

**HOW DO EDUCATIONAL PSYCHOLOGY
SERVICES CURRENTLY EVALUATE
THEMSELVES?**

NAPEP SURVEY

Research & Evaluation Unit
Hampshire Educational Psychology Service
2010

The Research & Evaluation Unit conducted this evaluation on behalf of the National Association of Principal Educational Psychologists (NAPEP). The original data are available should anyone wish to check, question or challenge the information reported. Any opinions expressed in this report are those of the author and do not necessarily reflect the views of either Hampshire's Educational Psychology Service or NAPEP

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INTRODUCTION

As a follow-up to the outcomes day organised by Hampshire Educational Psychology Services (EPS) in November 2009, the National Association of Principal Educational Psychologist (NAPEP) agreed to circulate a survey relating to the evaluation activity EPSs are currently undertaking.

We received 24 responses. However, the response from one service could not be opened because of software difficulties. This response rate is poor and the report can only claim to provide a vague notion of what is happening rather than a comprehensive overview. However, the comments were generally supportive of the effort being made to assist evaluation and the comments indicated a willingness to work further together.

Not everyone completed the survey sheet. Responses ranged from one side of A4 to reports, for a LA audience, exceeding 50 sides, in which the information was embedded. This added to the difficulty of both asking how the approach was conducted and extracting the information required.

The quantitative data also needs to be treated with caution. Whilst a service may appear not to be addressing an area of activity, this may have been an omission rather than a reflection of reality. Similarly, many of the qualitative comments can only be understood in relation to the context and service delivery approach being adopted and this has not always been made explicit.

The survey was based on a series of questions, and responses have been grouped in this way. However, some evaluation approaches were spread across several questions and this format represents an artificial division. All comments in italics represent direct quotes or slightly abbreviated versions of these.

HOW DO YOU DETERMINE WHAT LEVEL OF SERVICE THE EPS DELIVERS TO WHOM?

The responses suggested that 17 of the 23 services (approx. 74%) maintained an activity recording system of some sort. One service based the estimate of service activity on the Service Level Agreement (SLA) with schools and other institutions, rather than actual delivery. This seemed to be based on the assumption that time was delivered as planned and presumably was tested in supervision session. Two other services scrutinized the data in order to look for discrepancies between the declared SLA and the actual service delivered. Three services also indicated that in addition to the activity recording system they often drew upon the notes of visits (or similar) when reporting service activity, in order to provide a richer picture of activity.

Typically, activity was recorded retrospectively at the end of the week (occasionally daily, monthly or even quarterly) either directly on to a database or manually with the view that administrative staff would load the data¹. The

¹As one service commented - although it is optimistically called the 'Data base' form, in fact we do not have a database which we can use to analyse the data. I would be very interested to know the electronic systems that other services use

data tended to be coded so that a detailed breakdown of what time was spent where and with what types of need, could be identified.

- *A time recording system that details the school-based work, project work, additional responsibilities, early years work of all EPs. We also record all our daily work on a database that can generate reports on time spent on specific aspects of our work (e.g. time spent with different ethnic groups, children at different COP stages etc)*
- *Inputs (i.e. activity) are recorded on to the Impulse database. This is a record detailing EP involvement. EP activity is recorded on to a tick sheet (for ease of use) using codes and is entered onto the system by a support officer. This allows reports to be run in a number of different ways according to need type, training delivered, locality, EP etc.*
- *[Name of LA] Schools and Community Psychology Service (SCPS) collates data on a quarterly basis using a self report activity data sheet which, by and large, quantifies various activities and 'outputs' completed in each time period such as consultations, statutory work, PEPs and PSPs attended, multi agency (e.g. TaC) meetings attended, numbers of schools visits by phase etc. This feeds into a corporate data sheet that is similar in format across all council services.*
- *We introduced an activity recording system using a rudimentary spreadsheet. This has drop down cells that enable recording by activity, school, cluster (district)... It has taken a while to 'tweak' the system to ensure consistent recording by all EPs. This system is currently being further developed as an 'Access' database - this will have another category of 'commissioner' enabling further differentiation in the data collected.*

In some cases the Local Authority (LA) had imposed a recording system which was common for a range of services (e.g. EPs, BEST and advisory teachers). In one service EPs also had direct access to this data and were able to run reports.

- *Team members enter their own data and have full access to the system to run queries and reports.*

Perennial problems with activity recording systems include ensuring the consistency of what is recorded and the relevance of the data. To support consistency, the systems often involve elaborate descriptions of the coding system descriptors. To address relevance, systems seem to be in a constant state of evolution as managers ask for additional information or services need to respond to changes in local authority priorities.

- *A session is defined as - a period of 2 ½ -3 hours on school based work. This can mean (One 3 hour visit at one school = 1 session / One 2 ½ hour visit at one school = 1 session / Three 1 hour visits at 3 different schools = 1 session)*
- *A multi-agency meeting (e.g. a CAF or a ChiN meeting) held off the school site about a pupil at one of your schools is included in the definition of 'school based work'.*

- *An audit found that the original systems were no longer providing the required information and there was a lack of consistency. The service has devoted time to identifying new measures of activity undertaken in schools and a means of recording these. Capita has been commissioned to provide a new database in order to facilitate analysis of these results.*
- *We have adapted the data we collect on a year on year basis in response to requests and queries that are occasionally made of the Service. For example, questions about levels of work done with different PLASC groups will be incorporated next year. We now record all work for Children in Care separately as this has been a Local Authority priority.*

WHAT DO YOU DO WITH YOUR DATA?

A sub-question in the survey asked what services did with the information arising from such evaluations. As might be anticipated the response was mixed and there were significant discrepancies, however, the most common response was that until recently there had not been much appetite for such information by senior managers within Children's Services. The drive seems to have come primarily from services feeling that such reporting constitutes good practice, although recent *challenge meetings* have tended to reinforce the need to persist with this. The quotes below typify many of the comments made.

- *Currently we do not formally have to report on activity data.*
- *We have not been strong on systematically reporting on data in a formal way, however, we are working on an annual service report, which includes all the data.*
- *Not formally reported, but moving towards doing so – probably different levels of information for different audiences (senior managers, EPs themselves, schools, other key 'stakeholders' etc).*
- *I haven't as yet but would like to produce an 'annual report' to give to all partners*
- *This data was reported to directors in the form of a report on one occasion.*
- *Reports are placed on the Intranet site for the CPS. No one formally requests them but periodically we are asked to update the site.*
- *Our only regular formal reporting relates to Psychological Advices completed on time.*

At the other end of the continuum some services have increasingly been held to account and reports are submitted to managers on a regular basis. In some cases this information also filters in to challenge, oversight or scrutiny groups.

- *Individual EPs complete monthly monitoring reports. This information, along with the number of Statutory Assessments completed, the number completed within timescale, and the number being worked on is collated into quarterly reports for the Assistant Director*
- *The data are attached to our Annual Quality and Performance Review (AQPR). This is presented as a committee paper to the Children's Services Oversight and Scrutiny Committee and is a comprehensive service review – the biggest single thing we do to summarise the work of*

the service and to account for how we have delivered on our Service Improvement Plan. However, in my view the AQPR as a whole still focuses primarily on measurable outputs and qualitative perceptions of outcomes, but less on measures of impact.

Some of the comments indicated the desirability of having some data sets common across services so that comparisons could be drawn.

- *As part of a challenge process last year, I provided an analysis of time spent on the various activities and a casework audit, bench marked against the national and NE local authorities tabled figures for average cost per pupil of Psychological Services. However, it was not clear from this table whether we were comparing like with like: a refinement of this would therefore be useful for clarification.*
- *Having benchmarking data both intra and inter service is helpful. The benchmarking exercise carried out by the shire counties group and the process of doing this can be very helpful. This process has become more difficult in recent years due to the differences in how service delivery has become configured. However, knowledge about this is in itself useful information.*

Comment 1

Services are always likely to want to track data that is unique to them, possibly reflecting LA or service priorities. However, it might be useful to consider if there is a core of common data that could be clarified and shared between services. The task of identifying the commonality might support services just embarking on the task. Some services are also well enough along in this exercise to have identified what descriptors have needed to be modified in order to reduce inconsistency. There might be some attraction in services collecting some common data, using the same codings and descriptors.

HOW DO YOU ASCERTAIN WHAT STAKEHOLDERS THINK ABOUT THE SERVICE OFFERED?

Most of the services responding undertook stakeholder surveys of some sort. Nineteen of the 23 (approx. 83%) had sought feedback from schools about the quality of the service that had been delivered. Similarly 12 (approx. 52%) had surveyed the views of parents or guardians and six (approx. 26%) had surveyed the views of pupils. Comments suggested various permutations of such surveys, but five services had undertaken all three.

The second most common approach was to gauge the views of schools as part of an annual planning and review process. This was mentioned by six (approx. 26%) services; often covering the same issues as a postal survey (but have not been included in the figures above) and is elaborated upon below. Two services had undertaken parental interviews, two had interviewed children and young people and one had undertaken a focus group exercise with children and young people.

To elaborate on the data above, some services reported not seeking stakeholder views on a routine basis although they had done so occasionally.

- *We do not currently routinely seek stakeholder's views on our overall service delivery. Three to four years ago we sampled views through postal questionnaire surveys of parents and structured interviews with school representatives (Head Teachers (HT) or Special Educational Needs Coordinators (SENCo)) and with pupils who had experienced recent assessment or intervention.*

- **Schools**

However, most services sent a postal survey (and/or on-line form) to schools and other providers on an annual basis (although some described longer cycles, of up to four years). A nil response to the survey might also prompt EP contact to encourage schools to make a return.

- *We send out an annual survey to schools / early years providers. There are a wide range of fields covered, but outcomes are usually in terms of perceptions of value / usefulness rather than more quantifiable change measures.*
- *We have conducted biennial school surveys and parent surveys.*
- *We have operated on a 4 year cycle of collecting views i.e. each year focussing on a different group – children; parents and carers; schools and other services. This year onwards we are changing to an ongoing system for collecting opinions and feedback.*
- *Each year (normally in the summer) a partnership audit will be carried out. This is a questionnaire sent to schools directly and electronically. If no response is made an EP will follow up, either in person or by a telephone.*

Questions tend to gauge their perception of the service and whether promised service standards had been met. However, at the other extreme one service described a postcard system, which merely indicated that feedback was welcomed and it was left open-ended as to what issues people raised (positive or negative)

- *We collect data on whether service standards are met in relation to responding to referrals within 10 days, completing Advice on time, sending out reports within one calendar month of last contact with child, completing a termly planning meeting with each school.*
- *We are working on stakeholder feedback postcards which are sent out following completion of Statutory Advices and when Consultation cases are made Inactive.*

Reflecting concerns about the amount of paperwork schools receive, some services had been prevented by their LA from sending surveys out. However, a common response has been to build this exercise into the planning and review cycle, where such systems operate. By way of elaboration - *EPs meet with the schools in their patch in the autumn term each year to evaluate the previous year's work and agree priorities and actions for the coming year.*

During these review meetings the HT or SENCo is asked to complete the feedback sheet.

- *Wanted to do an annual survey of HTs but there is an embargo due to HTs being overwhelmed by surveys. Integrated into planning and/or review system.*
- *Priority tasks in schools are agreed with HTs / SENCos early in the Autumn Term and often informally reviewed / evaluated with them as the first step in planning the next round of work.*

More informal feedback about the performance of the service is also provided through regular consultative meetings with schools (typically via the PEP).

- *Also during termly inclusion planning meetings with school we have a joint discussion on the success or otherwise of our partnership work with the school and look at ways of improving etc.*
- *Views gauged informally through Principal's attendance at other service meetings e.g. Inclusion and Access Strategy, Parenting Strategy, etc.*

- **Parents, children and young people**

Reflecting the difference in the numbers reported above, many services were conscious of the need to consult with parents but were still struggling with the logistics about how best to do this.

- *We do not have a mechanism for collecting the views of parents and children but maybe we should have something. What concerns me is that it is very hard to find one that is not time-consuming but yields valid data*
- *We want to collect views of parent/carer and CYP from 1:1 interviews, focus groups and questionnaires.*

Practice was emerging and there were recent attempts to secure feedback from parents, children and young people. Where a survey was used the form was discussed with the parent and completed on the spot; left with them or sent out following completion of a substantial piece of work.

- *Parents and children have not previously been sought, but this year we have developed interactive means of surveying children based on questionnaires, developed in IT medium*
- *This year we have started to collect information more formally from parents / carers / children and young people regarding their perceptions of the consultation / assessment etc that they had previously undergone. We invite participants to complete these on the spot, or give them a business reply envelope so that they can respond in their own time.*
- *Parental questionnaires are sent out each year asking basic questions about their experience of the service.*
- *Parents and carers – questionnaire sent following completion of EP work.*
- *We send all parents a copy of the questionnaire (attached) at the end of a School Action Plus intervention – it accompanies the written record/report.*
- *We send out questionnaires to the parents of children for whom we have produced statutory advice, this focuses on whether the parents believe the*

report describes the child accurately and whether they understand the recommendations.

There were some concerns that the response of parents might be determined more by the outcome rather than the quality of the service they received.

- *Parents' views, understandably, were sometimes coloured by whether they had obtained what they hoped for from the statutory assessment process.*

Attempts by some services to gain parental feedback through focus groups had proved difficult. One of the difficulties was ensuring a representative sample. Those opting to attend tended to have a "*particular axe to grind*" either in support or criticism of the service. For larger LAs the geographical distribution also added to the difficulty of forming a representative group.

- *When we had a parents' focus group, it was very hard to make it representative. There were one or two keen attendees, but these were people who had had specific experiences of us through SEN work, and they were hardly representative.*
- We have tried to obtain more qualitative information via a focus group but so far have been unsuccessful. The numbers of parents who offer to help in this way are few; then the geographical spread of parents is such we can't make a viable group without asking participants to travel great distances.

Comment 2

As in other aspects of education, services appear to be "*re-inventing the wheel*". There might be merit in collating the content of school and parent feedback sheets, which services could then use as a core. This would help ensure that services are not biasing outcomes through the way questions are worded (i.e. a common format). It might also enable some inter-service comparison of these data (e.g. do schools or parents rate services in a similar way irrespective of local models of delivery). Services are likely to want to have some content unique to their context but other aspects could be common. Services might also find it useful to see how other services have set about this task (e.g. interesting variations on rating scales) by circulating examples of current practice.

The views of children and young people are even more poorly represented in the information provided. Whilst it is easy to advocate the importance of the voice of the child it is difficult to achieve in any meaningful way. The process can be tokenistic and many services were still exploring how this might best be achieved.

- *We have made efforts previously to collect the views of children about the service. However, for a variety of reasons this has not been very successful.*
- *We carried out small-scale focus groups with children, to begin exploring how we might gather children and young people's views*

- *We wished to know something of children and young people's views. However, we did not wish to intrude on children's lives through adding some form of 'evaluation extra' to our consultations and felt it unlikely that a child or young person who had met an EP some time ago would have any real recall as to what it had all been about... Consequently, we decided to take a more indirect route, by asking children (in a group) a number of wider questions about their views on school, assuming that we could use these developmentally.*

Some services have, however, developed evaluation or review forms which are completed at the end of a piece of work. These were often completed in discussion with the child.

- *Pupil review form completed in discussion with the Pupil.*
- *We have a pupil-friendly evaluation form which is completed at the end of an intervention*
- *Exit interviews with young people following involvement with an EP, which can be done online, or as hard copy.*

Two services had interviewed children and young people, although this had been dependent on time being provided by assistant EPs or EPs in training.

- *Children and young people – structured interviews completed by assistant EPs.*

Highlighting the difficulty raised earlier, where such exercises had been undertaken with children and young people, the results were not always as constructive. Reflecting findings in the literature, a common outcome was that they often had difficulty in even recalling contact with the EP.

- *In a severe blow to our egos, we found young children often could not remember who the EP was, particularly if they had also been involved with other support services! Much effort was expended on this exercise but results did not yield clear pointers towards practicable improvements.*
- *Some pupils were able to convey a good understanding of the reason for the recent contact (this tended to be older pupils); others were either non-committal or were unsure. It needs to be acknowledged, however, that some pupils merely do not like discussing their difficulties in front of strangers who do not have an obvious "need to know".*

Comment 3

Dorrian et al. (2000)² argue that children are the ultimate consumers of educational psychologist services and as such should have a legitimate role in influencing service developments. Legislation has also emphasised the importance of the voice of the children in evaluation of Children's Services. The United Nations Convention on the Rights of the Child (UNICEF, 1989), together with UK legislation (such as the Children Act, 1989), highlight the

² DORRIAN, A., TISDALL, K., & HAMILTON, D. (2000). Taking the initiative: Promoting young people's participation in public decision making in Scotland. London: Carnegie YP Initiative.

need to consult with children and young people on plans relating to their care. Yet, as highlighted here, there are real practical difficulties in gaining a child's perspective on the service they receive. It would be useful to explore in more depth how this could meaningfully be done. Responses did not suggest anyone has *the answer* but there is interest in exploring how this might best be achieved. Might there be scope in some services working together to better meet these ends, possibly working in collaboration with a training course?

HOW DO YOU EVALUATE THE IMPACT OF THE SERVICE?

Gray (2001)³, in research commissioned by the DfES, found that most SEN services in the United Kingdom were poorly evaluated. Moreover, where evaluation had been undertaken, the methods used primarily related to activity monitoring (97%) and consumer surveys (81%). It was significant that the least commonly used approach, pupil outcomes (65%), was deemed the most important by Ofsted. A similar weakness was evident in this feedback. Only 10 services (approx. 44%) either reported monitoring outcomes or had piloted attempts to do so. Some services had multiple methods, hence the total of figures quoted exceed 10.

Nine services (approx. 39%) reported using a scaling system of some sort, on a sampled basis, and this constituted the most common way of addressing the issue of impact. Three were recognizable as Target Monitoring & Evaluation (TME – UCL - Dunsmuir, Brown, Iyadurai & Monsen, 2009) and one had piloted the use of Goal Attainment Scaling (GAS – Kiersuk & Sherman, 1968). Three were using a three or five-point scale to evaluate whether any improvement had occurred. Whilst there were similarities, it was unclear if this process strictly adhered to Hackney's model of TME, as it appeared to be based more on a subjective judgment rather than being made against defined outcome criteria. Interestingly, three services reported using scaling as part of their planning and review meetings. Hence, in discussion with the school in September, clear objectives for the work to be undertaken during that academic year were set and these were reviewed in July (or the following September). The degree to which the objectives had been reached was rated against a five-point scale (as in the Hackney model). Consequently, this presented as a school, rather than child centered, TME.

Three services mentioned having attempted to assess impact against a standardized measure of some sort. It was not clear what measures had been used although SDQ constituted one of these.

Eight services also mentioned that training and/or project work was systematically evaluated. In four cases the evaluation related to client-defined outcomes set before the work was undertaken and in two this was built into a standard evaluation format.

³ GRAY (2001). Developing support for more inclusive schooling: A review of the role of support services for special educational needs in English Local Education Authorities. (Available DfES & NASEN websites).

The current survey queried whether any evaluation work was linked to ECM outcomes. Of the nine services that responded to this question, four indicated that they did and five that they did not. Of the latter category, many argued why they thought this to represent an unhelpful and artificial exercise (discussed later). The qualitative analysis may help to flesh out what some of these quantitative data mean.

Comments indicated that services recognised that evaluating impact was “*the big question*” they needed to address. Many indicated that they were grappling with the difficulty of how best to achieve this but did not have any satisfactory mechanisms in place. Some were hopeful that the November conference and this NAPEP exercise might help to support them in this task.

- *No consistent mechanism for evaluation of specific outcomes and impact of service delivery.*
- *Currently we have no measures for the above but we are working on it. I would be very interested to know what other services do.*
- *We are still grappling with this issue... but have not yet found a method that works for us (i.e. useful and manageable).*
- *This is currently taxing our collective brains but we have not reached any conclusions.*

Many highlighted the difficulties inherent in the task. The work of EPs is diverse. It is difficult to measure the less tangible aspects of the difference EPs really make. It is not always clear when a meaningful post measure should be taken. It is difficult to define the real indices of success. EPs often work indirectly through others; hence there are difficulties in disentangling the impact of the input from the relative contribution of schools or others who actually put that advice into practice.

- *Our main issue is the difficulty in identifying in a measurable way what difference we are making; separate to, for example, the work of the school staff (working on our advice), and choosing WHEN to measure, as the impact can be long-term and not initially obvious.*
- *We could not work out how to capture subjective judgements, e.g. If a child stayed in their mainstream school at the end of the year, this could be a positive or negative outcome in that individual case (although in general we would be hoping to achieve inclusive solutions).*
- *The impact EPs have on a situation is difficult to capture and in my opinion is often about the way someone sees a situation and how they adjust to difficult circumstances.*
- *The EP does not have total control of the planning or ongoing intervention, and in this respect the effectiveness of the intervention in achieving the specific outcomes is not the sole responsibility of the EP*
- *A lot of our best work (such as consultation) is essentially delivered at least once removed and is operationalised within the context of real world and complex interacting systems.*
- *I am concerned that a narrow way of measuring what EPs do would miss out the true purpose and quality of our work.*

- *We aren't the only people applying psychology – almost everyone is in some way or another - one of our major roles is in helping others acquire it / procure it / apply it in a positive, moral, empirically justified way ...I think that applied psychology services such as EPSs would best be served if they actively promote the ability to deliver these kinds of outcomes – and give them equal billing to more prosaic 'impact' measures.*

Whilst many of these issues are valid and difficult, if not impossible, to resolve, the imperative is to do something; because it is problematic does not justify inaction. As one response indicated, the pursuit of perfection may be less important than systems that work reasonably well (i.e. “aim for a good enough method”).

Models of evaluation

Many services indicated that they had either adopted or been looking to apply recognised models of evaluation. Most common amongst these was the Friedman⁴ (Performance Accountability) model (6).

- *My immediate line manager is interested in the work of Friedman, turning the curve etc ... and has asked us to think about how we could use this framework to inform our own service evaluation. I find some of the turning the curve stuff seems more suited to easily attributable cause and effect type phenomena, but I am interested in seeing if there are more sophisticated ways of measuring the impact of a range of 'applied psychologies' across a community.*

Other models mentioned included RADIO (research and development in organisations)⁵, Realistic Evaluation⁶ and the Scottish EPSs evaluation model.

- *We use the RADIO model as a framework for this [project work]; evaluation is an integral aspect of this and the methods employed will depend on the methodology.*
- *I used realistic evaluation for some research and wondered if that could be used for evaluating EP services. The reason for using it would be that it allows school staff, children, assessment officers etc to say why they think the outcome (good or bad) happened - you are looking for contexts that facilitate good outcomes and those that block them.*

Scaling systems

As indicated above some services were using, or had trialled, recognised scaling systems (e.g. GAS, TME) however, others were using more flexible arrangements. Some of these appeared to be looser adaptations of TME but others were essentially a rating structure merely gauging perception of impact but without outcomes being specified in any detail.

⁴ FRIEDMAN, M. (2005). *Trying hard is not good enough*. Trafford Publishing

⁵ KNIGHT and TIMMINS (1995)

⁶ PAWSON & TILLEY (1997) *Realistic Evaluation*. London: Sage

- *We ask EPs to reflect on outcome for each piece of individual consultation/ casework they undertake: the question is worded: ‘Have the consultation objectives been achieved?’ yes/no/practically*
- *TME without defined outcome specified – just a rating structure.*
- *We carry out a “quick and dirty” evaluation of the impact of all our interventions by asking SENCOs to rate the impact on three simple scales.*
- *Many of our measures are relatively impressionistic and measure people’s perception of ... usefulness to them (i.e. their perceptions of impact in a number of domains). We nonetheless see value in collecting this kind of data, partly because actual (as opposed to proxy) measures of impact are so much more difficult to identify.*
- *We do a very careful description of the difficulties prior to the EP involvement, which involved ratings, which act as a subjective measure of the perception of outcomes.*

How services evaluate impact is both a function of how services are delivered and the perceived function of the evaluation. The evaluation of sampled activity is often with the view to justifying service costs to a management audience. One service, however, described the adoption of a consultative approach based on Plan-Do-Review (PDR). In this model, evaluation is integral to the planning and review system. Frederickson (2003)⁷ pointed out that EPs are legally responsible for ensuring the advice provided enables successful outcomes to be achieved (House of Lords judgement re: Phelps). This PDR approach focuses evaluation on the clinical care aspect of these responsibilities. The service, describing this approach, used a rating scale and qualitative feedback to determine how well outcomes had been achieved (see appendices A for the coding and reporting arrangements). I have quoted more extensively from this source in order to provide clarification of this system. This model is particularly attractive as evaluation is integral to what EPs do in their daily practice and not a bolt-on activity.

- *Our codes are part of our existing EMS database, which is used for recording visits and the work carried out by the service. Performance measure codes are only applicable at the review stage but other codes have been established so that all parts of the plan-do-review cycle are entered... The incorporation of the system within the existing activity recording means there is little additional work for the EP. Defining the outcome with participants at the planning stage is seen as positive practice, rather than an additional requirement for an evaluation process, and consequently the approach derives from the existing P-D-R change process, rather than adding additional tasks for evaluation. Applicable to most aspects of EP work including group work projects, research, inset within the school or wider. Bringing an outcome focus to the work we do with our partners and/or clients also helps them focus on what they are seeking to achieve and provides a greater validity to the partnerships efforts to promote change.*

⁷ FREDERICKSON (2003). Producing Evidence of Effectiveness: Monitoring & Evaluating Pupil Progress

Comment 4

The adoption of scaling or rating systems, which lack the rigour of TME or GAS, would appear to be problematic and potentially undermine the use of such systems. There are variations of TME, which appear simpler than the UCL model but hold to the principles. The use of a TME approach to the planning-review approach many EPs adopt would appear attractive in helping to include a school-level evaluation into their routine work. The use of TME/GAS within a PDR model of service delivery would appear to present as the *Rolls-Royce* model of evaluation as applied through scaling systems.

It might be useful to collate and circulate the different variations with the view to supporting services to retain fidelity to the structure and apply the model in ways, which integrate better into routine work

National indicators

Many services indicated that their activity was increasingly being viewed in relation to the national data sets. Whilst conceding that the EPS had some role in relation to the performance of their local authority, none of these indicators were directly attributable to EPS activity alone. Hence, none thought they had a significant role in evaluating impact.

- *Data from Fischer Family Trust outcomes for schools (pupil progress measures) and SAT results are looked at*
- *Reliant on aspects such as the progress of vulnerable groups on attainment and achievement measures, numbers of children who are NEET, those who require special education and those who require out of district placements. None can be attributed to EPS activity in isolation.*
- *Other 'hard' proxy indicators that could be used, but which I would have a problem with if the outcomes were wholly attributable to the EPs would include things like reducing exclusion rates, incidents of self harm / suicide attempts etc. It is too simplistic to causally link service accountability to complex data like this.*

Standardised measures

Some services considered that standardised measures could not be used constructively to evaluate the broad range of work (e.g. casework, consultation sessions) in which EPs engaged.

- *Given the nature of our work, we do not consider standardised measures to be appropriate for evaluation.*

However, other services questioned this and indicated that these measures were used especially to assess particular projects. Reference was also made to the work of the CAMHS Outcomes Research Consortium (CORC)⁸, which had reviewed how Child and Adolescent Mental Health Services could be evaluated. This has led to an agreed approach for the routine evaluation of

⁸ <http://www.annafreud.org/corc.htm>

outcomes of work in this sector with the view to building an evidence-base as to what degree certain courses of treatment are successful and for whom. Systematic use of the Strengths and Difficulties Questionnaires (SDQ – Goodman, 1997)⁹ constitutes one of the approaches. The SDQ was also discussed in this current feedback from services, although it was noted that this measure retains a significant degree of subjectivity.

- *We use SDQ and other individual assessments to measure any change as a result of CBT*
- *None.... I wonder what standardised measures would be considered. Strengths and Difficulties Questionnaires may be one... However, it depends on what it is you are wanting to measure.*
- *The ubiquitous pre- and post-SDQ is used by colleagues in our Place 2 Be hub and our TaMHS project is going to use a parental 'daily hassles and stress scale'¹⁰ but in both cases these can (to a degree) be linked more overtly to a specific intervention.*

Comment 5

Scaling systems appear attractive in that they embed well into clinical practice. However, these systems are never going to be able to provide data, which can be used for any comparative purposes, either within or between services. Hence it is not going to provide a vehicle that could ever lead to CORC's aspiration of building a better evidence base for practice.

It might be possible to agree on some standardised measures that could be used for particular aspects of our work (e.g. CBT) and to share these data with the view to determining what types of intervention and arrangements produce the most cost-effective outcomes.

Evaluation of the training provided

Whilst the evaluation of the generic work EPs undertake presents many practical difficulties, other aspects are more rigorously addressed. Most services suggested there was a more robust attempt to evaluate project work, commissioned projects and particularly training.

Training was typically evaluated by asking participants to complete feedback sheets before leaving the venue; this was collated and reported back to those who had commissioned the training as part of an accountability arrangement. Some of these appeared rather superficial and related to people's impression of the session ("How was it for you?") but others attempted to probe whether predefined objectives had been achieved.

- *Collect data from participants in training, immediately after the training and summarise the feedback for whoever has commissioned this training.*
- *Evaluation is built into project work and training delivery, including participants' views.*

⁹ <http://www.sdqinfo.com/b1.html>

¹⁰ http://ciscaf.ceredigion.gov.uk/files/DH_parenting%20hassles.pdf

- *We routinely collect evaluative feedback following training events. The structure and content depends upon the training carried out.*
- *Training such as Foster Carer training and Workforce Development (Child Development; Equality and Diversity; Communicating with CYP) is evaluated through forms completed at the end of the sessions by training co-ordinators.*
- *Data regarding training, which the EP service delivers, is collected using a standard form. This uses before and after measures against the defined objectives for the training.*

The litmus test for training however is not what people thought about it but whether it changes the lives, practices or outcomes of those for whom it is intended (primarily children and young people). Whilst some services were conscious of the need to address this level of impact, this requires a more considered approach and service time and is not embedded in current practice.

- *Considering ways to look at whether the training has a long-term impact.*

There was often a more explicit requirement for EPs to evaluate commissioned projects. The initial brief appeared to be more closely negotiated and defined, outcomes of the project tended to be made explicit, and standardised measures were more frequently involved.

- *All EPs who choose to have time for commissioned tasks are expected to evaluate this in some way.*
- *'Mellow parenting' is evaluated with pre- and post- parental hassles questionnaire and a qualitative evaluation form completed by participants.*
- *For individual projects or research commissioned by other service users (e.g. Social Care) we set specific performance indicators and measures according to the work, and report directly to who has commissioned the work.*

Comment 6

The evaluation of training could be made more rigorous. The evaluation of outcomes against predetermined objectives is to be applauded but the real challenge is to show that it impacts on outcomes for children and young people. Again, it would be useful to consider collecting, collating and distributing examples of good practice in this area.

ECM outcomes

In conclusion, one of the survey questions asked about the services' view on linking their evaluations to the ECM outcomes. Responses tended to be finely balanced. Some services attempted to project some of the outcomes onto ECM criteria, but this was not done in any systematic way and was felt to be rather tokenistic. Others deliberately did not attempt to do this, they often declared clearly what the outcome was and left others to categorise them, if there was a need to do so. A key issue was that most outcomes could legitimately be assigned to almost any of the five outcomes.

- *Yes – however, this is not hard data. Our realist model of evaluation makes certain assumptions about a link between those immediate outcomes we measure and longer-term measures of change for children.*
- *Whilst ECM Outcomes obviously underpin the work of all Children's Services and inter-agency collaboration, as an EPS, we have not yet gone out of our way to account for everything we do against this framework, as examples I have seen of this can lead to an artificial constraint to record something against each of the 5 Outcomes.*
- *We attempt to evaluate work on commissioned tasks against ECM outcomes but it has not been hugely successful, as activities don't neatly fit into the categories and there is always a lot of overlap with different areas.*

CONCLUSION

This report attempts to document the feedback received to date. If NAPEP were willing to remind people of this exercise I would be willing to add any new feedback to this report. Services kindly sent examples of the evaluation tools they currently use and I have included two examples in the appendices. With appropriate agreements these materials could be made available to any working groups willing to take this work forward.

Appendix A: Review Codes

Performance Measures

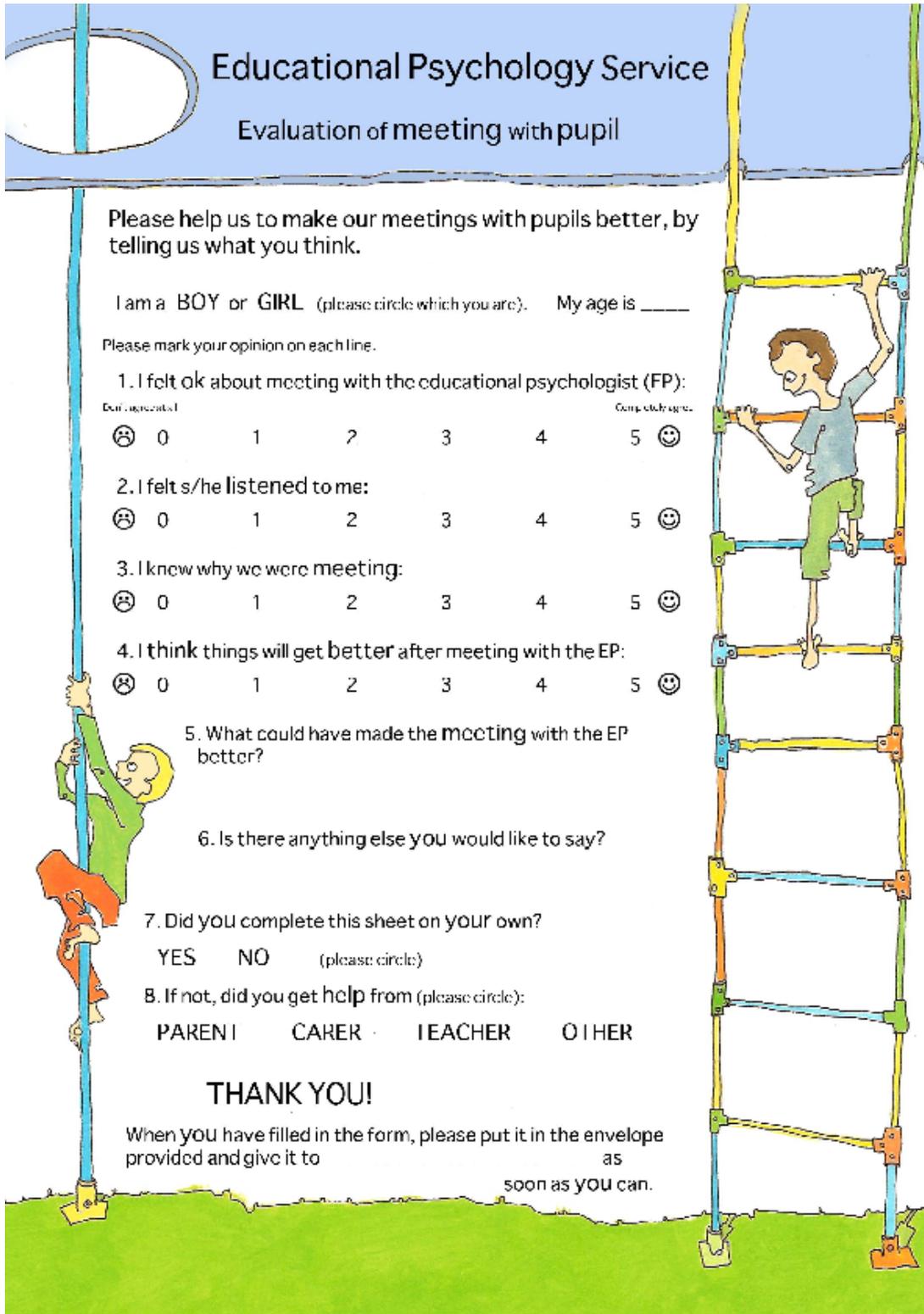
- SI** Significant improvement has been achieved — i.e. the identified concern or problem had been addressed, the desired outcome achieved and no further action is required at this stage.
- IM** Improvements but continued involvement by others required. Improvements have been achieved but continued monitoring or actions are required to maintain progress — i.e. the action plan seems to be effective but needs to continue in its present form to ensure progress. This can be managed by school/parents/others without further EP involvement at this stage.
- ICA** Improvements and continued action. Improvements have been achieved but continued planning, intervention and monitoring is required by the PDR group — i.e. interventions may not have been fully effective in achieving the desired outcome and need to be redesigned or modified. Interventions may not have been carried out, or carried out incompletely and need to be repeated more fully.
- NR** No real change identified at this stage, continued work required.
- EC** Escalating Concern — i.e. continued work with a refocus on the problem, outcome, hypothesis or intervention may be required, or the involvement of another agency.
- SC** Significant change in need identified — i.e. the previous action planning is now redundant and a new planning approach is required.
- NLN** Issue no longer needed/relevant — e.g. child moved away, now having elective home education, etc

Simple statistical data are reported in The SEN Support Services Annual Report.

- Percentage of data points reported as Improvements which are sufficiently significant for psychology involvement to cease (SI + IM) = %
- Percentage of data points reported as Continued Involvement, including when improvements occur (ICA + NR + SC) = %
- Percentage of data points reported as general deterioration requiring refocus and/or other agency involvement (GD) = %

Although the approach may seem to be an attempt to reduce service impact to a numerical percentage and we would wish to see a higher regard for the multi-faceted qualitative effect of our service delivery, it is important that we are able to present this type of information in a logical way as some indicator of service effectiveness.

Appendix B: Pupil feedback (York EPS)



Educational Psychology Service
Evaluation of meeting with pupil

Please help us to make our meetings with pupils better, by telling us what you think.

I am a **BOY** or **GIRL** (please circle which you are). My age is ____

Please mark your opinion on each line.

1. I felt ok about meeting with the educational psychologist (EP):

<small>Don't agree at all</small>	☹	0	1	2	3	4	5	☺	<small>Completely agree</small>
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2. I felt s/he listened to me:

☹	0	1	2	3	4	5	☺
---	---	---	---	---	---	---	---

3. I know why we were meeting:

☹	0	1	2	3	4	5	☺
---	---	---	---	---	---	---	---

4. I think things will get better after meeting with the EP:

☹	0	1	2	3	4	5	☺
---	---	---	---	---	---	---	---

5. What could have made the meeting with the EP better?

6. Is there anything else you would like to say?

7. Did you complete this sheet on YOUR own?
YES NO (please circle)

8. If not, did you get help from (please circle):
PARENT CARER TEACHER OTHER

THANK YOU!

When you have filled in the form, please put it in the envelope provided and give it to _____ as soon as you can.

Appendix C: Parent/Carer feedback (Newcastle EPS).

Feedback from Parents and Carers

In order to help the Educational Psychology Service improve the quality of our work we would like to know what you think about the service you and your child have received from us.

Do you think that your child's Educational Psychologist:

1. Listened carefully to what you had to say:
Yes Mostly Sometimes No Don't Know

2. Explained things clearly:
Yes Mostly Sometimes No Don't Know

3. Helped you understand your child's situation: Yes No Don't Know

4. Explained what would happen next: Yes No Don't Know

5. Helped to make things better for your child : Yes No Don't Know
 Please Comment:

6. Was helpful:
Yes Mostly Sometimes No Don't Know

7. Worked well with other professionals involved:
Yes Mostly Sometimes No Don't Know

8. Met and talked with you at a time that was convenient:
Yes Mostly Sometimes No Don't Know

9. Did what they said they would do:
Yes Mostly Sometimes No Don't Know

10. Did things when they said they would:
Yes Mostly Sometimes No Don't Know

Please make any other comments.

Thank you for your help