of children under one year

For children and young people these are:

- Girls
- Other gender for those secondary-aged
- Low affluence
- Disabled people and those with a long-term health condition
- Asian people
- Black people

### What specific demographics does your intervention focus on?

Target Level	Demographics
Individual	
Inter-personal	
Community	
Societal	

**Individual level** – the intended target population for the intervention. **Inter-personal** – people in the individual's peer relationships. **Community** – social environments, such as neighbourhoods, schools. **Societal** – cultural norms, policies.

## How is the Intervention Supposed to Work? – Theory of Change

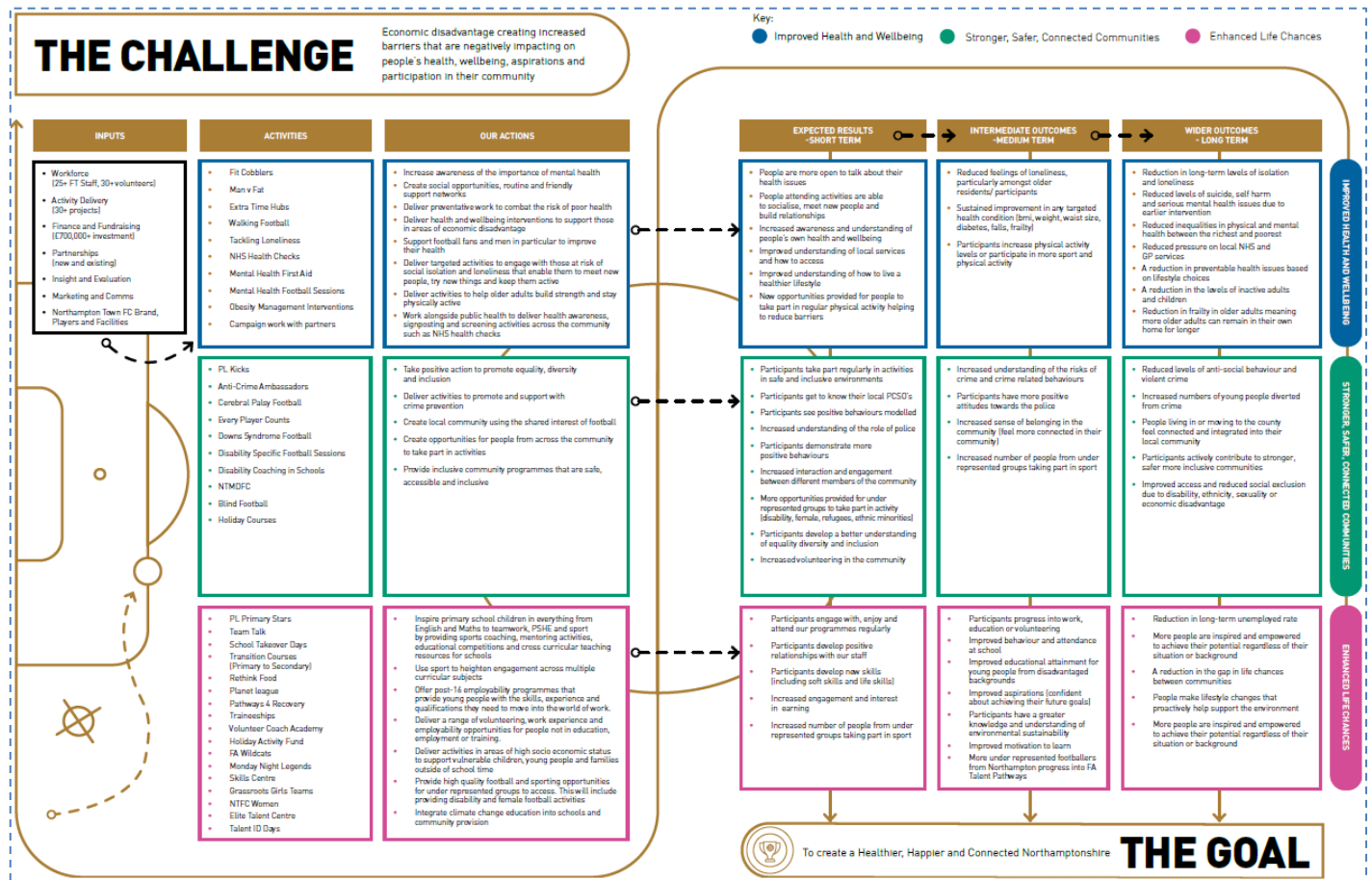







Figure 3. Example of a Theory of Change from Northampton Town FC Community Trust. URL: [NTFC CT Strategy — Northampton Town FC Community Trust](#)

- To help the evaluation and wider roll-out of interventions, it is important to document how the intervention is intended to work. This helps to understand what parts of the intervention are critical to its success. A Theory of Change is a mapping activity to help document the parts of the intervention and the anticipated effects that it will have on the target population. It should be informed by the evidence and insight that you have accumulated in the previous steps.
- The best way to develop the Theory of Change is through extensive collaboration with a wide range of partners, including designers, implementers, beneficiaries and/or interest groups to understand how the intervention is likely to work from a range of perspectives. When this is not possible, at the very minimum it should be stress-tested with key partners to test whether it reflects their view of how the intervention is likely to work. Crucially, the Theory of Change should continue to be developed over the lifetime of the evaluation as new evidence is developed. See the example from Northampton Town FC Community Trust in Figure 3.

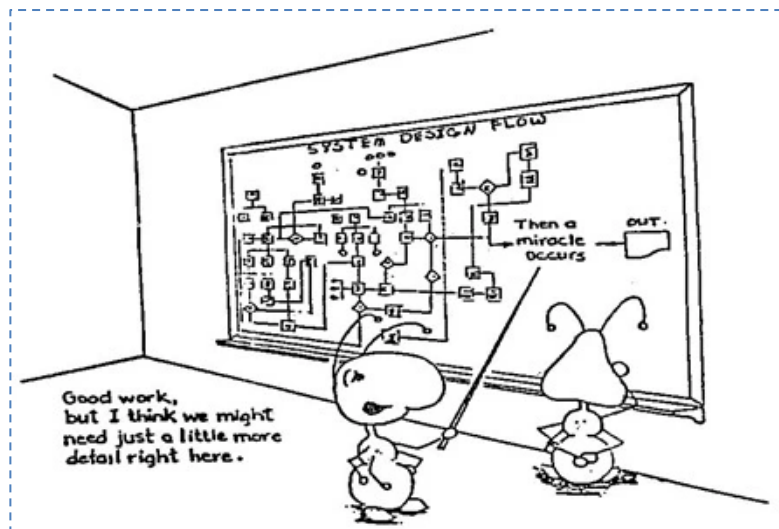
## Theory of Change Template

	 <b>Inputs</b> the resources used inc. staff	 <b>Activities</b> what is delivered	 <b>Outputs</b> what will the target audience do as a result of receiving the activities and what effect will it have on them	 <b>Expected Outcomes</b> Changes you want your target audience to achieve	 <b>Long-Term Impact</b> Aims from the Move Northamptonshire Enablers
Proposed pathway to cause change in the expected outcomes					
What unintended consequences could occur by delivering this intervention?					






## The Intervention's Planned Delivery

- Interventions often struggle to roll-out more widely because their components are not recorded in detail, which makes them difficult to replicate.
- Therefore, we ask you to document the details for each activity listed in your Theory of Change.
- The details of your intervention should be informed by the intended target audience, so you implement approaches to overcome barriers or leverage enablers that are present for your target audience.



## Intervention Delivery Model

 	What is the planned delivery model for the intervention?					
	Questions you could consider.	Advertising and Promoting	[insert activity from the Theory of Change]	[insert activity from the Theory of Change]	[insert activity from the Theory of Change]	[insert activity from the Theory of Change]
	How much of the activity?					
	Needed approaches to make the activity's delivery successful?					
	Where will the activity take place?					
	When will the activity take place?					
	Who will receive the activity?					
	Who will deliver the activity?					

 	Other important planning notes

**To add more columns:** Click the right-hand column, right-click the mouse, go to 'Insert', select 'Insert Columns to the Right.'

## Assessing your Intervention

### Ethics and Governance

- Now you have documented the plan and supporting evidence for your intervention, it is time to monitor and evaluate the impact of your intervention, during and after delivery. Monitoring and evaluation will require you to collect data. 'Data' can refer to attendance monitoring, survey responses, case studies, or any other form of information you have collated to inform your decisions. When collecting data, you should abide by the broad ethical principles:
  - Research should aim to maximise benefit for individuals and society and minimise risk and harm,
  - The rights and dignity of individuals and groups should be respected,
  - Wherever possible, participation should be voluntary and appropriately informed,
  - Research should be conducted with integrity and transparency,
  - Lines of responsibility and accountability should be clearly defined, and
  - Independence of research should be maintained and where conflicts of interest cannot be avoided, they should be made explicit.
- Any collected data should be anonymised, stored in a secure location, and destroyed when it is no longer needed. You should follow your organisation's data management and research governance, the funder's governance, or your professional body's governance. Further guidance about ethical research can be found here: <https://www.gov.uk/service-manual/user-research/managing-user-research-data-participant-privacy>

### RE-AIM

- RE-AIM<sup>1</sup> is an evaluation framework developed to improve the adoption and sustainable implementation of evidence-based interventions in a wide range of health, public health, educational, community, and other settings.
- The goal of RE-AIM is to encourage programme planners, evaluators, readers of journal articles, funders, and policymakers to pay more attention to essential programme elements, including external validity, that can improve the sustainable adoption and implementation of effective, generalisable, evidence-based interventions.

The five steps to translate research into action are:

- Reach** the target population.
- Effectiveness** or efficacy.
- Adoption** by target staff, settings, systems and communities.
- Implementation** consistency, costs and adaptations made during delivery.
- Maintenance/sustainment** of intervention effects in individuals and settings over time.

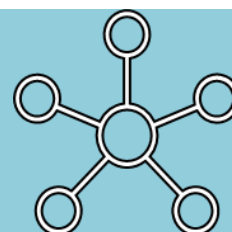
Further guidance about RE-AIM can be found at: <https://re-aim.org/learn/what-is-re-aim/>



<sup>1</sup> Glasgow RE, Vogt TM, Boles SM. Evaluating the public health impact of health promotion interventions: the RE-AIM framework. Am J Public Health. 1999 Sep;89(9):1322-7. DOI: [www.doi.org/10.2105/ajph.89.9.1322](https://doi.org/10.2105/ajph.89.9.1322)

## Reach

- Reach is an outcome that you likely measure already. Reach is the absolute number, proportion, and representativeness of individuals who are willing to participate in your intervention.



- It is important to document demographic characteristics about the people that your intervention engages to show who is represented. You can often obtain this information through a registration system or via a short questionnaire. The demographic data you ask for should be used to determine whether your intervention has reached your intended target audience. Therefore, you should only ask for relevant demographic data. Demographic questions are sensitive forms of data. Completion of any demographic questions should be voluntary, sensitively asked, anonymised, and explained why this type of data are requested.
- Guidance on asking sensitive demographic questions can be found here: <https://edisgroup.org/resources/practical-tools-and-guidance/diversity-and-inclusion-survey-daisy-question-guidance-v2/>
- Your organisation, funder, or professional body may already have established demographic questions that they ask as part of their monitoring and evaluation, which you could use to determine your reach.

## Who is Engaging?



Questions you could consider.	Response
How many intervention sessions were delivered and where?	
How many people attended each intervention session?	
What proportions of the target groups are participating in the intervention?	
What worked well and what were the challenges during participation recruitment?	
Which members of the target group are underrepresented? E.g., specific demographics groups	
Are any persons who are not members of the target groups participating in the intervention - How many?, What are the reasons?	
Do any participants suggest new groups that should be included?	
How much of the intervention are target participants receiving? - What are the patterns of people who don't complete the intervention? - What are the main causes?	
Any other information?	

- The impact of an intervention on important outcomes, including potential negative effects, quality of life, and economic outcomes.
- This often requires the involvement of evaluation expertise to ensure appropriate, valid, and reliable measures are used to assess the change in the outcomes.
- For Effectiveness, these tend to be quantitative measures but there is value in also collecting qualitative data, such as participant feedback. Delivery partners and intended target populations should be included in deciding what outcomes are measured, when, how, and why to ensure relevant outcomes are used for evaluation.



- The effectiveness section of RE-AIM should measure the Outputs, Outcomes, and Impacts. The progress of achieving outputs through to impacts takes time. Therefore, short-term interventions may not see any changes in their intended outcomes and impacts but could see changes in their outputs. Outputs are normally the first thing to change and monitoring these outputs can show you that your participants are on the right path towards attaining the outcomes and impacts of the intervention. Monitoring outputs is known as a Process Evaluation, while monitoring outcomes and impacts is known as an Outcome Evaluation.
- See the GOV website for further guidance: <https://www.gov.uk/government/collections/evaluation-in-health-and-wellbeing>
- For Outcome Evaluation, Sport England provide suggested indicators and questions for adults and children. A list of possible measures can be found in [Appendix 1](#). Which indicators to use is dependent on the aim and design of your intervention, Dr Declan Ryan from the University of Northampton can provide further advice (Declan.ryan@northampton.ac.uk).
- If Outcome Evaluation is *what* has changed, Process Evaluation is *how* are those changes happening. For Process Evaluation, you may need to develop your own data collection tools that asks questions about or observes what the participants' initial responses have been to engaging in the intervention. Example tools may include, interviews, focus groups, reflective workshops, or rich pictures with the participants. Process evaluation data is often qualitative and therefore, you need to consider the most appropriate tool to use with your participants (e.g. consider their age, and preferred method of communication). Sport England provide guidance about using these different data collection methods, which can be found in [Appendix 1](#).
- When reporting process and outcome evaluation summaries, it is important to state how many participants were involved in the data collection and their demographic representation. By reporting this information, you know whose views are and are not represented.

### What were the impacts of your intervention?

#### Present your findings here

You may want to present graphs, tables, case studies, and themes from qualitative interviews.  
[type here].



## Adoption

- The absolute number, proportion, and representativeness of settings and intervention agents (people who deliver the programme) who are willing to initiate a programme.



- An important determinant of the wider roll-out of interventions is the adoption of the programme by possible delivery partners. For example, Walk Leaders agreeing to accept social prescription referrals.
- Below are questions to help you reflect on your experiences of asking partners to adopt the intervention. You may want to speak with your partners too to document their experiences. Please do not name partners directly in your answers, instead use their type of organisation.

### Partner Involvement



Questions to consider.	Response
What expertise or experience did each partner offer to help deliver the intervention?	
What approaches worked well to deliver the intervention as a partnership?	
What challenges were there to delivering the intervention as a partnership?	
What will you continue doing to deliver interventions as a partnership in the future?	
What will you change to deliver interventions as a partnership in the future?	
Any other thoughts?	

## Implementation

- At the setting level, implementation refers to the intervention agents' fidelity to the various elements of an intervention's protocol, including consistency of delivery as intended and the time and cost of the intervention.
- At the individual level, implementation refers to clients' use of the intervention strategies.



- When designing an intervention, we try to make informed decisions about how it should work and be delivered in practice. However, changes are often made during the delivery, which can be intended (e.g. adapting to a change in venue) or unintended (e.g. unclear delivery instructions). Such changes may help explain the effectiveness of the intervention. Therefore, these changes are important to document, so it is clear what the intervention actually included. By documenting these changes, you are supporting the possible wider roll-out of the intervention.
- You may find it easier to complete this section during the delivery of the intervention as changes occur. You may want to meet with your delivery partners so you can include their views in your responses.

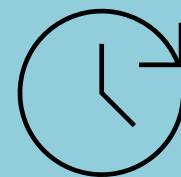
### Changes Made to the Intervention



Questions to consider.	Response
Were there any unexpected or unintended issues in the delivery of the intervention? – what were the consequences and how were they addressed?	
How has the external context influenced delivery and functioning of the intervention?	
How did external context influence the attitudes and behaviours of intended target groups?	
To what extent has the intervention reached all the people that it was intended to?	
How did the delivery of the intervention change from how it was originally planned? – how and why?	
What were the key elements of the intervention that needed to be delivered successfully to achieve the expected outcomes?	
Did you monitor the delivery of the intervention to ensure quality, consistency, fidelity against original plan? How, when, why?	
How did any of the changes to the intervention during implementation effect the achievement of the expected outcomes?	
What worked well, or less well, for whom and why?	
What could be improved?	
What can others learn from your experience of using the delivery methods?	
Were there enough resources to implement the intervention? E.g. costs, staff, equipment	
Could the intervention have been procured and delivered for less cost?	
Any other thoughts?	

## Maintenance

- The extent to which a programme or policy becomes institutionalised or part of the routine organisational practices and policies.
- Within the RE-AIM framework, maintenance also applies at the individual level. At the individual level, maintenance has been defined as the long-term effects of a programme on outcomes after 6 or more months after the most recent intervention contact.



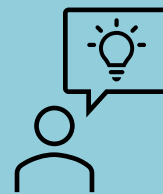
- Cliff-edge funding and short-term interventions are often a challenge for partners. Therefore, it is important to share best practice about sustaining interventions, so these services can continue when the initial funding has ended. Examples of maintenance strategies may include:
  - Having a clear exit strategy for participants by greenlighting them towards regular services,
  - Investing in staff and community training to increase their capability and capacity,
  - Pooling resources and match-funding from multiple partners, and
  - Conducting more rigorous evaluations to provide a stronger evidence-base for the continuation of funding.
- Below are some questions to discuss with your delivery partners before, during, and after delivery. Not all questions will be relevant, so only answer those that apply to your intervention.

### Maintenance Strategies



Questions to consider.	Response
What has the intervention offered to help the target groups continue towards the expected outcomes now the intervention has finished?	
Is there any long-term monitoring in place to assess the continued impacts of the intervention? – what, when, how, and why?	
What capability and capacity has been built at an individual, inter-personal, community, and societal level to help continue elements of the intervention?	
What processes have been implemented by the intervention into the community, so the target group remain engaged with support services and organisations? Who, what, when, why, and how?	
Have any new referral pathways been established by the intervention, which allows progress to continue towards the expected outcomes?	
Have any new data and insight sharing occurred and continue between partners as a result of the intervention? Who, what when, why, and how?	
Has any new funding or community assets occurred as a result of delivering the intervention?	
Have there been any unexpected impacts of the intervention?	
How have community assets been developed to enhance the sustainability of the intervention?	
What's next?	
Any other thoughts?	

## Make it Work in Practice



- The most important part of an evaluation is that someone uses the results.

- Take time to reflect on the overall delivery of the intervention. What did you learn from the experience that would be essential for partners to know to progress their work to prevent and reduce serious violence?

### Learning and Recommendations



Learning	Reflections
What did you learn about the needs of the local community?	Learning: Recommendation to others:
What worked well and what didn't work well to collaborative with partners and the local community?	Learning: Recommendation to others:
What practical considerations should other partners know so they can provide a similar intervention?	Learning: Recommendation to others:
What considerations are needed to improve the accessibility of the intervention for the target audience?	Learning: Recommendation to others:
How could this intervention be rolled-out across a wider geographic area or larger target audience?	Learning: Recommendation to others:
Any other thoughts?	Learning: Recommendation to others:






## Appendix 1

### Question Banks

Adult Question Bank		
Outcome	Questions	Response Options
<b>Physical wellbeing</b> (activity level): <b>1. Single item measure (SIM)</b>	In the past week, on how many days have you done a total of 30 mins or more of physical activity, which was enough to raise your breathing rate? This may include sport, exercise and brisk walking or cycling for recreation or to get to and from places, but should not include housework or physical activity that is part of your job.	0 days;1 day;2 days;3 days;4 days;5 days;6 days;7 days
<b>Physical wellbeing</b> (activity level): <b>2. IPAQ</b>	The 'International Physical Activity Questionnaire' (IPAQ) is a more detailed measure of an individual's physical activity over the last 7 days.	
<b>Mental wellbeing</b> (subjective wellbeing)	<p>On a scale of 0-10, where 0 is not at all satisfied and 10 is completely satisfied, overall, how satisfied are you with your life nowadays?</p> <p>On a scale of 0-10, where 0 is not at all happy and 10 is completely happy, overall, how happy did you feel yesterday?</p> <p>On a scale of 0-10, where 0 is not at all anxious and 10 is completely anxious, overall, how anxious did you feel yesterday?</p> <p>On a scale of 0-10, where 0 is not at all worthwhile and 10 is completely worthwhile, overall, to what extent do you feel the things you do in your life are worthwhile?</p>	<p>0 (not at all satisfied);1;2;3;4;5;6;7;8;9;10 (completely satisfied);Don't know; Prefer not to say</p> <p>0 (not at all happy);1;2;3;4;5;6;7;8;9;10 (completely happy);Don't know; Prefer not to say</p> <p>0 (not at all anxious);1;2;3;4;5;6;7;8;9;10 (completely anxious);Don't know; Prefer not to say</p> <p>0 (not at all worthwhile);1;2;3;4;5;6;7;8;9;10 (completely worthwhile);Don't know; Prefer not to say</p>
<b>Individual Development</b> (self-efficacy)	To what extent do you agree with the statement 'I can achieve most of the goals I set myself'?	Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Don't know; Prefer not to say
<b>Social &amp; Community Development</b> (social trust)	To what extent do you agree or disagree that most people in your local area can be trusted?	Strongly agree; Agree; Neither agree nor disagree; Disagree; Strongly disagree; Don't know; Prefer not to say
<b>Economic Development</b>	Data required to measure economic development cannot be obtained via individual self-report measures. The best way to measure this outcome would be to commission a specific study to calculate the contribution of a project or intervention to the economy.	

## Questions for children aged 5 to 7 – school years 1 and 2

Demographic	Questions	Response options
<b>Gender</b>	Are you a boy or a girl?	Boy; Girl
<b>Age</b>	How old are you?	5; 6; 7
Outcome	Question	Response options
<b>Physical wellbeing</b> (activity level)	Ask parents: Which activities she/he done in the last 7 days? – Tick box	Football, Netball, Hockey, Cricket, Rugby, Baseball, Softball, Rounders, Basketball, Dodgeball, Benchball, Running, jogging, cross-country, the Daily Mile, Track and Field athletics, Sports day events, Gymnastics, Trampolining (including in a garden, at a trampoline centre, or as part of a club), Cheerleading, Acrobatics including aerial, aerial hoop, Swimming (and diving), Table tennis or ping pong, Badminton, Tennis, Boxing, Judo, karate, taekwondo and other martial arts, Climbing (including indoors), Ice skating, Water sports (canoeing, kayaking, sailing, rowing, surfing), Horse riding, Snooker, pool, billiards, ten pin bowling, skittles, Kicking a ball about, Skateboarding, roller skating or blading, Frisbee, throwing and catching or skipping, Playing it, tag, chase, sardines or other running games, Climbing or swinging in the playground, garden or park, Walking to get to school or other places such as friends' houses or a park, Going on a walk (includes walking a dog), Dancing (include online or TV led e.g., TikTok dances), Cycling to get to school or other places such as friends' houses or the park, Cycling or riding a bike for fun or fitness, Riding a scooter for fun or to get to places like school, friends' houses or the park, Gym or fitness (fitness or online class e.g. yoga or Joe Wicks, or using exercise machines e.g. rowing machine, exercise bike, running machine), Walking to get to school or other places, Cycling to get to school or other places, Riding a scooter Riding a scooter
	On which days has she/he done each activity in the last 7 days in school?	
	On which days has she/he done each activity in the last 7 days out of school?	For each activity, multiply the time spent doing the activity by the number of days doing the activity.
	How long did she/he done the activity the last time they did the activity?	Less than 10 minutes Less than half an hour About half an hour About three-quarters of an hour One hour More than an hour Cannot give estimate
		Add up the amount of time and days doing activities and categorise into:

		<ul style="list-style-type: none"> <li>▪ Active (an average of 60 minutes or more a day)</li> <li>▪ Fairly active (an average of 30-59 minutes a day)</li> <li>▪ Less active (less than an average of 30 minutes a day)</li> </ul>
<b>Attitudes towards sport and exercise</b>	Do you like playing sport?	I love playing sport; I like playing sport; I don't like playing sport; I hate playing sport
	Do you find sport easy?	Yes; No; I don't know
	Do you like being active? This includes things like running games, riding a bike or scooter, walking, and dancing.	I love being active; I like being active; I don't like being active; I hate being active
<b>Mental wellbeing</b> (subjective wellbeing)	How do you feel today?	  

## Questions for children aged 8 to 16 – school years 3 to 11

Demographic	Questions	Response options
<b>Gender</b>	Are you a	Girl; Boy; Other; Prefer not to say
<b>Age</b>	How old are you?	<i>Entered by respondent</i>
<b>Ethnicity</b>	Which one of these best describes your background or race?	White (British or English); White (not British or English); Mixed Race; Asian or British Asian; Black or Black British; None of these
<b>Disability</b>	Do you need extra help with any of these things? <i>(Only ask children aged 8-11, school years 3 to 6)</i>	Moving around including walking and running; Using your hands for writing or to pick things up; Seeing and using your eyes; Hearing and using your ears; Speaking; Breathing; Reading or writing; Using numbers; How you feel; How you behave; I don't need extra help with any of these things
	Do you have a disability, or a special educational need (e.g. dyslexia), which means you need extra help to do things? <i>(only ask children aged 11-16, school years 7 to 11)</i>	Yes; No
	Does this disability, or special educational need affect you in any of the following areas? <i>(only ask for children aged 11-16, school years 7 to 11)</i>	Moving around including walking and running; Using your hands for writing or to pick things up; Seeing and using your eyes; Hearing and using your ears; Speaking and communicating; Breathing (e.g. asthma); Difficulty learning new things; Reading or writing (e.g. dyslexia); Using numbers (e.g. dyscalculia); Co-ordination (e.g. dyspraxia); Your mental health and how you feel; How you behave in a way which makes life difficult; Gives you pain; Affects your health for a long time; Affects you in another way; None of these
Outcome	Question	Response options
<b>Physical wellbeing</b> (activity level)	Which activities have you done in the last 7 days? – Tick box	Football, Netball, Hockey, Cricket, Rugby, Baseball, Softball, Rounders, Basketball, Dodgeball, Benchball, Running, jogging, cross-country, the Daily Mile, Track and Field athletics, Sports day events, Gymnastics, Trampolining (including in a garden, at a trampoline centre, or as part of a club), Cheerleading, Acrobatics including aerial, aerial hoop, Swimming (and diving), Table tennis or ping pong, Badminton, Tennis, Boxing, Judo, karate, taekwondo and other martial arts, Climbing (including indoors), Ice skating,

		<p>Water sports (canoeing, kayaking, sailing, rowing, surfing), Horse riding, Snooker, pool, billiards, ten pin bowling, skittles, Kicking a ball about, Skateboarding, roller skating or blading, Frisbee, throwing and catching or skipping, Playing it, tag, chase, sardines or other running games, Climbing or swinging in the playground, garden or park, Walking to get to school or other places such as friends' houses or a park, Going on a walk (includes walking a dog), Dancing (include online or TV led e.g., TikTok dances), Cycling to get to school or other places such as friends' houses or the park, Cycling or riding a bike for fun or fitness, Riding a scooter for fun or to get to places like school, friends' houses or the park, Gym or fitness (fitness or online class e.g. yoga or Joe Wicks, or using exercise machines e.g. rowing machine, exercise bike, running machine), Walking to get to school or other places, Cycling to get to school or other places, Riding a scooter Riding a scooter</p>
	<p>On which days have you done each activity in the last 7 days in school?</p> <p>On which days have you done each activity in the last 7 days out of school?</p> <p>How long did you spend doing the activity the last time you did it (outside school only)?</p> <p>Did it make you breathe faster or make you hot or tired?</p>	<p>For each activity, multiply the time spent doing the activity by the number of days doing the activity.</p> <p>Less than 10 minutes Less than half an hour About half an hour About three-quarters of an hour One hour More than an hour Cannot give estimate</p> <p>Breathe faster = moderate intensity, Hot and tired = Vigorous</p> <p>Add up the amount of time and days doing activities and categorise into:</p> <ul style="list-style-type: none"> <li>▪ Active (an average of 60 minutes or more a day)</li> <li>▪ Fairly active (an average of 30-59 minutes a day)</li> <li>▪ Less active (less than an average of 30 minutes a day)</li> </ul>
<p><b>Attitudes towards sport and exercise</b></p>	<p>I enjoy taking part in exercise and sports</p> <p>I feel confident when I exercise and play sports</p> <p>I find exercise and sports easy</p> <p>I understand why exercise and sports are good for me</p> <p>I know how to get involved and improve my skills in lots of different types of</p>	<p>Strongly Agree; Agree; Disagree; Strongly Disagree; Can't say</p>

	exercise and sports <i>(only ask for children aged 11-16, school years 7 to 11)</i>	
<b>Mental wellbeing</b> (subjective wellbeing)	<p>Overall, how happy did you feel yesterday?</p> <p>Is this how you usually feel? <i>(only ask children aged 8-11, school years 3 to 6)</i></p> <p>Overall, how satisfied are you with your life nowadays? <i>(only ask for children aged 11-16, school years 7 to 11)</i></p> <p>Overall, to what extent do you feel that the things you do in your life are worthwhile? <i>(only ask children aged 11-16, school years 7 to 11)</i></p>	<p>0 – Not at all happy; to 1; 2; 3; 4; 5; 6; 7; 8; 9; 10 – Completely happy</p> <p>Yes; No</p> <p>0 – Not at all satisfied; to 1; 2; 3; 4; 5; 6; 7; 8; 9; 10 – Completely satisfied</p> <p>0 – Not at all worthwhile; to 1; 2; 3; 4; 5; 6; 7; 8; 9; 10 – Completely worthwhile</p>
<b>Individual development</b> (self-efficacy)	<p>Thinking about all the things that you do at home and at school, how much do you agree or disagree with the following statement:</p> <p>If I find something difficult, I keep trying until I can do it</p>	Strongly Agree; Agree; Disagree; Strongly Disagree; Can't say
<b>Social and Community development</b> (social trust)	How much do you feel you can trust people who are a similar age to you?	I can trust them a lot; I can trust them a bit; I can't trust them very much; I can't trust them at all

## Data Collection Methods & Tools

Use the interactive toolbox below to help identify the most relevant data collection methods for your project or funding stream.

Click on a box to learn more about the data collection method.

<a href="#">Participation &amp; activity records</a>	<a href="#">Surveys and Questionnaires</a>	<a href="#">Interviews</a>
<a href="#">Meetings and Conversations</a>	<a href="#">Focus Groups</a>	<a href="#">Ethnography and Observation</a>
<a href="#">Diaries</a>	<a href="#">Official Data and Statistics</a>	<a href="#">Financial and Economic Analysis</a>



## Participation and Activity Records

<p><b>What is it?</b></p> <ul style="list-style-type: none"> <li>Records of participants, activities and throughput (total attendances), including the number and nature of activities and participant demographics (age, gender).</li> <li>Participation and activity records form the basis of the process evaluation helping to ensure a project is going to plan.</li> <li>The data collected enables any issues or problems to be identified, raised and addressed at an early stage.</li> </ul>	<p><b>When should it be used?</b></p> <ul style="list-style-type: none"> <li>Recording of activities and participants should take place throughout the implementation of a project or programme.</li> <li>Records should be kept for all types of activities (e.g. training, workshops) as well as sport / exercise sessions and events.</li> <li>The amount of data you collect will depend on the nature of the project – and what you want to learn from the project.</li> </ul>
<p><b>How to do it</b></p> <ul style="list-style-type: none"> <li>Create registration forms, session registers and any other tools you will need to keep records of activities and participants at the outset of the project.</li> <li>Collect as much information as is feasible, including: <ul style="list-style-type: none"> <li>Participant registration details</li> <li>Number of activities conducted &amp; hours of provision</li> <li>Participant attendance at each session ('throughput')</li> <li>Participant demographics</li> </ul> </li> </ul>	<p><b>Tips for getting the most out of it</b></p> <ul style="list-style-type: none"> <li>✓ Plan ahead! Create the templates &amp; registration forms you need at the outset of the project.</li> <li>✓ Use Sport England's 'Standard Measures Question Bank' for collecting demographic information.</li> <li>✓ If you are targeting a particular group – make sure your M&amp;E tools enable you to identify them!</li> </ul>

## Surveys and Questionnaires

<p><b>What is it?</b></p> <ul style="list-style-type: none"> <li>• Surveys enable data to be collected relatively quickly and easily by asking a series of questions to a group of people, such as project participants.</li> <li>• Surveys can be used to track behaviours, opinions and attitudes over time, or at different points in time – this can be really useful for evaluating the impact of a funding stream or project.</li> <li>• Surveys can be conducted online, by post, in person or by telephone.</li> </ul>	<p><b>When should it be used?</b></p> <ul style="list-style-type: none"> <li>• Surveys can be used to find out a range of information about a group of people, including attitudes, behaviours and opinions.</li> <li>• The data that surveys produce is good for identifying patterns or common themes and for analysing trends or changes.</li> <li>• Surveys are very flexible and can be used for process evaluation and for impact and outcome evaluation.</li> </ul>
<p><b>How to do it</b></p> <ul style="list-style-type: none"> <li>• Be clear about what you are trying to measure and the data you need to collect.</li> <li>• Develop a set of simple, concise, easy to understand questions that will provide you with the information you need.</li> <li>• If you are using surveys for impact evaluation, you may need to conduct the same survey at the start and again at the end of the project, so you can identify any changes that have occurred.</li> </ul>	<p><b>Tips for getting the most out of it</b></p> <ul style="list-style-type: none"> <li>✓ Be clear about what ‘population’ you want to find out about – this might be a demographic group (e.g. Men 65+) or just the participants of a specific activity.</li> <li>✓ Use Sport England’s ‘Standard Measures Question Bank’ if you are measuring any of the standardised physical activity outcomes.</li> <li>✓ There are free online survey tools available (e.g. Survey Monkey, Google Forms).</li> <li>✓ that can make designing surveys and collecting survey data quicker and easier.</li> </ul>

## Interviews

<p><b>What is it?</b></p> <ul style="list-style-type: none"> <li>• Interviews involve asking a series of questions to one person (or a small group) to gain in-depth information about a chosen topic.</li> <li>• Can be conducted in person, over the telephone or online.</li> <li>• Interviews allow respondents to explain and expand upon answers to questions, allowing richer data to be collected about individual's attitudes, behaviours and experiences.</li> </ul>	<p><b>When should it be used?</b></p> <ul style="list-style-type: none"> <li>• Interviews should be used when in-depth information about a group/audience is required to provide more detailed understanding than a basic survey can provide.</li> <li>• Interviews are often used to complement quantitative data collected through other methods (e.g. surveys).</li> <li>• Interviews can be used for process evaluation and outcome evaluation – to support both learning and measuring the impact of a project or programme.</li> </ul>
<p><b>How to do it</b></p> <ul style="list-style-type: none"> <li>• Develop a question guide so all interviewees are asked the same questions – but be flexible in the interview and allow the discussion to progress naturally.</li> <li>• Ask open questions that encourage respondents to discuss a topic in detail and explore their thoughts and feelings.</li> <li>• Create a comfortable environment for respondents so they are more willing to open up and be honest.</li> </ul>	<p><b>Tips for getting the most out of it</b></p> <ul style="list-style-type: none"> <li>✓ Be clear about what you want to learn from the interviews – and the style of questioning (open or closed questions) that will give you what you need.</li> <li>✓ Be aware of the limitations: findings from a few interviews may not be representative of everyone, but can uncover things that other methods will not.</li> </ul>

## Meetings and Conversations

<p><b>What is it?</b></p> <ul style="list-style-type: none"> <li>• An informal method of obtaining information about how a project is progressing.</li> <li>• It is often overlooked, but regular meetings and conversations with the delivery team and other stakeholders can raise issues, unexpected outcomes and learnings that can be logged and feed into the process evaluation.</li> <li>• Speaking to participants can also provide an insight into how project delivery could be improved.</li> </ul>	<p><b>When should it be used?</b></p> <ul style="list-style-type: none"> <li>• Collecting data via meetings and conversations is suitable for process evaluation on any project or programme.</li> <li>• It is best used in conjunction with quantitative methods, such as participant and activity records, to provide context and understanding to numeric data.</li> <li>• Not generally suitable for impact and outcome evaluation.</li> </ul>
<p><b>How to do it</b></p> <ul style="list-style-type: none"> <li>• Identify at the outset who are the most important people to talk to – schedule meetings or set time aside to speak to them.</li> <li>• Specify important topics and structure meetings or conversations around these discussion areas.</li> <li>• Take the time to document what is discussed so findings from meetings and conversations can feed into the process evaluation.</li> </ul>	<p><b>Tips for getting the most out of it</b></p> <ul style="list-style-type: none"> <li>✓ Identify the best people to speak to – those close to activities, such as participants and co-ordinators, can often provide particularly useful insight.</li> <li>✓ Try to speak to a range of people to develop a clear picture of how the delivery of the project is going.</li> </ul>

## Focus Groups

<p>What is it?</p> <ul style="list-style-type: none"> <li>• Group discussions involving 6 to 12 people who share similar attitudinal or behavioural characteristics.</li> <li>• Run by a facilitator, focus groups enable discussions to develop, with everyone encouraged to give their opinions.</li> <li>• Provide rich, qualitative data about a group of people's attitudes, behaviours and ideas about a particular topic.</li> </ul>	<p>When should it be used?</p> <ul style="list-style-type: none"> <li>• Focus groups are most suited to outcome evaluation.</li> <li>• Particularly appropriate where certain outcomes relate to participants attitudes, opinions or experiences.</li> <li>• This type of data collection produces in-depth, qualitative data – this is great for understanding an audience, but will not provide comparative, statistical data about a population.</li> </ul>
<p>How to do it</p> <ul style="list-style-type: none"> <li>• Identify a facilitator and develop a discussion guide to provide a structure.</li> <li>• Recruit participants and break them into groups of between 6 and 12 based on their attitudinal or behavioural characteristics.</li> <li>• Make the groups feel as comfortable and natural as possible.</li> <li>• Record the group's conversation or have someone taking notes (preferably not the facilitator) on the discussions taking place.</li> </ul>	<p>Tips for getting the most out of it</p> <ul style="list-style-type: none"> <li>✓ Cover the most important topics first and encourage everyone to get involved in the group discussions.</li> <li>✓ Be careful not to ask leading questions – ask open questions, then probe for further information.</li> <li>✓ As a facilitator, don't make assumptions about what participants mean – if it's unclear, ask for clarification.</li> </ul>

## Ethnography and Observation

<p><b>What is it?</b></p> <ul style="list-style-type: none"> <li>• A way of gathering data through the observation of people in a natural setting.</li> <li>• Ethnography can be purely observational or participatory (when a researcher participates with the people they are observing).</li> <li>• Ethnographic methods help to understand people's motivations, behaviours and experiences 'in context' – uncovering things that participants may not realize they do or be unwilling to talk about in interviews or focus groups.</li> </ul>	<p><b>When should it be used?</b></p> <ul style="list-style-type: none"> <li>• In M&amp;E, ethnography and observation is usually used for process evaluation.</li> <li>• It can be useful for refining project activities by identifying ways to better meet audience needs and can help establish what has gone well and what hasn't gone well with a project.</li> <li>• Ethnography is most effective with small groups, where participant experience is a key element of the project.</li> </ul>
<p><b>How to do it</b></p> <ul style="list-style-type: none"> <li>• You should inform the people you want to observe about what you are doing – there are ethical issues with conducting 'covert' observation of other people.</li> <li>• Get to know the people that you are studying – the more comfortable they are around you, the more natural they will be.</li> <li>• Develop pre-set questions to help focus your observations and field notes around the topics you are most interested in.</li> </ul>	<p><b>Tips for getting the most out of it</b></p> <ul style="list-style-type: none"> <li>✓ Think about what types of information you can collect – quotes, stories, photos and videos can help to bring findings to life.</li> <li>✓ Be aware of observer bias; our own values and beliefs influence the judgements we make about others.</li> </ul>



## Diaries

<p><b>What is it?</b></p> <ul style="list-style-type: none"> <li>• A way of collecting qualitative data by asking individuals to keep a record of their experiences and feelings over a period of time.</li> <li>• Participant diaries can be structured or unstructured depending on what type of data is required.</li> <li>• The key advantage of using diaries is that experiences are recorded as they happen, so there is less reliance on recall.</li> </ul>	<p><b>When should it be used?</b></p> <ul style="list-style-type: none"> <li>• Most appropriate for projects with a longitudinal element, where participant's experiences, opinions and feelings over time are an important source of understanding.</li> <li>• Data from diaries are useful to support either process or outcome evaluation, but are most effective used in conjunction with quantitative data collection methods.</li> </ul>
<p><b>How to do it</b></p> <ul style="list-style-type: none"> <li>• Find/recruit a selection of participants who are happy to keep a diary about the activities or events they are taking part in.</li> <li>• Develop a diary structure – this might be specific questions you want answering or a set of general guideline topics that you want participants to write about.</li> <li>• Put time aside for analysing the data – this can take a long time, especially if diary entries are unstructured.</li> </ul>	<p><b>Tips for getting the most out of it</b></p> <ul style="list-style-type: none"> <li>✓ Provide clear instructions to diary-keepers about what they should write about and when they should write their diary entries.</li> <li>✓ Try to ensure that participants keeping diaries are a good representation of the audience you are interested in, so you avoid focusing on one perspective.</li> </ul>

## Official Data and Statistics

<p><b>What is it?</b></p> <ul style="list-style-type: none"> <li>• A variety of organisations collect and publish data and statistics that can be utilised in measurement and evaluation.</li> <li>• Public organisations such as Sport England and Public Health England produce data on a range of topics including physical activity, health and wellbeing.</li> <li>• Many official statistics hold data at region or local authority level, so they provide information on local statistical trends.</li> </ul>	<p><b>When should it be used?</b></p> <ul style="list-style-type: none"> <li>• Using official statistics as an evaluation tool is only appropriate for large-scale, long-term programmes that have the potential to impact large populations – even then, statistics should be used with caution and knowledge of their limitations.</li> <li>• Official statistics should only make up one component of a programme’s outcome evaluation – results are only indicative of a programme’s impact and do not provide proof of causation.</li> </ul>
<p><b>How to do it</b></p> <ul style="list-style-type: none"> <li>• After identifying your project objectives, carry out some research to see if any official statistics can be used as relevant measures for the outcomes you are trying to achieve.</li> <li>• Use the most recent data release as a ‘baseline’ – future releases can then be monitored to view trends within the locality where the project is operating.</li> </ul>	<p><b>Tips for getting the most out of it</b></p> <ul style="list-style-type: none"> <li>✓ Using official statistics as an evaluation tool is only appropriate for large-scale, long-term programmes that have the potential to impact large populations – even then, statistics should be used with caution and knowledge of their limitations.</li> <li>✓ Official statistics should only make up one component of a programme’s outcome evaluation – results are only indicative of a programme’s impact and do not provide proof of causation.</li> </ul>

## Financial and Economic Analysis

<p><b>What is it?</b></p> <ul style="list-style-type: none"> <li>• A method of collecting financial data to measure and evaluate the success of financial or economic outcomes.</li> <li>• Provides the data that allows commonly used financial analyses to be conducted, such as a 'cost-benefit' analysis.</li> <li>• Often involves a variety of other data collection methods – surveys, focus groups etc. – to collect data that can be converted into, or expressed in, monetary terms.</li> </ul>	<p><b>When should it be used?</b></p> <ul style="list-style-type: none"> <li>• Financial or economic analyses are relevant to project's that aim to deliver one or more financial or economic outcomes.</li> <li>• It is only appropriate to conduct financial impact analysis when outcomes can be calculated in monetary terms.</li> <li>• Primarily used for impact and outcome evaluation, but the data collected may also support process evaluation.</li> </ul>
<p><b>How to do it</b></p> <ul style="list-style-type: none"> <li>• Define your intended financial outcomes at the outset of the project.</li> <li>• Be clear about how success will be measured and whether a financial model (e.g. cost-benefit analysis) will be used to do this - Sport England has developed its own '<a href="#">Local Economic Value of Sport Model</a>' which is a good place to start</li> <li>• Identify the data that is required to calculate the financial value of the project and develop the tools required to collect this data.</li> </ul>	<p><b>Tips for getting the most out of it</b></p> <ul style="list-style-type: none"> <li>✓ Be very clear at the start about what financial outcomes you want to deliver and what data will allow you to measure if these have been achieved.</li> <li>✓ Define rules and be consistent and transparent with how non-financial data (e.g. improved physical health) is converted into monetary value for analysis.</li> </ul>

## The continued role of PALS

Associate Professor Declan Ryan and James Mason from the Centre for Physical Activity and Life Sciences at the University of Northampton will be supporting the implementation of Move Northamptonshire throughout its lifecycle.

### Contact:

**Assoc. Prof Declan Ryan**

The University of Northampton,  
University Drive,  
Northampton, NN1 5PH

E: [Declan.ryan@northampton.ac.uk](mailto:Declan.ryan@northampton.ac.uk)

