## Welcome to the Healthwatch Theory of Change Template with Instructions

### Introduction

Your Theory of Change describes a sequence of events or outcomes that you expect to lead to your desired long-term outcomes. Producing a Theory of Change before starting a new piece of work can help you consider how likely you are to achieve positive changes. It can help you identify anything you might do differently to maximise the likelihood of success and make best use of your resources.

At the heart of the Theory of Change is your series of outcomes: short-term, medium-term and long-term. You are aiming to write up the series of outcomes / changes / things that will be different, so you have a credible story of what you anticipate will happen. Additionally, the process involves thinking about assumptions you might be making, which, if they turn out to be wrong, will reduce the chances of you being successful.

This document summarises the stages your team should go through to produce a Theory of Change for any piece of work. Examples from Theory of Change produced by Healthwatch are included at key stages.

After reading this Overall Summary sheet, you could look briefly at the blank 'Theory of Change Sheet' and the 'Assumptions and Indicator Sheet' that you can find after the six instructions sheets. This will help you to get an idea of what the main sheets you will be using look like. Then, starting with the sheet called 'Stage 1 - Instructions', read each instruction sheet, in turn, to find out about each stage of the Theory of Change process and which part of the template sheet you complete at each stage.

Producing a Theory of Change is one of the key steps in the Healthwatch England guidance on project planning that you can view by

## How to approach producing your Theory of Change

One person can produce a Theory of Change, but it works well to complete the task in a small team to gain a range of perspectives. Including service users and your volunteers in the group can also bring very valuable perspectives.

Instead of typing directly into this template, you could first write your outcomes on post-it notes and stick them on the wall, moving them around and changing their order until you feel they make the most sense.

A draft Theory of Change for a typical Healthwatch project will likely take around an hour to produce. Remember that the main value comes from the thinking that the exercise makes you do. So don't dash to finish something that looks impressive for the sake of it if, in reality, the series of outcomes described is questionable.

## Practical tips on using the Theory of Change sheet

Click into a coloured box to enter text.

### Moving and resizing boxes

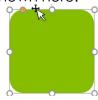
You'll find you want to move boxes around the diagram as you work, spread them out a bit more, change the order they come in and generally rearrange the layout, so it's easier to follow.

To move a box: select it and move the cursor to the edge until a 4-way arrow shows. You can then hold down the mouse button and move it.

To change the size of a box: select it, move the cursor to one of the circles around the edge, hold down the mouse button and move the mouse outwards.

## Cutting or copying text from one box to another

If you select text in a box to cut or copy, then it's simplest to right-click on the mouse and use the menu options that come up there. To paste the text into another box, right-click in that box and select the Paste option that says 'Keep Source Formatting. It has the icon shown here.





## Some examples of full Theory of Change diagrams for Healthwatch projects

These examples should particularly help you understand what the series of outcomes that is described in Stages 3 and 4 of these

Healthwatch Rotherham - Engaging with refugees and asylum seekers

<u>Healthwatch Darlington - Running engagement events using Facebook Live</u>

Healthwatch Camden - Partnering with GP surgeries to use text message outreach

### Start with these sections here

The wider issues faced

The issues we will focus on

Work areas

3rd or

### 1st

Describe in a few sentences the main background issues that are faced by service users, the community, and/or health and care services, that have led you to do some work on this subject.

2nd

**Following** on from those wider issues, narrow down what it is that your work is now going to focus on.

come back to this section later when you've complete

d more of

your

Use this section if it's useful to record 2 or 3 overall headings

to

describe

the areas

of work

With the

## **Examples**

## Healthwatch Liverpool

Ensuring long COVID services are effective

We know lots of people are affected by long COVID

A clinic was set up, but with little consultation

Access to the existing service hasn't been equitable

model being redeveloped locally it is an appropriate time to learn from both what went well and what can be improved on the initial model.

essons from

people's

experiences

of the

service

service

being used to design the new Ensurina the new long COVID

clinic is as

effective as

possible

Needs of people who didn't get to use the existing service being taken into account for design of the new service

Healthwatch Bolton

Improving access to and experience of primary care

options than

GPs and

effectiveness

of online

portals as a

means of GP

access.

Patients tell us they have difficulties trying to access health care from their GP practice. In particular. patients who either do not have access to the internet, don't own a smartphone, or are less technically able.

Health conditions worsen as people can't obtain primary care.

There is more pressure on A&E services as patients present there instead of at a GP.

GP and Practice Staff GP patients' perspective knowledge and abilities in using other healthcare

> Patient perspective

### Next, complete this section

Long-term outcomes

What changes, improvements or differences are you aiming to ultimately achieve with this work?

Looking at what you wrote at the previous stage, what changes are you hoping to see with the issues you are going to focus on? They should be things that will contribute to improving the wider issues you wrote about

you're describing
a 'long-term'
outcome, ask
yourself 'So what?
Why would that be
good?' The answer
to that question
might describe the
outcome better.

Usually you will have between 1 and 3 outcomes to list in this section.

## **Examples**

## Healthwatch Liverpool

People recieved the treament they need for long COVID and get well

Increased equity across demographics of those accessing this service

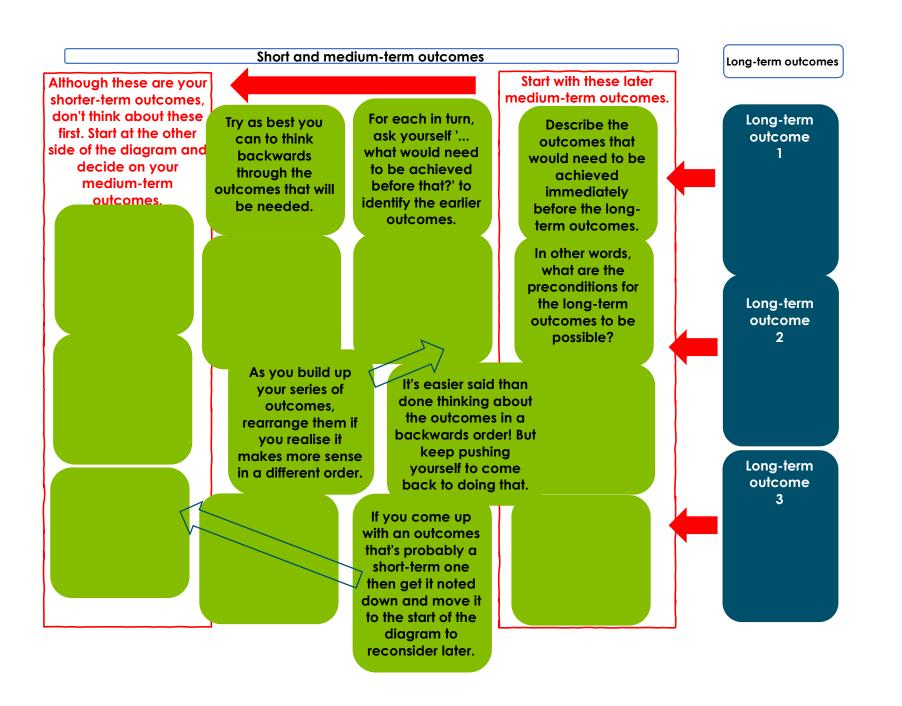
Services better understand the value of involving people at the planning stage

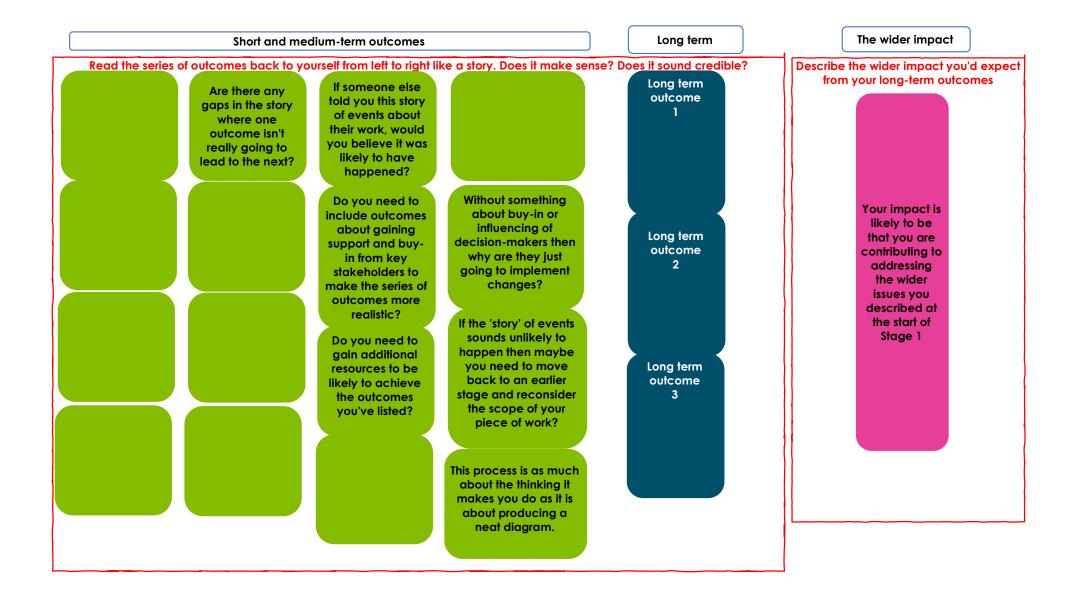
### Healthwatch Bolton

Patients receive the medical support they need more quickly

Less negative views from the public about local GP services

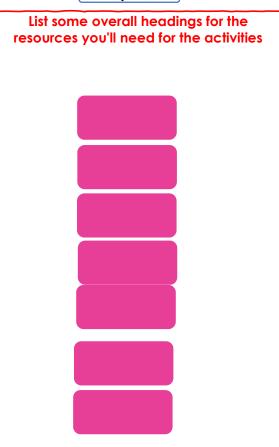
To see more examples of the types of outcomes that can be achieved by Healthwatch you can look at pages 24-26 of the Making a Difference Toolkit. Click here to see the Toolkit on the Healthwatch Network site.





**Activities** Inputs

List some overall headings for the areas of activity you'll need to undertake



# **Example**

## Healthwatch Bolton

Liaison with CCG

Survey to identify experience and opinions of the public

Practice staff insight

Website review

Production of report

Production of resource

Communications with as wide a reach as possible Staff hours to develop and maintain relationships

Staff hours to undertake engagement, research and write-up

Communications staff time

Online platforms

Printing costs (tbc)

Assumption [We are assuming that this exists or will happen]	% certainty that our assumtion is correct	Intervention needed? [Should we do something to reduce the chances of our work being unsuccessful if this assumption is not correct?]
As you're coming up with your outcomes and talking through the piece of work, note down here anything you're assuming, which if it turns out to be wrong will derail your work.	Estimate how confident you are that the assumption you've included is okay to make and won't be a problem.	If your percentage confidence about this assumption is low, then what are you going to do about it?
		Maybe you need to include a new outcome in your Theory of Change to confirm the assumption early on?
		Or maybe you need to do some more preparation work before you definitely put more resources into this project?
		Do you need to add some other area of activity and/or other resources to your list?
Example 1: People will feel comfortable speaking to us about this very personal issue.	60%	We know we can start to engage with people on this through our partnership with the charity that supports them. But we will add an outcome about developing trust with their service users into our Theory of Change.
Example 2:  We'll be able to find people to speak to who were not able to access the service we're interested in.	25%	We realise that finding people who couldn't use a service is harder than finding people who have used it. We will add an outcome about identifying the right communications messages and channels into our Theory of Change.
Example 3:  We'll be able to talk to the right people about our findings.	90%	We have already talked with senior decision makers in the Trust about this piece of work and they have confirmed their interest.
Outcome	Indicator [What evidence we will look for to show the outcome has been achieved]	Preparing our Indicator [Is there something we can do at an early stage to make it easier to evidence the outcome at a later point?]
List each of your main outcomes in this column. This is most important for your long-term outcomes.	Try to identify something that will be available, or you can put in place, that will help indicate to you that the change you were seeking has occurred.	Can you put something in place now, check what data someone else collects, or ask someone to record something?
	There are examples of things you could do to help measure outcomes on page 29 of the Making a Difference Toolkit. You can view this by clicking here.	
Example 1:  More people will receive treatment for this health condition.	Number of people accessing the service from it's relaunch compared to the year before.	We'll ask the service if they can share monthly appointment figures with us and talk to them about how they define and code outcomes of treatment.
Example 2: The public will have a better understanding of how to access the service.	Sampling exercise to identify level of understanding.	We will put a time-limited sampling exercise in place to go back and ask people who have requested this information and find out how clear they found it and if they successfully used it.
Example 3:  People will have more money available for daily living costs because they have to spend less on travel to appointments.	Financial impact of changes as reported by service users.	Six months after the project we will hold a closing focus group with users of the day centre to ask about the difference changes have made to them.