

Unit Nine

Completing the cycle – evaluation from a PCT's perspective

Key benefits

Reading this unit will:

- explain the value of performing an evaluation and the role of the PCT in supporting the practice to undertake an evaluation
- describe how evaluations should be structured and what should be included
- describe the different phases of an evaluation.

Your approach should be to set out measurable targets and timescales that are realistic for the particular context and issues that you are evaluating in relation to a health care assistant's (HCA) post. The short-, medium- and long-term outcomes that will be evaluated should be agreed with anyone linked to the initiative in the PCT and with colleagues from general practices.¹ Flexibility is important so that the evaluation protocol is not applied too rigidly. It is possible that other factors may crop up that are not under your control. The outcomes that were originally expected if the initiative worked well may, therefore, no longer be viable or possible.

There are two phases to evaluation and these are summarised below.

Formative

A formative evaluation involves collecting data during a development and using it to shape what happens according to problems that arise, in addition to what seems to be working well.

Summative

A summative evaluation occurs after the activity has ended and is used to make judgements about the success, or otherwise, of the development or service being evaluated.

Designing the evaluation

- **Specify exactly what is being evaluated** – set priorities against what you need to achieve, and the time and resources available. Agreement should be obtained from the practice team on the nature and scope of the task.
- **Describe the expected impact of the programme or activity** – it is essential that it is clear who will be affected.
- **Define the success criteria** – these might relate to the structure, process or outcome of a service or development.
- **Identify the information required to demonstrate achievement** – this could be what the individual HCA or the team achieved. The information required might come from observing behaviour, utilising data from existing records and/or prospective recording by the HCAs themselves or by their colleagues involved.
- **Determine a timescale for the evaluation** – this should include how long the evaluation will take overall, what will be done and by what time.

- **Decide who collates the information for the evaluation** – the deadlines for collecting the data should also be decided.
- **Review and refine the objectives of the evaluation** – it is important to check that they are appropriate for the outcomes generated and their impact, as well as the resources expended.

Any evaluation of the HCA role or that of others in the team is complicated by the fact that the outcome may be dependent on many factors other than the initiative being evaluated. It may also take a long period of time before the results are seen.

How to evaluate²

There are many varied approaches to evaluation. The points below provide further information.

1. Evaluate any aspect of an effective service where the HCA plays a role in general practice, for example, access, effective delivery, efficiency, patient/carer experience, health outcomes – within a cluster of practices or across the PCT.
2. Evaluate the extent to which the outcome(s) are achieved in a PCT or local commissioning group plan for a new service.¹
3. Break the cycle of progress with a new initiative or service down into the four RAID stages.³
 - **Review of progress.**
 - **Agree the plan.**
 - **Implement the plan.**
 - **Demonstrate what you have achieved.**

Set goals and milestones as interim measures for one or all of these four stages, and evaluate the extent to which the various planned aspects of the initiative are completed.

4. Undertake regular audits of aspects of the structure, process and outcome of a service or development relating to an HCA post that occurs across the PCT or within a cluster of practices (see [Tool – Structure, process and outcome as the three stages of undertaking audit; then judging how well you have performed](#)). See if you have achieved what you expected when you established the criteria and standards of the audit programme. Check that the full cycle of the audit, including the implementation of changes and the re-audit, have been completed (see [Tool – Employment – evaluation by the practice employer](#)). Think about the impact of your role on the way that HCAs are employed, trained, developed and supported – linking your evaluation to any part of this Toolkit.
5. Measure how effective your PCT infrastructure⁴ is in relation to the development of the HCA role by evaluating the extent and quality of:
 - *clear team goals and objectives*
 - *accountability and authority*
 - *individual roles for team members*
 - *shared tasks*
 - *regular internal formal and informal communication*
 - *feedback to individual HCAs and other staff*
 - *feedback on team performance* (see [Tool – Learning and personal development - evaluation by a health care assistant](#)).

6. Evaluate the aspects of care most highly valued by patients in relation to the HCA(s) or to the rest of the team:
 - **availability and accessibility** – including appointments, waiting times, physical access and telephone access
 - **technical competence** – including the knowledge and skills of the HCA, and effectiveness of the treatment provided
 - **communication skills** – including the ability to provide time, explore patients' needs, listen, explain, and give information
 - **interpersonal attributes** – including humaneness, caring attitude, supportiveness and trust
 - **organisation of care** – including continuity of care, coordination of care and availability of on-site services.

What to evaluate

Any, or every, aspect of workforce strategy and plans for establishing or developing HCA posts in general practice across the PCT might be evaluated. Some special areas of interest to evaluate might be the:

- match between workforce planning, and the local health strategy and action plan
- provision of relevant training
- monitoring of competence
- level of patient satisfaction
- effectiveness of new models of practice team delivery
- coordination and consistency of HCA advice provided to the patient population.

Box: *Mixed method evaluation of a primary care service based in one PCT* describes an evaluation to improve the secondary prevention of coronary heart disease (CHD) in primary care.

Mixed method evaluation of a primary care service based in one PCT⁵

Three distinct approaches to evaluation were used to rate the improvement of an intervention tackling secondary prevention of CHD in the deprived population of one PCT. These included collecting information from a before and after audit of services, a survey of reported patient uptake of services, and staff interviews (qualitative data).

This example relates to the PCT leadership of an initiative involving 11 practice teams that did not specifically involve HCAs – but serves to demonstrate a typical triangulated approach to evaluation, whereby the information was gathered by three different means to reduce the bias of each method of data collection.

To look specifically as a PCT, aspects relating to the HCAs working in your general practices that you might want to evaluate include:

- *the adherence to best employment practice of HCAs by general practice employers (see [Tool – Employment – evaluation by the PCT](#))*
- *the undertaking of a PCT-wide training needs assessment of HCAs (see [Tool – Training needs assessment of health care assistants – evaluation by the PCT](#))*
- *the support and development available to HCAs working in general practice across the PCT (see [Tool – Support and development of health care assistants – evaluation by the PCT](#)).*

These three key components of your role and responsibilities as a PCT are set out as choices for you to select when deciding what aspect you want to evaluate in Table: *Examples of evaluation a PCT commissioner might undertake*. It might be appropriate to evaluate a different topic entirely. If there's something more important in your PCT function, you might decide to evaluate a different topic entirely. In this case, add succinct details to the row at the bottom of the table. With our three examples, you might focus your evaluation on:

- **what actually happened** – such as the content of HCA job descriptions and how well they match their respective posts; the variety of formats of PDP templates; the nature of support for HCAs' development of new skills and responsibilities or career progression
- **how it worked out** – how well the good employment practices for HCAs are applied across the PCT; the type of help practices receive in identifying HCAs' training needs; how well a PCT-wide training needs assessment is conducted across the PCT locality
- **the outcome** – what was achieved as a result of good employment practice; the number of HCAs retained in general practice 2 years later; how well HCAs apply their knowledge and skills as a result of the PCT addressing their training need; changes in the way care is delivered as a result of the enhanced contribution HCAs make.

You might evaluate the 'what', 'how' and 'outcome' aspects regarding good employment practice, appropriate training needs assessment of HCAs, their PCT-organised support and development or some other aspect of practice work that is important. Alternatively, you may evaluate just one of these, such as the 'how' only. Evaluating the outcome and what was achieved or the resulting changes made to the service provided to patients as a result will be more challenging to evaluate than the 'what' and the 'how' aspects.

East Leeds PCT has helped practices with a 'what' evaluation to review the skill mix in their teams – as described in Box: *Evaluating nursing skill mix in practice teams*.

Some elements of establishing and developing HCA posts in general practice to consider include:

- *having an appropriate workforce strategy and action plan*
- *providing up-to-date job descriptions*
- *providing relevant training*
- *checking competence*
- *assessing patient satisfaction*
- *defining the role of practice team members*
- *ensuring appropriate coordination and consistency of healthcare advice and practice across the team.*

For example, if an evaluation of the competence of HCAs in general practices across a PCT was being carried out, the following might be considered:

- *whether a training needs assessment of HCA posts was carried out on a pan PCT-wide basis*
- *the extent to which training was commissioned, provided or signposted by the PCT to match the learning and service needs identified by the training needs assessment*
- *the extent to which HCAs took part in additional training and gained qualifications.*

It might be useful to evaluate the PCT's perspective of the employment and training of HCAs in general practice teams, their development and integration into the practice team, or other aspects of the HCA post, as given in the matrix of Table: *Examples of evaluation a PCT commissioner might undertake*.

Evaluating nursing skill mix in practice teams⁶

East Leeds PCT undertook a simple evaluation of the extent to which practice nurses could delegate certain duties like phlebotomy and new patient checks. The evaluation then asked for the nurses' perspectives on what clinical tasks they might do instead. The answer was a resounding 'chronic disease management'.

Undertaking the evaluation

1. Look at the table below and decide by reading the information in columns A, B and C if this is something you would like to evaluate.
2. Click on the tool for instructions on how to complete the evaluation, for example if you choose 'Employment', click on [Tool – Employment – evaluation by the PCT](#).
3. This Tool will give you a template to fill in electronically or by hand to complete the evaluation process.

Examples of evaluation a PCT commissioner might undertake

Aspect of HCA post	Criteria for evaluation by PCT in relation to HCAs		
	What is it about? Extent by which:	How did it work? Extent by which:	What was the outcome? Extent by which:
Employment Tool – Employment – evaluation by the PCT	Electronic examples of good practice resources are available to practices for: (i) job descriptions covering a varied HCA role and different levels of seniority (ii) HCA recruitment packs, including pre-employment checks.	Log shows all practice enquiries regarding help in recruiting and employing HCAs were satisfactorily dealt with.	Local HCAs are retained in the NHS (as HCA or progressing on career pathway).
Training Tool – Training needs assessment of health care assistants – evaluation by the PCT	Training needs analysis template PCT-wide includes focus on HCAs working in general practices and input from practice teams.	Training needs of HCAs identified on a PCT-wide basis; relevant courses commissioned, provided or signposted.	PCT maps qualifications gained; numbers of NVQ assessors and internal verifiers increased/maintained (according to need).

Aspect of HCA post	Criteria for evaluation by PCT in relation to HCAs		
	What is it about? Extent by which:	How did it work? Extent by which:	What was the outcome? Extent by which:
Development <div style="background-color: #0056b3; color: white; padding: 5px; border-radius: 10px; width: fit-content;"> <i>Tool – Support and development of health care assistants – evaluation by the PCT</i> </div>	PCT appraisal policy exists, and is linked to the system for collecting and pooling learning needs from HCAs' personal development plans on a PCT-wide basis; policy for funding staff development exists; mentor scheme exists for HCAs; careers advice service exists, which is open to HCAs.	Protected study and development time occurs that can be taken up by HCAs; mentoring happens for all HCAs who apply for it; HCAs take up careers support services.	Case examples of HCAs who move along the career pathway, or gain new or delegated skills are communicated and acclaimed by senior PCT staff.
Your selected issue	You add	You add	You add

Summary

- *PCTs will want to encourage their general practices to undertake an evaluation of the HCA's role.*
- *The PCT can support practices by providing guidance and advice on the design and structure of the evaluation.*
- *This unit provides tools and materials that have been developed and used by others to undertake evaluations in general practice.*

References

1. Pawson R, Tilley N. *Realistic Evaluation*. London: Sage; 2000.
2. Chambers R, Wakley G. *Making Clinical Governance Work For You*. Oxford: Radcliffe Medical Press; 2000.
3. Wood L. *Review, Agree, Implement, Demonstrate*. Leicester: National Clinical Governance Support Team; 2001.
4. Hart E, Fletcher J. Learning how to change: a selective analysis of literature and experience of how teams learn and organisations change. *J Interprof Care* 1999; 13(1): 53–63.
5. Lacey EA, Kalsi GS, Macintosh MJ. Mixed method evaluation of an innovation to improve secondary prevention of coronary heart disease in primary care. *Qual Prim Care* 2004; 12: 259–265.
6. McCartney D. *Evaluation of Practice Nursing Duties*. Leeds: East Leeds PCT. Personal communication