



Community Interest Company: A Social Enterprise Organisation

Project Report

National Social Marketing Centre

National Learning Demonstration Sites

PHASE 1 Evaluation

Authors: Tracy McFall-Austin and Geoff Wykurz
Version: 4
Date: 15th April 2009
Client: National Social Marketing Centre
Ref No: P125

Public Health Action Support Team CIC
A Social Enterprise organisation and Community Interest Company
Registered office: PO Box 1295, 20 Station Road, Gerrards Cross, Buckinghamshire, SL9 8EL
English Company Number: 06480440
VAT Registration: 926 9466 78

www.phast.org.uk

E&OE

Public Health Action Support Team (PHAST)

The Public Health Action Support Team (PHAST) is a Community Interest Company. This is a type of social enterprise that is committed to using its surpluses and assets for the public good. Social enterprises are social mission driven organisations which trade in goods or services for a social purpose.¹

PHAST is based at Imperial College, London. It has over 60 experienced and expert public health professionals whose aim is to improve the health of the population and reduce inequalities. Many have worked at high level in the NHS, the Department of Health or in academia. Quality assurance and due diligence processes are in place to ensure all associates work to the highest standard. PHAST also has associates with economic, ethical and legal expertise. For further details see www.phast.org.uk

Acknowledgment

The evaluators wish to thank all those who agreed to be interviewed from the individual demonstration sites, the Associates and representatives from the National Social Marketing Centre (NSMC) and the Department of Health.

We also wish to acknowledge the assistance of Denise Ong at the NSMC for organising the interviews; the staff of PHAST who facilitated the arrangements for transcribing the interviews; and all the transcribers at 'Way with Words' who efficiently prepared the transcripts.

Associate details

Ms. Tracy McFall-Austin

Mr. Geoff Wykurz

¹ Whereas conventional businesses distribute their profit among shareholders, in social enterprises the surplus goes towards one or more social aims which the business has. PHAST will invest any surplus into development of new products and working with charities. In line with this PHAST directors and shareholders receive no dividends for their work in managing PHAST CIC. PHAST CIC is also regulated by the CIC Regulator, based at Companies House, to ensure it fulfils its Social Enterprise objectives with a mandatory requirement for annual audit.

1. Executive Summary

Introduction

The National Social Marketing Centre (NSMC) commissioned the Public Health Support Team (PHAST) to undertake a process evaluation of the ten learning demonstration sites. The evaluation will be conducted in two phases. The first phase of the evaluation was carried out in the autumn of 2008. Interviews for the second phase are due to take place in April and May 2009.

The Phase 1 evaluation is an exploration of the 'how' and 'why' each site developed its project, and the learning achieved through applying social marketing approaches at the operational level.

Methodology

Each site in consultation with the NSMC identified three people to be interviewed. Those interviewed tended to be the project lead, the Associate assigned by the NSMC and another local stakeholder.

In addition, four strategic stakeholders were interviewed from the NSMC and the Department of Health (DH).

Topic guides were developed for the interviews in consultation with the NSMC. The two evaluators divided the sites between them and split the interviews with the strategic stakeholders in institutional pairs. Each interview was recorded and transcribed. The three interviews at each of the ten sites were analysed to identify specific issues and an individual report was written on each site as internal documents for the NSMC. This Phase 1 Report is a synthesis of the issues emerging from the individual reports on the sites and strategic stakeholders.

Emerging Findings and Issues

Embracing Social Marketing

- Many sites initially considered that social marketing was similar to the traditional methods applied in public health and health promotion. However, through their participation in the NSMC programme, the distinctive approach associated with social marketing has been recognised and has increased in its value. Many have enthusiastically embraced the model, which they judge to have provided a systematic structure for their professional practice.
- Social marketing is considered to be a valuable tool in helping to secure behavioural change in specific settings. However, it is also seen as a means to achieve wider goals that include adherence to the precepts outlined in the new commissioning agenda, promoting more effective community engagement, challenging professional practice and acting as a catalyst for organisational development.
- A few sites have engaged with community networks and have involved the community in the scoping and development stages, which has provided valuable 'insight' into the needs of the target audience.
- The importance of adhering strictly to the steps outlined in the benchmark criteria has been recognised by many of the sites.

Purpose of Demonstration Sites

- Analysis of the interviews suggested that there was a lack of clarity regarding the formal commissioning arrangement between the DH and the NSMC for the development of the learning demonstration site programme. This was mostly around the overall aim of the programme, which led to confusion over the national programme intent.
- The primary purpose of establishing the sites has become unclear. The aims of the programme state that the intention is that the sites should provide an opportunity to learn about the experience of implementing a social marketing project and to generate models of best practice with measurable health outcomes. However which of these should be the primary purpose of the programme appears to have shifted from the former to the latter.

- The emerging emphasis on the sites producing measurable outcomes appears to have shifted the agenda for some sites, placing greater emphasis on the delivery of results rather than an opportunity to capture learning through the process of implementing social marketing approaches.

Selection of Demonstration Sites

- Sites were recruited into the programme in a variety of ways. Some sites proactively contacted the NSMC, while others were invited to join the programme following a NSMC training event and others applied through a formal NSMC process. It therefore appears that the primary intention in the site-recruitment process was to attract projects from people who were enthusiastic about exploring the potential of the social marketing approach rather than a primary focus on their capacity to deliver a project that would provide evidence of its impact
- The criteria for selection appeared to be based on creating a balance of geographical distribution and a variety of topics with a focus on deprivation and health inequalities.

NSMC and Support to Sites

- The NSMC has grown its capacity to respond to local project needs and to assist projects by offering practical support and guidance through consultancy, training events, workshops, conferences and literature. The value attributed to these initiatives varies between the projects, but overall the assistance offered by the NSMC has been appreciated, with some elements considered to be of greater value than others.
- The resource most valued by the sites has been the allocation of consultancy support through a designated NSMC Associate. The involvement of the Associate is clearly crucial to the success of the programme.
- Many sites consider that the NSMC could play a valuable role in facilitating regional events to enable local projects at a similar stage in their development to share experiences and receive training.

-
- Some projects suggested there was a tendency for the NSMC to be 'London-centric'.
 - The NSMC has taken over the management of one site due to organisational changes

Role of Associates

- Most of the sites valued the 'front-loading' of assistance through the allocation of an Associate that has helped get the project off the ground. Many of the Associates took on a crucial 'hands-on' role and helped to guide and support the establishment of the social marketing project.
- The sites reported that they valued the substantial increase in the number of Associate consultancy time offered by the NSMC and the additional support helped to drive forward the local projects. The initial allocation of ten days of Associate consultancy time for each site was considered inadequate by all of the sites.
- The sites all agreed that they needed Associates with a high level of experience and expertise in operationalising social marketing approaches. The Associates' involvement was useful to monitor the early implementation of the projects and provide local and individualised training as necessary. In the few cases where the Associate was less experienced and had less time to devote to support the sites the demands of other priorities on project leads contributed to project drift.
- Effective collaboration between the project lead and the Associate had undoubtedly been a key to success. Where a good working relationship has evolved, mutual respect has grown and it appears that the project has too.
- Associates who were contracted in a freelance capacity were generally more able to provide a flexible response to the needs of project leads.

Resources and Sustainability

- Most, but not all, sites were based in the Public Health Directorate of Primary Care Trusts (PCTs). The amount of time project leads could commit to managing projects varied but all considered that the time commitment far exceeded their original assumptions. The leads also reported that they felt that they could not rush the process if they were to achieve the desired results.
- The degree of senior management support from within a PCT varied considerably. The support and engagement by the Director of Public Health was regarded as important and particularly effective where the post was a joint appointment with the local authority.
- The support and involvement of senior management was considered crucial by many to overcome obstacles that emerged.
- Each project required additional resources to implement their project, the source of which varied between sites. For some sites the time required to identify and secure resources often detracted from the business of developing and delivering the project.
- In some cases the NSMC has been instrumental in assisting sites to access additional resources.
- A few sites are already looking towards the long-term sustainability of their projects with the hope that some may be embedded in the mainstream activity of their PCTs. A few sites have undertaken a risk assessment and acknowledge that if NSMC funding were to be withdrawn, they would be concerned about the commitment locally to sustain the programme. Others are hopeful that the NSMC can help to identify support as they plan their exit strategy when the NSMC terminates its involvement.

Commissioning and Working with Third Sector and Commercial Agencies

- The restructuring of PCTs to strengthen their commissioning role and create clearer internal separation from its provider status has implications for the commissioning and delivery of social marketing initiatives, particularly if they are to become a commissioning only entity and not a provider of public health programmes.
- A spectrum of relationships between PCTs, commercial agencies and the third sector appears to be evolving with the degree of PCT involvement varying from a close partnership to one that is more distant. However, such engagement is still in its early stages for many sites.
- If the PCT leads are to commission specific elements or the project management of the social marketing project as a whole to external agencies, a concern of many projects is how to ensure that experience and expertise of social marketing is not lost locally, but is embedded through the collaboration between the PCT and the commercial/third sector agency commissioned to undertake the social marketing project.

Working in Partnership with Stakeholders

- The sites worked with a variety of different stakeholders, which depended upon the nature of the issues that they were focusing on and the locality. Some sites reported difficulty in attracting and sustaining the involvement of relevant stakeholders for a wide variety of reasons.
- The degree of involvement of local communities and representatives of the 'target audience' varied between projects. Some worked very closely with the local community and other key partners as part of a shared enterprise, others were considerably less engaged.

Evaluation of Sites

- The majority of sites recognised the importance of an evaluation strategy, but many had not established one at the beginning of their project. Many reported that they required assistance with this aspect of the work and were grateful that this would be available from the NSMC. One project considered that the NSMC should have provided more support for this aspect of the project's work from the outset.
- A few sites raised concerns about the rigour of the local scoping exercise. Due to a lack of expertise in the area of research, a few leads voiced concerns about the ability of the sites to know what was robust and valid research for the scoping phase. For example, what was too much, what was too little, and what was the appropriate methodology?
- There were limited links made with academic institutions that could provide evaluation support and the sharing of knowledge with sites. One site had a strong partnership with a local university and valued the assistance provided by a local professor with expertise in social marketing.

What Helps and Hinders Implementation

- The sites have identified a wide variety of factors that have helped and hindered the development of their projects. These have been analysed under several categories which are summarised below and elaborated in the main report.

<u>What helps</u>	<u>What hinders</u>
<ul style="list-style-type: none"> • valuing and commitment to making the social marketing approach work locally 	<ul style="list-style-type: none"> • scepticism about the approach and its ability to deliver innovative and effective interventions
<ul style="list-style-type: none"> • dedicated local project leadership with the necessary time and resources 	<ul style="list-style-type: none"> • allowing the project to drift often due to a lack of local leadership
<ul style="list-style-type: none"> • support and engagement from senior management 	<ul style="list-style-type: none"> • absence of support and engagement from senior management
<ul style="list-style-type: none"> • expertise of an Associate/consultant 	<ul style="list-style-type: none"> • limited knowledge of and access to social marketing expertise
<ul style="list-style-type: none"> • adhering rigidly to the benchmark criteria 	<ul style="list-style-type: none"> • using inexperienced researchers or other support staff when applying the benchmark criteria
<ul style="list-style-type: none"> • establishing a committed project steering committee with a clear SMART action plan 	<ul style="list-style-type: none"> • a steering group that changed during the project and lack of a clear SMART action plan
<ul style="list-style-type: none"> • identifying and working effectively with key stakeholders. A stakeholder analysis undertaken at the beginning. 	<ul style="list-style-type: none"> • resistance to involvement by key stakeholders, working ineffectively with stakeholders, which results in project drift. Lack of stakeholder analysis
<ul style="list-style-type: none"> • involving the local community and the target audience 	<ul style="list-style-type: none"> • limited or late engagement with the community and target audience
<ul style="list-style-type: none"> • an effective communication strategy 	<ul style="list-style-type: none"> • limited or nil acknowledgement and understanding of the need for a local communication strategy
<ul style="list-style-type: none"> • a rigorous scoping exercise 	<ul style="list-style-type: none"> • a scoping exercise that is lengthy and not fit for purpose
<ul style="list-style-type: none"> • planning evaluation from the outset 	<ul style="list-style-type: none"> • difficulty with conducting an evaluation due to lack of expertise and experience
<ul style="list-style-type: none"> • celebrating success – no matter how small 	<ul style="list-style-type: none"> • trying to juggle the demands of the Department of Health national targets while responding to local needs