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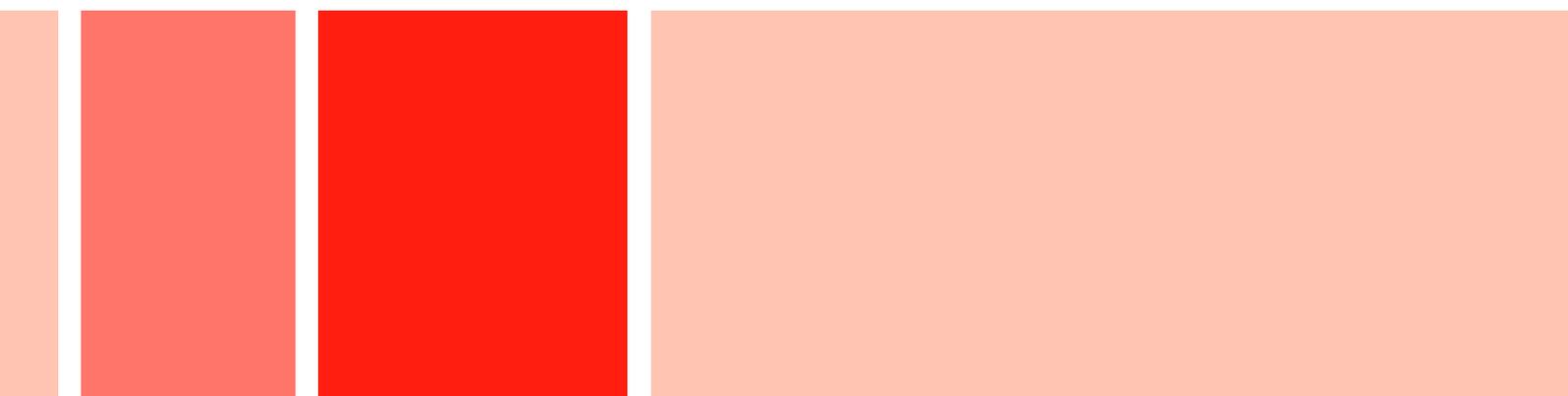
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# Evaluation of Health Challenge Wales Voluntary Sector Grant Scheme 2013-15

## Interim report



# Evaluation of the Health Challenge Wales Voluntary Sector Grant Scheme 2013-15

Interim report to the Welsh Government

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Views expressed in this report are those of the researcher and not necessarily those of the Welsh Government

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## Executive Summary

### 1. Background

The aim of the Health Challenge Wales Voluntary Sector Grant Scheme (HCWVSGS) is to develop the capacity and capability of national voluntary sector organisations in Wales to work in partnership with the Welsh Government and other voluntary sector organisations to promote sustainable health and wellbeing through support for core and project activities. The objectives of the scheme are to:

- Influence the conditions necessary for people to lead healthy lives and to improve their health.
- Support individuals and groups to do what they can to improve their own health and that of their families.
- Promote health and wellbeing messages effectively.

Six projects were funded through the 2013-15 scheme as outlined in the table below.

<b>Organisation</b>	<b>Project name</b>	<b>Key theme</b>
Mind Cymru	Perinatal Mental Health and Resilience – Early Support Project.	Promoting healthier lifestyles for pregnant women
Sustrans Cymru	Healthy Hospitals Project.	Supporting the creation of a Healthy Hospitals initiative
Sustrans Cymru	Healthy Universities Project.	Supporting the creation of a Healthy Universities initiative
Clybiau Plant Cymru Kids' Clubs	Play, Learn and Grow Healthy Project.	Supporting individuals to lead healthier lifestyles and discouraging people from risky behaviours
The Prince's Trust	Active Youth Project.	Supporting individuals to lead healthier lifestyles and discouraging people from risky behaviours
Breast Cancer Care	Best Foot Forward Project.	Supporting individuals to lead healthier lifestyles and discouraging people from risky behaviours

### 2. Evaluation aims and objectives

The HCWVSGS evaluation is being undertaken by Ecorys, in partnership with Swansea University. The purpose of the evaluation is to inform the future development of the HCWVSGS. The aim of the evaluation is to determine the effectiveness of the HCWVSGS. The objectives of the evaluation are to answer the following research questions:

- To what extent has the 2013-15 scheme achieved its aims and objectives as outlined above?
- What, if any, influence/ impact has the scheme had on participating organisations, projects, communities and individuals?
- What changes, if any, are required to maximise the effectiveness of the scheme?

- Has the scheme influenced the plans of participating organisations to sustain the project activities beyond the funding period?<sup>1</sup>

### 3. Evaluation methods

The methods being used by the evaluators are as follows:

- **Logic models and impact maps** were developed to better understand the theory of change underpinning the scheme and its constituent projects.
- **Strategic stakeholder interviews** were conducted at the beginning of the evaluation.
- An **Introduction to Evaluation training session** was delivered to the funded projects.
- **Survey questionnaires** were designed using standardised scales/ validated questions where possible, to support comparability between the evaluation findings and those from other health-related programmes at the final reporting stage if appropriate.
- **On-going evaluation support** is being provided for projects, to ensure they are able to systematically collect and record survey data in a format which is suitable for analysis.
- A **grant holders' seminar** was delivered in Summer 2014.
- **Project consultations** - in-depth interviews with the project managers/ grant holders were conducted in Autumn 2014 and will be repeated to inform the final report.
- **Programme manager interviews** - with the programme managers from the Welsh Government took place in March 2015 and will be repeated in early December 2015.
- **Economic analysis** - Swansea University is leading the economic analysis, which will quantify the full cost of project delivery by using a cost consequences approach.
- A **case study visit** will be conducted to each of the six projects between March - June 2015.
- Ecorys will also **interview** several **voluntary sector organisations** that have been involved in the programme as partners or benefited from training.

### 4. Initial assessment against objectives

The interim report provides an initial assessment of project progress against the objectives of the scheme, based on the project consultations and progress report analysis. A summary of key findings is provided below.

4.1 The programme has made some progress towards meeting the stated aim of the programme, which is to develop the **capacity and capability** of

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<sup>1</sup> Specification for the evaluation of the Health Challenge Wales Voluntary Sector Grant Scheme 2013-2015, published by the Welsh Government.

national voluntary organisations in Wales to promote health and wellbeing activities that have sustainability potential<sup>2</sup>, as follows:

- The scheme has helped increase **staffing capacity** in several ways. Some projects have used their grants to increase organisational capacity by funding new posts. Other organisations have used the HCWVSGS grant to secure additional hours for existing staff and ensure existing posts are utilised to full capacity. It is too early to say whether the programme has increased the capacity of national voluntary organisations in Wales in the longer term.
- The programme is also supporting national voluntary organisations to **work with other voluntary sector organisations**, helping the sector to share expertise.
- The programme is also supporting capacity building within the voluntary sector by providing **volunteering** opportunities.

4.2 The projects have made some progress towards meeting the stated objectives of the programme, as follows:

**Objective 1: To influence the conditions necessary for people to lead healthy lives and to improve health.**

- All of the projects are designed to better **inform** people by enhancing their knowledge about healthy lifestyles, and providing **information** to enable people to make healthy choices.
- Some of the projects are focused on **systems change**; working to improve the conditions and services available to support people to lead healthy lives and improve their health. **Innovation** was also evident in the training models developed by several projects, including the use of peer-to-peer support.

**Objective 2: To support individuals and groups to do what they can to improve their own health and that of their families.**

- A range of project activities are **empowering** and **enabling** individuals to improve their own health, by fostering a 'can-do' attitude amongst participants.
- None of the projects were specifically designed as **whole family interventions**. Most of the projects were designed to impact on specific individuals at risk of poor health.

**Objective 3: To communicate the 'better health' messages effectively.**

- All of the projects had identified key messages to promote 'better health'. All of the projects delivering training to staff or professionals have developed clear messages that are being communicated in their training materials.

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<sup>2</sup> It is too early to state whether these activities are sustainable; this will be explored further for the final report.

## **5. Emerging influences and impacts achieved by the programme so far**

### *5.1 Impact on participating **organisations** and projects so far*

- Impacts on partner organisations were mixed at the interim reporting stage, with some projects highlighting the need for a longer lead-in time to fully engage and impact on partner organisations. Some partner organisations will be consulted directly through the case studies to gather information on this point.
- Several projects commented that support received from the Welsh Government has impacted on the promoting organisation, particularly around marketing activities.

### *5.2 Impact on participating **communities and individuals** so far, in relation to the key themes of the Scheme as follows:*

#### **Theme 1: Promote healthier lifestyles for pregnant women, which have a positive impact on them and their family's health.**

- Only one project was commissioned to work with this target group and there is currently limited evidence of the impact of the project at the interim stage. The project is focused on improving/ safeguarding the emotional health of pregnant women. Some of the participants may already have children, and so the project may indirectly impact on their family's health, but this is not a specific objective of the programme. This will be explored through the case study research in 2015.

#### **Theme 2: Encourage and support individuals to lead healthy lifestyles by encouraging physical activity and a balanced diet, and discouraging people from risky behaviours such as smoking and excessive drinking, to decrease those at risk from cardiovascular disease (including coronary heart disease and stroke), cancer and diabetes.**

- All of the projects promote the take up of healthy lifestyles by encouraging **physical activity** and **healthy eating**, although there is less of an emphasis on this in the project focused on pregnant women.

#### **Theme 3: Support the creation of a healthy hospitals initiative or a healthy colleges and universities initiative.**

- One organisation was commissioned to work on the healthy hospitals and healthy universities themes. The project manager for both these projects reported considerable difficulties in engaging universities and hospitals to participate in the projects. The project manager mainly attributed this to gatekeeper issues within relevant organisations, and the existing workloads of relevant personnel within those organisations.

5.3 Impact on **policy** so far, in relation to the key themes of the Scheme as follows:

- Most project managers consulted in November 2014 struggled to confirm how their projects were impacting on national policy priorities for health in Wales and this could be an area for development, to help with sustainability and evidencing impact to potential funders. This area will be explored in more detail at the final reporting stage.

## 6. Early learning for future programme design

- In terms of targeting and policy priorities of the programme, all the projects felt the programme worked well as an open programme, which gave applicants' considerable scope to identify target groups and priorities for delivery.
- An over-arching success factor of the programme is its **flexibility**. A number of the projects commented that the Welsh Government were very supportive and understanding when the **focus** or **timescale** of activity needed to be altered.
- The Welsh Government has adopted a pragmatic approach to the management of the programme; addressing challenges as they emerge in collaboration with the projects. This approach has enabled projects to work in line with their original delivery plans, whilst making adaptations where prudent to maximise opportunities for effective design and delivery. Therefore a number of issues which could have presented challenges to delivery have been alleviated by effective grant management.
- The **external operating environment** has proved challenging for some of the projects working with large organisations undergoing changes and restructuring, such as parts of the NHS and universities.
- A further challenge identified in the current programme structure is the mix of **external evaluation, self-evaluation** and **national evaluation** activities.

## 7. Sustainability potential

- The main focus of the projects up to the interim reporting stage has been on set up and initial delivery. Sustainability planning was therefore in the early stages at the time of interim reporting.

## 8. Next Steps for the evaluation

- A number of limitations have been encountered through the evaluation so far. These include data limitations, data quality and capacity constraints. The evaluators have tried to address these concerns by providing administrative support for half the projects, to mitigate the risk of low response rates to the main survey. The evaluators are also providing guidance to address data quality concerns as and when these are flagged up by the projects.

- Potential overlap between local evaluation and national evaluation activity has been noted and contingencies put in place.
- Quantifying the full cost of delivery (through the cost consequences work).
- Confirming the types and levels of impact achieved compared to the project impact maps.

# 1.0 Background and introduction to the work

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## 1.1 The Health Challenge Wales Voluntary Sector Grant Scheme

The Health Challenge Wales Voluntary Sector Grant Scheme (HCWVSGS) exists to strengthen sustainable health improvement work in Wales. The grant is offered to national voluntary sector organisations to fund activities that contribute to improving health and wellbeing. The scheme complements national policy developments in health improvement in Wales<sup>3</sup>.

The aim of the HCWVSGS is to develop the capacity and capability of national voluntary sector organisations in Wales to work in partnership with the Welsh Government and other voluntary sector organisations to promote sustainable health and wellbeing through support for core and project activities. The objectives of the scheme are to:

- Influence the conditions necessary for people to lead healthy lives and to improve their health.
- Support individuals and groups to do what they can to improve their own health and that of their families.
- Promote health and wellbeing messages effectively.

To deliver these objectives, the Welsh Government sought to support projects under the following key themes:

- Promote healthier lifestyles for pregnant women, which have a positive impact on them and their family's health.
- Encourage and support individuals to lead healthy lifestyles by encouraging physical activity and a balanced diet, and discouraging people from risky behaviours, such as smoking and excessive drinking, to decrease those at risk of cardiovascular disease (including coronary heart disease and stroke), cancer and diabetes.
- Support the creation of a healthy hospitals initiative or a healthy colleges and universities initiative.
- Encourage and support employers to develop and implement workplace policies on the specific health issues addressed by the Corporate Health Standard and the Small Workplace Health Award, and/or equality issues such as domestic abuse and mental health, in order to support staff, tackle sickness absence and retain employment<sup>4</sup>.

Six projects were funded through the 2013-15 scheme as outlined in the table overleaf. A brief description of the projects is provided in Annex One.

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<sup>3</sup> Specification for the evaluation of the Health Challenge Wales Voluntary Sector Grant Scheme 2013-2015, published by the Welsh Government.

<sup>4</sup> Specification for the evaluation of the Health Challenge Wales Voluntary Sector Grant Scheme 2013-2015, published by the Welsh Government.

<b>Organisation</b>	<b>Project name</b>	<b>Key theme</b>
Mind Cymru	Perinatal Mental Health and Resilience – Early Support Project.	Promoting healthier lifestyles for pregnant women
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Breast Cancer Care	Best Foot Forward Project.	Supporting individuals to lead healthier lifestyles and discouraging people from risky behaviours

Although no projects were specifically funded under the final theme, intended to support employers to develop and implement workplace policies on the specific health issues addressed by the Corporate Health Standard and the Small Workplace Health Award, employers (Universities and Hospitals) are key partners on the two Sustrans projects. These projects are supporting these employers to address health issues identified in the Corporate Health Standard.

The projects have been awarded funding for two years with a possibility of funding for a further two years. The HCWVSGS background information document states that grants will be issued for a period of up to a maximum of four years. An initial period of two years will be offered with an option to extend by a further two years, subject to progress evidenced in the end of year review process, the Minister for Health and Social Services' further consideration and future Welsh Government budget decisions<sup>5</sup>.

## **1.2 Aims of the evaluation**

The purpose of the evaluation is to inform the future development of the HCWVSGS.

The aim of the evaluation is to determine the effectiveness of the HCWVSGS. For the purposes of the evaluation, effectiveness includes delivery, performance against aims and objectives, and influence/ impact<sup>6</sup>.

<sup>5</sup> HCWVSGS 2012 Funding Round Background Information, published 22<sup>nd</sup> February 2012

<sup>6</sup> Specification for the evaluation of the Health Challenge Wales Voluntary Sector Grant Scheme 2013-2015, published by the Welsh Government.

The objectives of the evaluation are to answer the following research questions:

- To what extent has the 2013-15 Scheme achieved its aims and objectives as outlined above?
- What, if any, influence/ impact has the scheme had on participating organisations, projects, communities and individuals?
- What changes, if any, are required to maximise the effectiveness of the scheme?
- Has the scheme influenced the plans of participating organisations to sustain the project activities beyond the funding period?<sup>7</sup>

### **1.3 Report summary**

This **interim** report reflects on progress made by the projects during their first year. Some projects have experienced delays, longer than anticipated lead-in times and complications with wider stakeholder engagement. This has reduced the level of evidence available at the interim reporting stage.

The remainder of this report is structured as follows:

- Chapter 2: Methods
- Chapter 3: Summary of work completed to date and early lessons learned
- Chapter 4: Next Steps for the evaluation
- Annex One: Project summaries
- Annex Two: Evaluation timetable
- Annex Three: Programme logic model
- Annex Four: Impact maps
- Annex Five: Project materials

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<sup>7</sup> Specification for the evaluation of the Health Challenge Wales Voluntary Sector Grant Scheme 2013-2015, published by the Welsh Government.

## 2.0 Methods

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This chapter summarises the research tasks that have been completed at the interim reporting stage and those planned for the remainder of the evaluation. Further details are provided in Chapter 4 on 'Next Steps':

### 2.1 Logic models and impact maps

Logic models and impact maps were developed to better understand the theory of change underpinning the scheme and its constituent projects. The logic models and impact maps were developed at the outset of the programme, based on a review of project documentation and in discussion with project managers, and refined following feedback from the project managers at the evaluation training day. The logic models identify broad areas the projects are expecting to impact on at the user, organisational and policy levels.

The impact maps are designed to chart project inputs and activities against their outputs and outcomes, and overall impacts achieved. Where possible, impacts will be measured through completion of the EQ-5D instrument alongside the participant survey<sup>8</sup>. Using the EQ-5D will enable the evaluation partners at Swansea University to estimate impact in terms of Quality Adjusted Life Years (QALYs). A quality-adjusted life-year takes into account both the quantity and quality of life generated by healthcare interventions. It considers life expectancy and provides a measure of the quality of the additional life-years<sup>9</sup>. The impacts of the projects will be reported in relation to their impact maps in the final report. The latest versions of the impact maps are provided in Annex Four.

### 2.2 Strategic stakeholder interviews

Strategic stakeholder interviews were conducted at the outset of the evaluation with Public Health Wales, the Welsh Government, Cardiff University and the Wales Council for Voluntary Action (WCVA) (the umbrella body for the voluntary sector in Wales). The purpose of the consultations was to gain a deeper understanding of the stakeholders' priorities and how the HCWVSGS aligns with their priorities, and to explore stakeholders' views on the types of data that could be used to inform the development of the core outcome indicators to be used in the survey questionnaires and impact maps.

### 2.3 Evaluation training session

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<sup>8</sup> The EQ-5D™ is a standardised instrument for use as a measure of health outcome. <http://www.euroqol.org/>

<sup>9</sup> *What is a QALY What is...? Series* second edition, produced by Ceri Phillips BSc(Econ) MSc(Econ) PhD Professor of Health Economics, Swansea University <http://www.medicine.ox.ac.uk/bandolier/painres/download/whatis/qaly.pdf>

An Introduction to Evaluation training session was delivered to the funded projects. This included an introduction to project/ local-level self-evaluation and an outline of the overall programme/ national-level evaluation approach. It also included initial discussions about the projects' impact maps, designed to track inputs and activities against outputs, outcomes and impacts. The evaluation training session was attended by around 12 delegates, with two staff members participating from each project.

## **2.4 Survey questionnaires**

Survey questionnaires were designed using standardised scales/ validated questions where possible, to support comparability between the evaluation findings and those from other health-related programmes at the final reporting stage if appropriate. The survey questions are grouped under the core themes of physical activity, healthy eating, smoking, alcohol, general health, emotional health and volunteering. It is recognised that the surveys are only assessing one aspect of the evaluation objectives, namely to assess the impact of activities on individuals. The surveys have been tailored for each project according to their individual aims and focus of activities. Four of the projects started using an early version of the questionnaire to pilot the data collection. These have not been analysed for the interim report. The pilot surveys contained slightly different question wording to the surveys being used for the main survey stage and so any early findings would not be completely comparable. Furthermore, only a small number of responses were received.

### **2.4.1 Data analysis**

The interval between before and after survey completion depended on the length of the intervention and ranged from one day to around six months. This will have implications for data analysis, these will be discussed in the final report.

## **2.5 On-going evaluation support**

On-going evaluation support is being provided for projects, to ensure they are able to systematically collect and record survey data in a format which is suitable for analysis. Ecorys is providing survey support for half of the projects including posting out surveys and data entry for returns. Ecorys will request monthly updates from projects from January 2015, confirming the number of survey returns received so far, to measure progress towards the survey target for the final report.

## **2.6 Grant holders' seminar**

A grant holders' seminar was delivered in Summer 2014, providing an opportunity for projects to share experiences and early lessons to inform case study design, discuss the data review and plans for economic analysis to be undertaken by the evaluators, and encourage projects to develop their plans for sustainability. A presentation on Volunteering was also delivered by Mind

Cymru. The seminar was attended by around 12 delegates, with two people attending from most of the projects. Each of the project managers attended and was accompanied by a member of their delivery staff (this included a mentor and a training manager for example).

## **2.7 Project consultations**

In-depth interviews with the project managers/ grant holders were conducted in Autumn 2014 to discuss the progress and impact of the projects at the interim stage. The project consultations explored the following areas:

- Evidence of innovative project models and testing of new approaches
- Strengths, weaknesses, enablers and barriers encountered and lessons learned
- Indications of outcomes and impact (at this stage based on Project Managers' perceptions)
- Emerging examples of promising practice - for validation through the evaluation
- Possible approaches for sustainability, policy lessons and any local dissemination activities

The project consultations will be repeated to inform the final report. These will take place in Summer 2015 with four of the projects (Prince's Trust, Mind Cymru, Clybiau Plant Cymru Kids Clubs and Breast Cancer Care). The project consultations for the two Sustrans projects will take place in early Autumn 2015 as these projects are delivering until the end of September 2015.

## **2.8 Economic analysis**

Swansea University are leading the economic analysis aspect of the evaluation. The economic analysis will quantify the full cost of project delivery by using a cost consequences approach. The importance of this aspect of the evaluation was discussed with the projects at the grant holders' seminar in June 2014. Swansea University have consulted all projects on the range of costs required to deliver their project, and this will be captured through the costs consequences work in 2015. Costs will be identified around the following categories: staff costs, volunteer costs, in-kind costs (use of delivery partners premises and facilities etc free-of-charge). All projects have confirmed that they are collecting this data. The cost consequences analysis will be provided in the final report.

## **2.9 Case studies**

A case study visit will be conducted to each of the six projects. Three of the case study visits will take place in March/ April 2015, whilst the case study visits to the Sustrans projects may take place slightly later during 2015. The Breast Cancer Care case study will take place in June 2015. Each case study will consist of one day in the field, conducting a range of interviews and focus groups with staff and participants. The exact focus of each case study visit will

be agreed with each project and the Welsh Government. An indicative outline of a case study visit is provided below:

- In-depth interview with the project manager (and project director if possible)
- In-depth paired or triad interviews with 2-3 delivery partners (or telephone interviews if they are not available on the day)
- In-depth focus group with delivery staff
- In-depth focus group with volunteers (where relevant, or telephone interviews if they are not available on the day)
- In-depth focus group with participants

## **2.10 Voluntary sector interviews**

Ecorys would also recommend interviews are undertaken with several voluntary sector organisations who have been involved in the programme as partners or benefited from training. The purpose of these telephone interviews would be to assess the impact of the programme on the wider voluntary sector. These would be undertaken at the end of the scheme.

## **2.11 Qualitative analysis**

All interviews are recorded and informed consent is ensured. All interview data is stored securely according to data protection guidelines. All qualitative data is analysed using thematic grids and findings recorded, including quotes demonstrating salient points which can be included in the final report. A budget was not included for transcribing interviews for this contract.

## **3.0 Summary of work completed to date and early lessons learned**

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This chapter summarises the work completed so far and interim findings from the project consultations around the application process and setting up the projects.

### **3.1 Impact maps**

The impact maps were updated following the project consultations in November 2014 and the latest versions are provided in Annex Four. Capturing the process of developing the impact maps and difficulties around projects agreeing to some aspects is important learning, which could inform future programme design. The original intention was for the impact maps to identify common impacts achieved across the programme that could be attributed a value, such as: value of additional QALYs due to increased physical activity and adoption of healthier lifestyles, increase in volunteering hours and their value (based on equivalent wage rates), lower incidence of depression and anxiety, and more appropriate use of health services. Impacts from the Sustrans projects may also be evident in terms of the value of higher productivity or additional days worked. It was hoped that most of the projects would be able to demonstrate direct or indirect impacts in these areas.

However as the projects took shape it became clear that it would only be possible to measure these impacts in some cases, and therefore the impact maps were updated to better reflect the nature of individual project delivery. For example, volunteering was originally included on several projects' impact maps (Sustrans) but was subsequently removed owing to technicalities around the use of the term 'volunteering'. Sustrans originally indicated that their projects would be using 'volunteers', but actually these people are participating in the projects during the time that they are paid by their employers, so they cannot be counted as volunteers. Clybiau Plant Cymru Kids Clubs also requested the removal of outcomes around 'changes in the use of GP or hospital services' and 'changes in mental wellbeing' from their impact map as these were not objectives for their project. Learning for future programme design includes the importance of providing information on the requirement to complete impact maps in the application guidance and grant holders terms and conditions.

### **3.2 Cost consequences analysis**

The data collection tools for the costs consequences analysis have been developed and discussed with projects. Data collection for this aspect is underway and will be reported in the final report in December 2015.

### **3.3 Project consultations**

Project consultations took place with each of the project managers for the six projects during November 2014. Each telephone interview took around an hour and a half and explored the following topics in detail:

- The project delivery model for each project;
- Areas of innovations within the project models and testing of new approaches;
- Strengths and weaknesses identified by the projects in developing and implementing their project;
- Barriers encountered and lessons learned by the projects in developing and implementing their project;
- Indicators of outcomes and impact and achievements so far;
- Promising practice for validation through the case studies; and
- Possible approaches for sustainability, policy lessons and any local dissemination activities.

### **3.4 Progress report analysis**

The projects provide quarterly reports to the Welsh Government in which they report on progress made towards achieving their target milestones and activities. The latest set of quarterly reports available for the interim report to analyse were those for July- September 2014.

### **3.5 Findings from the project consultations and progress report analysis**

The section explores the extent to which the HCWVSGS is making progress towards achieving its aims and objectives, based on the project consultations and progress report analysis. This is based on a qualitative assessment about *how* the programme is supporting organisations to deliver, and the range of activities being delivered through the programme:

*3.5.1 Progress towards meeting the stated aim of the programme: to develop the capacity and capability of national voluntary organisations in Wales to work in partnership with the Welsh Government and other voluntary sector organisations in promoting sustainable health and wellbeing through support for core and project activities.*

#### **Delivering new, additional activity**

The project consultations and quarterly progress reports for the period July-September 2014 indicate that the programme has made some progress towards developing the capacity and capability of national voluntary organisations in Wales to promote health and wellbeing activities that have sustainability potential<sup>10</sup>. The research took place when most projects had

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<sup>10</sup> It is too early to state whether these activities are sustainable; this will be explored further for the final report.

between six and nine months of delivery time remaining. The promoting organisations were therefore able to demonstrate that HCWVSGS funding had enabled them to develop their capacity and capability to provide health and wellbeing activities in the longer term. However the projects had not yet secured specific funds to sustain their HCWVSGS activities from other sources. Projects were in the early stages of sustainability planning, for example the Prince's Trust were exploring options to mainstream some of their HCWVSGS activities and Mind were having initial discussions with potential funders.

The HCWVSGS grant was pivotal in supporting organisations to develop their capacity and capability to develop activities that have sustainability potential. Most of the projects would not have been delivered without the funding. For example, the Sustrans Healthy Hospitals and Healthy Universities projects would not have been developed or delivered without the funding. The grant has enabled Sustrans to undertake health promotion and behaviour change work with hospitals and universities. Through this the organisation has built stronger links with the NHS and public health bodies and the higher education sector, which they would not have had the capacity to do without the funding. A minority of projects felt that they may have been able to deliver some of the activities without the programme funding, but this would have been on a much smaller scale (such as some of the Prince's Trust's Get Started activities).

A good barometer of innovation is the extent to which programme activities are **distinctive** and do not replicate existing activity. Several projects felt that their activities were enhancing existing provision, or providing a better alternative way to address a particular need. Several projects were able to identify **similar** activity taking place elsewhere, but HCWVSGS activities were complementing and diversifying the existing offer, rather than duplicating other activity. For example:

- Sustrans identified the NHS 'Making Every Contact Count' initiative to be similar to their HCWVSGS funded activity. 'Making Every Contact Count' is targeted at medical and local authority staff, but provides only a brief intervention – only 1-1.5 hours of training; it explores the same topics as the Sustrans initiatives, but also provides information on immunisation. The Sustrans projects are felt to be distinctive because they target both medical and non-medical staff including lower paid workers, such as hospital porters, catering and security staff, and university support staff. A small number of teaching staff have been involved in the healthy universities project).
- The Sustrans projects also explore the key themes in more depth than 'Making Every Contact Count'. The HCWVSGS is enabling Sustrans and its partners to deliver best practice events, involving public health managers and health boards from across Wales. For example, Ash Wales led a best practice event on smoke-free hospitals, attended by 35 delegates, which included best practice around smoking restrictions signage, and how to approach anyone found smoking on site. Another best practice event led by Sustrans focused on travel planning and promoting active travel. Several other best practice events are planned for

the Sustrans projects, for example Mind Cymru is leading an event on mental wellbeing and staff stress in January 2015, and the British Heart Foundation are delivering an event in June to showcase good practice from hospital leaders. The programme funding pays for staff time, venue and travel costs, and external speakers.

- Prince's Trust participants may have been able to try some physical activities without the HCWVSGS grant, but these were traditional sports such as football, rugby, or baseball. The HCWVSGS has enabled the Prince's Trust to consult participants about physical activities they would like to try and, as a result, develop a new offer. This includes circuit training, dance for fitness, horse riding and pole exercise (gym and aerobic activity using a pole), and is showing promise in engaging a more diverse group of participants (particularly females), than the traditional approaches. In addition, the emotional health aspect of the Prince's Trust activities is new – the organisation did not have the capacity to deliver these activities before securing the HCWVSGS grant.
- Breast Cancer Care participants may have been able to access walks through Let's Walk Cymru, but these are open to the general public and not tailored to providing support and encouragement to lymphoedema patients<sup>11</sup>.

### **Increasing capacity and capability within the voluntary sector**

The HCWVSGS has helped increase **staffing capacity** in several ways. Some projects have used their grants to increase organisational capacity by funding new posts. For example, Sustrans have appointed a part-time project manager and a full-time administrator to work across the two projects. These posts are new and would not have existed without the funding. Other organisations have used the HCWVSGS grant to secure additional hours for existing staff and ensure existing posts are utilised to full capacity. For example, HCWVSGS activities have largely been delivered to Prince's Trust Get Started participants by existing staff. It is too early to say whether these posts will continue to exist without the funding, and therefore whether the programme has increased the capacity of national voluntary organisations in Wales in the longer term. The promoting organisations will need to demonstrate impacts made by these posts in bids to external commissioners or their own organisations' senior management teams who make decisions on future resource planning. The Prince's Trust were hoping to maintain some of the increased staffing capacity in the longer term, but for most of the projects this had not been determined at the interim reporting stage. Some organisations, such as Sustrans, highlighted concerns that this was likely to lead to gaps in funding when key staff could be lost from the organisation.

The programme is also supporting national voluntary organisations to **work with other voluntary sector organisations**, helping the sector to share expertise. For example, the funding is enabling Sustrans to bring charities together to deliver training, which is a new approach. Similarly, the Prince's

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<sup>11</sup> Let's Walk Cymru is a Wales-wide walking programme designed to increase the number of people walking to improve their health and well-being <http://www.ramblers.org.uk/en/wales/what-we-do/promoting-walking/lets-walk-cymru.aspx>

Trust has used funding to buy-in delivery expertise from other organisations to deliver wellbeing activities for participants on their Fairbridge programme.

The Scheme is also supporting capacity building within the voluntary sector by providing **volunteering** opportunities. For example the Walking group leaders on the Breast Cancer Care project are volunteers, and the Prince's Trust encourages participants to consider volunteering. Mind is also involving university students as volunteers to help deliver their project.

Impacts in this area is one possible focus for the case studies planned to take place in 2015. The focus of these is yet to be agreed.

*3.5.2 Progress towards meeting the stated objectives of the programme. Exploring how each project is supporting the key components of the programme, namely:*

**To influence the conditions necessary for people to lead healthy lives and to improve health.**

All of the projects are designed to better **inform** people by enhancing their knowledge about healthy lifestyles, and providing **information** to enable people to make healthy choices. For example, Kids' Clubs Cymru is training childcare workers to raise children's awareness of healthy eating and physical activity, and to help them understand the dangers of smoking and alcohol consumption.

Some of the projects are focused on **systems change**; working to improve the conditions and services available to support people to lead healthy lives and improve their health. For example, the Sustrans healthy hospitals and healthy universities projects are delivering **cascade training**<sup>12</sup>, to increase the reach of their projects. Both these projects are training 'Live Well leaders' to act as agents of change within their working or studying environment. The impact of the Live Well leaders is the focus of the local project evaluations, and it is expected that the findings from these external evaluations will be made available to allow key findings to be incorporated into the final national evaluation report.

The Mind Cymru project is also delivering a systems change approach by developing/ enhancing services for pregnant women whose emotional health may be at risk during or after pregnancy. The aim of the project is to develop services that address a gap in NHS provision and can be mainstreamed in the future.

**Innovation** was also evident in the training models developed by several projects. These innovations were designed to improve and sustain the conditions necessary for people to lead healthy lives and improve their health. For example, Sustrans had incorporated peer-to-peer support within their training model. Hospitals and Universities were encouraged to send several

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<sup>12</sup> Cascade training involves a group of staff being trained directly by the project, who each then work with colleagues in their own organisations, sharing the training approaches to promote healthy lifestyles/ activities.

members of the same team on the training (domestic and security staff etc) to support their implementation of the training into their own workplace and to ensure participants do not feel they are working in isolation. Early indications from the project consultations with project managers suggest that staff motivation is higher as a result of the peer-to-peer training. This will be explored further where possible through the case study research.

It is also worth noting that the cascade training approach can support **sustainability**, as it equips more people with the skills and knowledge to take activities forward in the future. For example, the Sustrans cascade training model ensures the scheme is not reliant on one individual in each setting. The team ethos is promoted at the training, and participants share contact details and are encouraged to stay in touch. The aim is to empower more people to take the learning forward in their future roles. However, it is too early to determine whether this approach actually results in the longer term sustainability of activities.

Mind Cymru's training model is also designed to support sustainability. The Mind Cymru one day training programme has been delivered to 26 support workers from different organisations so far, including workers from Flying Start, Home Start, and Advance Brighter Futures. This supports sustainability as these workers are able to apply the learning within their mainstream posts. Similarly the Clybiau Plant Cymru Kids' Clubs training model supports sustainability by training childcare workers to promote healthy lifestyles to children.

All of the projects promote the take up of healthy lifestyles by encouraging physical activity and a balanced diet, although there is relatively less emphasis on this theme in the Mind Cymru project. Mind Cymru's project is focused on promoting emotional health, although it does make the connection that a healthy diet and physical activity can support emotional wellbeing, by promoting the New Economic Foundation's 'Five Ways to Wellbeing'<sup>13</sup>.

### **To support individuals and groups to do what they can to improve their own health and that of their families.**

According to the project consultations with project managers, a range of project activities are **empowering** and **enabling** individuals to improve their own health. For example, the Princes Trust is working with young people who do not have a strong network of family or friends, exploring the benefits of a healthy lifestyle through exercise and healthy eating. The programme fosters a 'can-do' attitude in participants, for example by emphasising how healthy meals can be easy to make on a limited budget. Some projects were also specifically designed to **empower** individuals to support others to improve their own health. For example, Sustrans' trainees are known as 'Live Well Leaders', and tasked with promoting healthy lifestyles to their colleagues. The Sustrans' Healthy Universities' project is training Hall Wardens to promote healthy lifestyles. Prior to this, Hall Wardens were only trained in suicide

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<sup>13</sup> The Five Ways to Wellbeing are a set of evidence-based actions which promote people's wellbeing. They are: Connect, Be Active, Take Notice, Keep Learning and Give.  
<http://www.neweconomics.org/projects/entry/five-ways-to-well-being>

prevention and health and safety. Clybiau Plant Cymru Kids' Club project is designed to instil an understanding of healthy lifestyles in children, supporting them to make healthy choices as they grow up. Project managers stated that their projects empowered and enabled people to change their behaviour to improve their own health, and felt they could see change in those directly participating in the training. However this will need to be validated through the case studies and progress reports during 2015.

None of the projects were specifically designed as **whole family interventions**. Most of the projects were designed to impact on specific individuals at risk of poor health. For example, approximately two fifths (41%) of participants on the Prince's Trust projects are homeless/ living in temporary accommodation and the majority do not have a stable family support network.

The Clybiau Plant Cymru Kids' Club project is working with children and so it is possible that there may be some transfer of health advice from children to parents or siblings, but this is not an expressed aim of the project. Anecdotally the project can cite examples of children educating their parents about healthy eating. For example, one participant introduced their parent to a vegetable they had learnt about through the project and asked if they could buy it to try at home. Similarly, whilst the Mind Cymru project is designed to improve the emotional health of pregnant women, it may contribute indirectly to improving the health of participants' families, if the participant adopts healthier lifestyle practices at home. However, as this is not part of the project design it is not being monitored by the project.

Although the Sustrans training does not specifically explore how individuals can improve the health of their family, it provides general information which participants could apply to their home environment. This potential for wider effects will be explored through some of the case study research during 2015, for example if parents agree to be interviewed as part of the Clybiau Plant Cymru Kids' Club case study, and if Sustrans and Mind participants are prepared to reflect on behaviour change within the family through the case study research.

#### **To communicate the 'better health' messages effectively.**

All of the projects had identified key messages to promote 'better health'. All of the projects delivering training to staff or professionals have developed clear messages that are being communicated in their training materials (Mind Cymru, Clybiau Plant Cymru Kids' Clubs, and the two Sustrans projects). The Prince's Trust was also promoting clear health and wellbeing messages to its participants. The extent to which 'better health' messages are being communicated effectively to participants will be verified through the case study visits in 2015.

Projects are using clear health and wellbeing messages to support recruitment to their programmes (Breast Cancer Care, Mind Cymru and Clybiau Plant Cymru Kids' Clubs in particular). A good example is the postcards designed by Mind Cymru, which can be found in Annex Five. The extent to which these 'better health' messages have been communicated

effectively will be explored through the project consultations and case study research scheduled for 2015.

### **3.6 Emerging influences and impacts achieved by the programme so far**

This section explores the emerging influences and impacts achieved by the programme so far at three levels: on participating organisations and projects; on participating communities and individuals, and on policy.

#### *3.6.1 Impact on participating organisations and projects so far*

The project managers consulted through the project consultations in November 2014 felt the HCWVSGS was impacting on organisational development within the participating organisations, although the programme was at too early a stage to confirm this at the interim reporting stage. The HCWVSGS grant has increased **staffing capacity and capabilities** within the promoting organisations, and projects hoped that some of this would be maintained post-HCWVSGS funding, but could not confirm this at the interim reporting stage. For example, Clybiau Plant Cymru Kids' Clubs has been able to promote one of its key workers to the role of West-Wales Team Leader, which will help to sustain some of the activities as it is a permanent position. Clybiau Plant Cymru Kids' Clubs is confident that it will be able to maintain the increased staffing capacity developed with the HCWVSGS grant through its other organisational activities.

The HCWVSGS has also enabled organisations to employ additional project management, delivery and administrative staff (Sustrans), and ensure existing staff are used to full capacity (Prince's Trust). The impact of the programme on increasing staffing capacity will be measured in the final report through evidence from the final project progress reports and project consultations. It is hoped that by this stage some projects will have secured alternative funding sources to sustain staff funded through HCWVSGS, or will have mainstreaming plans in place.

Impacts on partner organisations were mixed at the interim reporting stage. A number of organisations such as ASH Wales are involved in several projects (Sustrans and Clybiau Plant Cymru Kids' Clubs), and it is hoped that their staff will go on to utilise the training delivered through the HCWVSGS in their own work in the future<sup>14</sup>. However, projects working with NHS bodies and universities have found a long lead-in time is required to impact on participating organisations. For example, a key objective of the Sustrans projects is to generate a positive impact on the hospitals and universities participating in their projects, making them healthier environments to work in. Given the delays experienced by the Sustrans projects there is limited evidence of impact on partner organisations at this stage. This will be explored through the case study research during 2015.

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<sup>14</sup> For example. ASH Wales delivered training on smoke-free hospitals for Sustrans Healthy Hospitals project, and tailored awareness raising materials and activities on the dangers of smoking for children aged 4-14, for delivery on the Clybiau Plant Cymru Kids' Clubs project.

Several projects commented that support received from the Welsh Government has impacted on the promoting organisation. For example, the Prince's Trust noted that they had received useful **marketing** advice that had helped ensure their marketing materials appealed to both males and females. Mind Cymru has also developed a range of online training and promotion materials with the support of the grant, which will support sustainability.

*3.6.2 Impact on participating **communities and individuals** so far, in relation to the key themes of the Scheme (that the projects bid against) and which are aligned to Programme for Government commitments as follows:*

**Promote healthier lifestyles for pregnant women, which have a positive impact on them and their family's health.**

The only project commissioned to work with this target group is the *Perinatal Mental Health and Resilience – Early Support* project delivered by Mind Cymru. There is currently limited evidence of the impact of the project at the interim stage. Statistics provided by Mind Cymru demonstrate the project is generating considerable interest amongst the target group, with 273 beneficiaries conducting sessions on the website; with 174 of these users averaging three-and-a-half minutes each on the website<sup>15</sup>. However, Mind Cymru has collected a number of participant case studies and digital stories which highlight the benefits of participation to individuals. These will be used to provide supplementary information for the final evaluation report.

The Mind Cymru project is focused on improving/ safeguarding the emotional health of pregnant women. Some of the participants may already have children, and so the project may indirectly impact on their family's health, but this is not a specific objective of the programme. This will be explored through the case study research in 2015.

**Encourage and support individuals to lead healthy lifestyles by encouraging physical activity and a balanced diet, and discouraging people from risky behaviours such as smoking and excessive drinking, to decrease those at risk from cardiovascular disease (including coronary heart disease and stroke), cancer and diabetes.**

All of the projects promote the take up of healthy lifestyles by encouraging **physical activity** and **healthy eating**, although, as noted, there is less of an emphasis on this in the Mind Cymru project. Impacts in this area will be assessed in the final report through an assessment of evidence generated from the case studies, project consultations, progress reports and survey returns completed during 2015.

**Support the creation of a healthy hospitals initiative or a healthy colleges and universities initiative**

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<sup>15</sup> Latest figures available up to 16<sup>th</sup> September 2014. These users are viewing a range of online materials produced by the project during their online session.

Sustrans was the only organisation commissioned to work on the healthy hospitals and healthy universities themes. The project manager for both these projects reported considerable difficulties in engaging universities and hospitals to participate in the project. The project manager mainly attributed this to gatekeeper issues within relevant organisations, and the existing workloads of relevant personnel within those organisations. This included universities and hospitals already being committed to the delivery of a wide range of programmes for different funders and so Sustrans found initial engagement challenging. Both these projects experienced considerable delays as a result. The two Sustrans projects are running until September 2015, in line with their Grant Agreements. It is therefore too early to report on impacts achieved by Sustrans in creating healthy hospitals and healthy universities initiatives at the interim reporting stage. Work is now progressing well on both projects and impacts will be explored at the final reporting stage.

However, some evidence of **outcomes for individuals** is available from Sustrans' local interim evaluation of the Live Well leaders being trained through both projects. The local evaluation analysed before and after surveys completed on the training day. 70% of respondents reported that they felt more confident talking about healthy lifestyles after the training<sup>16</sup>. The Sustrans local evaluators plan to hold participant focus groups to explore whether behaviour change has occurred as a result of the training<sup>17</sup>. Thus the Sustrans local evaluation should provide a valuable source of evidence on outcomes for individuals from the Sustrans projects and key findings can be incorporated into the national evaluation report.

### *3.6.3 Impact on **policy** so far, in relation to the key themes of the Scheme (that the projects bid against) and which are aligned to Programme for Government commitments as follows:*

Most project managers consulted through the project consultations in November 2014 struggled to confirm how their projects were impacting on national policy priorities for health in Wales and this could be an area for development, to help with sustainability and evidencing impact to potential funders. This area will be explored in more detail at the final reporting stage by assessing evidence from the progress reports, case studies and project consultations completed during 2015. The two Sustrans projects are also being assessed through a local evaluation and this will be reviewed to inform the final report.

As noted above, Mind Cymru is the only project specifically supporting pregnant women. The Mind Cymru project has made good progress towards impacting on policy. For example, the project presented at a Maternal Mental

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<sup>16</sup> The Sustrans local evaluation report is based on responses from Live Well Leaders from three hospital settings who completed a registration survey at the start (n=35) and at the end (n=36) of the induction training day. *Live Well, Work Well Interim Evaluation Report*, British Heart Foundation National Centre for Physical Activity and Health, School of Sport, Exercise and Health Sciences, Loughborough University, August 2014

<sup>17</sup> The focus groups are planned for Spring 2015.

Health Alliance (MMHA)<sup>18</sup> event at the Department of Health, as part of the Maternal Mental Health - *Everyone's Business* campaign<sup>19</sup>. Mind Cymru were the only Welsh representatives at the event, which reviewed and refined the MMHA Theory of Change and developed Campaign indicators to measure change. Mind Cymru are also presenting a session on *Managing Employees with Perinatal Mental Illness – What You Need to Know*, at the national Health and Wellbeing at Work conference on 3<sup>rd</sup> March 2015<sup>20</sup>. Mind Cymru has impacted on the delivery of perinatal support more widely, with a number of local Health Boards in Wales and England expressing an interest in commissioning the support model in the future. Mind Cymru has also undertaken a telephone questionnaire with a sample of GP surgeries and hopes to impact on local health policy. The extent to which the Mind Cymru project has impacted on local health policy will be assessed for the final report, through the project consultations and case studies taking place during 2015.

At the interim stage it is too early to determine whether any of the projects have informed the development of policy at the national or regional levels in relation to physical activity, healthy eating, smoking cessation and alcohol reduction. However, the Prince's Trust has generated stakeholder interest in its healthy eating activities. The project hosted stakeholder community engagement events, combining healthy meals prepared by participants in 'Heaven's Kitchen' with murder mystery events. Local participants included the Assistant Police and Crime Commissioner who provided very positive feedback.

The Sustrans project manager commented that he is confident that the two Sustrans projects are contributing to national policy priorities around reducing smoking, increasing physical activity, and increasing fruit and vegetable consumption, but evidence will be required to demonstrate this for the final report. The Sustrans projects are also supporting the implementation of the Active Travel Bill, as the projects are encouraging Health Boards to consider how people travel, and are working with the Health Boards to promote active travel, particularly walking and cycling. Sustrans also held an Active Travel Challenge for the universities involved in the project during October/November 2014<sup>21</sup>.

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<sup>18</sup> The Maternal Mental Health Alliance (MMHA) is a coalition of UK organisations committed to improving the mental health and wellbeing of women and their children in pregnancy and the first postnatal year

<sup>19</sup> The Maternal Mental Health Alliance's new campaign – *Everyone's Business* – calls for all women throughout the UK who experience perinatal mental health problems to receive the care they and their families need, wherever and whenever they need it.

<sup>20</sup> Further details on the programme can be found on the conference website: <http://sterlingevents.co.uk/programme/articles/mental-health-190.html> and <http://sterlingevents.co.uk/programme.html>

<sup>21</sup> Sustrans ran a University Online Travel Challenge during October 2014. Leaders helped to promote this and over 600 staff registered to take part. 9000 sustainable journeys were logged during October 2014. Bangor University had the highest participation rate at the end of the Challenge.

Sustrans also felt their projects were impacting on national policy targets around reducing sickness absence, but felt it would be difficult to measure the impact of their projects on this target. The Sustrans interventions are targeting lower paid staff within hospitals and universities, as higher absence rates are reported for this group. The Sustrans project manager has attended an NHS Health and Well-being Project Group focused on this theme. Sustrans has also attended 'Every Contact Counts' meetings for hospital staff.

### **3.7 Early learning for future programme design**

This section explores the overall targeting and policy priorities of the programme, and success factors and challenges associated with delivery, to identify if any changes are required to maximise the effectiveness of the scheme.

#### *3.7.1 Overall targeting and policy priorities of the programme*

All the projects felt the programme worked well as an open programme, which gave applicants' considerable scope to identify target groups and priorities for delivery. However, one stakeholder felt strongly that the programme should be more targeted on specific health conditions and gaps in NHS health provision.

#### *3.7.2 Success factors*

An over-arching success factor of the programme is its **flexibility**. A number of the projects commented that the Welsh Government were very supportive and understanding when the **focus** or **timescale** of activity needed to be altered. This approach enabled the projects to deliver broadly in line with their delivery plans, whilst making necessary changes to capitalise on opportunities presented by the grant and as developments emerged in their sector. For example:

- Several projects altered the **focus of activity** in response to beneficiary need. For example, the Prince's Trust have increased activities around emotional health and drugs awareness and reduced the emphasis on smoking cessation, as this was seen as less of a health concern by participants.
- It took longer for several projects to engage external audiences/ project partners and felt supported in this process by the Welsh Government. For example, the Sustrans projects highlighted the time it took to engage hospitals and universities. Similarly Breast Cancer Care had to re-weight project delivery more towards Year 2 than was originally scheduled, as a result of delays caused by NHS restructuring.
- Projects felt well supported by the Welsh Government to build on efficiencies developed in the first year of delivery to maximise the reach or impact of their project. For example, the Prince's Trust are running an additional Get Started course in Year 2 using monies from an identified underspend. These considerations highlight the value of ensuring flexibility in programme design.

### 3.7.3 Challenges

The Welsh Government has adopted a pragmatic approach to the management of the programme; addressing challenges as they emerge in collaboration with the projects. This approach has enabled projects to work in line with their original delivery plans, whilst making adaptations where prudent to maximise opportunities for effective design and delivery. Therefore a number of issues which could have presented challenges to delivery have been alleviated by effective grant management. Allowing flexibilities within the grant management process has produced a number of success factors which are highlighted in section 3.7.2 above.

The **external operating environment** has proved challenging for some of the projects; most notably Sustrans and Breast Cancer Care. The project managers felt that these challenges could not have been anticipated or avoided. The main lesson for future programme design, in order to maximise the effectiveness of the scheme, is therefore to support the promoting organisation in their communications with external agencies. For example, the funder could add weight to grant holders' communications with health boards, hospitals and universities, emphasising the importance of the relevant project and its potential for addressing gaps in national health priorities. This finding also suggests that grant holders need to understand the importance of prior planning and establishing external links before the project starts.

A further challenge identified in the current programme structure is the mix of **external evaluation, self-evaluation** and **national evaluation** activities. The challenge is compounded by the different timescales under which these activities were agreed. For example, most of the projects built some self-evaluation tasks into their monitoring and project management functions, but did not build capacity into their grant applications for liaising with national evaluators. Similarly Sustrans identified a budget in their grant application for external evaluation activity, but did not appreciate they would also need to work with the national evaluators. However the expectation that projects would need to liaise with the national evaluators was built into the background documentation for the HCWVSGS. Several lessons have been identified to inform future programme design- the scope and scale of the national evaluation should be clearly specified in the application process for potential grant holders. This should include providing guidance on building in staff time to liaise with the national evaluators, and administrative time to support the national evaluation, such as for administering surveys and data collection. For example, an expectation could be included in the application guidance that project managers' ringfence around 5 days for collaborating with the national evaluators over the course of the evaluation. This approach would help maximise the effectiveness of the scheme by ensuring all evaluation activity is well coordinated and will generate a clear picture of programme impact.

A further consideration for future programme design could be building in the capacity and expectation amongst grant holders to **respond to interim evaluation** findings. This could encourage grant holders to engage with

interim evaluation findings and adapt activities where the evaluation indicates improvements could be made to strengthen activities and potential outcomes/ impacts. However the evaluation findings would need to be viewed with caution, as it may be necessary to amend delivery plans in response to emerging group needs or changes in the external operating environment.

### **3.8 Sustainability potential**

This section explores whether the HCWVSGS has influenced the plans of participating organisations to sustain the project activities beyond the funding period.

#### **3.8.1 Sustainability planning**

The main focus of the projects up to the interim reporting stage has been on set up and initial delivery. Sustainability planning was therefore in the early stages at the time of interim reporting. Projects were planning for sustainability in several ways, including by up-skilling current staff to help sustain activities in-house and by starting to make the case to external funders to sustain activities in the future. At the interim reporting stage, some of the projects had made more progress with their sustainability planning than others.

##### **Up-skilling current staff to help sustain activities in-house**

Most projects had undertaken work to up-skill current staff and felt that this would support sustainability. For example, Clybiau Plant Cymru Kids' Clubs promoted one of its key workers to the role of West-Wales Team Leader, which will help to sustain some of the activities by sharing learning. Clybiau Plant Cymru Kids' Clubs is confident that it will be able to maintain the increased staffing capacity developed with the HCWVSGS grant to support its other organisational activities through alternative funding. The Prince's Trust utilised existing staff to deliver HCWVSGS activities on their Get Started programme, helping to diversify their existing skills base by providing more wellbeing activities.

##### **Making the case to external funders to sustain activities in the future**

As might be expected, the projects that had experienced delays with set up and delivery had undertaken less sustainability planning. For example, Sustrans reported that both the Healthy Hospitals and Healthy Universities initiatives were only really becoming established at the interim reporting stage. The Prince's Trust reported that they have had some initial discussions about sustainability but were really focused on delivery at this stage.

Some projects viewed sustainability planning as an activity for 2015. Sustrans intend to hold planning meetings with the Health Boards/ Universities and their delivery partners to discuss their sustainability options in 2015. Breast Cancer Care has also experienced delays to project delivery as a result of restructuring within the NHS and will therefore seek to consolidate links in 2015 as part of their sustainability planning.

### 3.8.2 *Mainstreaming*

The Mind Cymru project is addressing a gap in NHS perinatal support and has held initial, early talks with a number of Health Boards which may be interested in mainstreaming the activities in their areas.

Sustrans reported that they will ideally be looking to mainstream some of their activities within the hospital and university settings once the HCWVSGS grant has expired. However, they felt that it was too early to gain the commitment of participating hospitals and universities to mainstream the activities at this stage, owing to limited evidence of impact. The Prince's Trust was also hoping to mainstream some of their activities once the HCWVSGS grant has expired.

### 3.8.3 *Levering in funding*

Most of the projects plan to lever in funding from alternative sources to sustain elements of their project. One organisation had already achieved success in this area - Breast Cancer Care had secured funding from the Health and Social Care Volunteering Fund. This new volunteering project is building on the work of the HCWVSGS project by applying learning from its volunteering approach to a different setting. Clybiau Plant Cymru Kids' Clubs intend to monitor any new initiatives launched by the Welsh Government to see if their HCWVSGS activities could be taken forward through this route.

Mind Cymru has received interest from Edinburgh University which is keen to develop a similar project on infant health. This may provide an opportunity for building on the HCWVSGS work but this is unconfirmed at this stage.

Some national charities benefit from the work of dedicated fundraising teams. For example, the Prince's Trust has dedicated fundraising staff targeting the public and private sectors who are currently seeking follow-on funding opportunities for their HCWVSGS projects.

### 3.8.4 *Alternative options*

None of the projects were considering alternative options, such as social investment, social enterprise or trading arms at this stage. However, if Clybiau Plant Cymru Kids' Clubs do not secure continuation funding from the HCWVSGS, they intend to sustain activities by selling their training course. Clybiau Plant Cymru Kids' Clubs have sold other training courses in the past. Mind Cymru may also consider exploring the opportunity to generate income by training support workers from a number of national programmes in perinatal support, such as Flying Start.

Most of the project managers commented in the project consultations that they are hopeful they will receive extension funding from the HCWVSGS for a further two years (2015-17).

### 3.8.5 *Dissemination activities*

Most of the projects have undertaken limited dissemination activity to date, although promotion work has taken place to support recruitment on all projects. For example, Clybiau Plant Cymru Kids Clubs and Mind Cymru had produced flyers and leaflets to publicise their programmes. Examples are provided in Annex Five. The Mind Cymru project has been the most active in terms of dissemination activity.

## 4.0 Next Steps for the evaluation

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This chapter outlines the next steps for the evaluation, summarising the work that is planned and how it will answer the research questions. To inform the next steps, we have reviewed the limitations of the evaluation methodology so far to ensure the work programme going forward will generate robust evidence to inform the final report.

### 4.1 Limitations

A number of limitations have been encountered through the evaluation so far. These include:

- **Data limitations** –The projects struggled to capture comprehensive data for the quantitative pilot surveys. A target of 45 respondents per sub-set has been set for the main survey but some projects may struggle to complete this number through the main survey stage<sup>22</sup>. Ecorys will provide administrative support for half the projects (Sustrans and Clybiau Plant Cymru Kids' Clubs) to mitigate the risk of low response rates to the main survey.
- **Data quality** – Several projects highlighted concerns around survey completion, owing to low literacy levels and resistance to complete forms amongst participants. For example, some participants from one project found it difficult to indicate the strength of their views. A minority of responses were invalid/ illegible, for example respondents writing a remark rather than selecting a number from a scale or ticking a box, or conversely, selecting multiple responses when asked to only tick or circle one option. As with all self-reporting approaches there is some risk of response bias. Ecorys is providing guidance to address data quality concerns as and when these are flagged up by the projects.
- **Capacity constraints** – Capacity constraints have significantly affected the ability of at least half the projects to complete tasks for the national evaluation. For example, Ecorys had to follow up participants' to complete the after surveys for both the Sustrans projects for the pilot stage. Contingencies for data collection have been put in place for the main survey stage, such as Sustrans project staff asking project participants to confidentially complete before and after surveys whilst at meetings and hand them to staff. Ecorys is providing administrative support to Clybiau Plant Cymru Kids Clubs to boost their survey response rate by posting out surveys, and completing data collection.

### Research burden

Several projects were concerned about the level of information required to monitor and evaluate the programme. Two main issues were reported:

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<sup>22</sup> For this evaluation a sub-set is defined by participant type ie: volunteers/ students/ staff/ pregnant women etc.

- Some promoters felt the **national evaluation** requirements should have been set out in the application process for grant holders. One project commented that as this was not apparent at the tendering stage, they had not included staff costs for liaising with evaluators and this had created capacity constraints as highlighted above. As above, further information on national evaluation requirements could be provided in future programme design documents.
- Potential overlap between **local evaluation and national evaluation** activity has been noted and contingencies put in place. Two of the projects (Sustrans Healthy Hospitals and Sustrans Healthy Universities) are being **externally evaluated**. The remaining projects are carrying out a range of **self-evaluation** activities, such as participant case studies (Mind Cymru). Ecorys has consulted the projects to confirm the scope and scale of their external evaluation/ self-evaluation activities and will ensure the national evaluation complements these activities. Duplication will not therefore arise between external evaluation, self-evaluation and national evaluation activities. Where possible, outputs from external evaluation and self-evaluation activities can be used to inform the final national evaluation report.

#### 4.2 Areas for further investigation through the evaluation

A range of topics have been identified through the research so far for further investigation. Some areas will be explored across the programme evaluation, and some are more specific to individual project activities.

Areas for further investigation across the programme:

- Assessing overall impact on the HCWVSGS aims and objectives through participant surveys, costs consequences calculations, assessment of project progress reports, project consultations and qualitative case study work with the projects.
- Quantifying the full cost of delivery (through the cost consequences work). The importance of this aspect of the evaluation was discussed with the projects at the grant holders' seminar in June 2014. Swansea University have consulted all projects on the range of costs required to deliver their project, and this will be captured through the costs consequences work in 2015. Costs will be identified around the following categories: staff costs, volunteer costs, in-kind costs (use of delivery partners premises and facilities etc free-of-charge).
- Confirming the types and levels of impact achieved compared to the project impact maps (provided in Annex Four). Where possible, proxy values will be attributed to the impacts achieved by the projects, for example the value of volunteer time or value of additional QALYs due to the adoption of healthier lifestyles. The final report will assess which impacts have been achieved by the projects and which have not, based on the impact maps.

Specific areas for further investigation in relation to particular projects:

- Clybiau Plant Cymru Kids Clubs – the impact on children and any secondary impacts on the wider family.
- Mind Cymru – take-up of the model by local Health Boards in Wales (and England) and secondary impacts on the wider family.
- Breast Cancer Care – the evolving relationship with new NHS structures and the embedding of referral routes to the Best Foot Forward programme.
- Prince's Trust – impact of the second year on both genders, given that participation in Year 1 was skewed towards males.
- Sustrans Healthy Hospitals and Healthy Universities– consolidating the delivery partnership and impact on participating organisations and the wider families of participants.

### **4.3 Next Steps**

The framework overleaf has been designed to structure the remainder of the evaluation. The framework explains how the research methods will generate the evidence required to answer the research questions. This includes several additional tasks such as interviews with the programme managers to determine the impact and effectiveness of the programme against national policy drivers and expectations for implementation, and interviews with wider representatives from the voluntary sector who are involved in the projects in some way; either through delivery or receiving training. The timetable for the evaluation is provided in Annex Two, and shows the phasing of the evaluation tasks for the remainder of the evaluation.

## Health Challenge Wales Voluntary Sector Grant Scheme 2013-15 evaluation framework

Evaluation questions	Sub-questions	Indicators of success	Evidence source
<p><b>Evaluation question 1</b> To what extent has the 2013-15 Scheme achieved its aims and objectives?</p>	<p>Assess the overall aim of the Scheme:</p> <ol style="list-style-type: none"> <li>1. How effectively has the Scheme developed the capacity and capability of national voluntary sector organisations in Wales to work in partnership with the Welsh Government and other voluntary sector organisations to promote sustainable health and wellbeing through support for core and project activities?</li> </ol> <p>Assess the objectives of the Scheme:</p> <ol style="list-style-type: none"> <li>2. Influence the conditions necessary for people to lead healthy lives and to improve their health.</li> <li>3. Support individuals and groups to do what they can to improve their own health and that of their families.</li> <li>4. Promote health and wellbeing messages effectively.</li> </ol>	<p>Increased capacity and capability of the voluntary sector measured by:</p> <ul style="list-style-type: none"> <li>- Staff up-skilled in delivering health and wellbeing interventions</li> <li>- Increased staff capacity that will be sustained through other sources</li> <li>- (New) partnerships between grant recipient organisations and other voluntary organisations and the extent to which these will be sustained</li> </ul> <p>Proportion of interventions reaching stated outputs/ outcomes reached (quantitative)</p> <p><i>It was agreed at the client meeting on 14/01/15 that evaluation question 1 will report on <b>totals</b> across the schemes as a whole, ie:</i></p> <ul style="list-style-type: none"> <li>- <i>Total number of interventions delivered</i></li> <li>- <i>Total number of participants recruited to attend training across the scheme</i></li> <li>- <i>Retention rates/ drop-out rates (projects will need to define this as it could vary by project).</i></li> <li>- <i>Completion rates - total number of participants who completed a full training course</i></li> </ul> <p><i>Projects will need to provide these figures directly to the evaluation team. It was agreed at the client meeting on 14/01/15 that these should be provided by the projects <b>via email</b>. If possible figures will be collected for end of Year 1 and end of Year 2.</i></p>	<p>Cost consequences analysis Quarterly progress reports Wider voluntary sector interviews Project consultations Case studies Grant holders meetings Impact maps</p> <p>Case studies Cost consequences analysis Quarterly progress reports Wider voluntary sector interviews Project consultations Grant holders meetings Impact maps Survey analysis</p> <p>Project consultations Wider voluntary sector interviews Case studies (beneficiary focus groups) Survey analysis Consultations with fund holders</p>

Evaluation questions	Sub-questions	Indicators of success	Evidence source
		<p>Reasons for exceeding / not achieving targets, success factors, barriers (qualitative)  <i>The overall impact of the interventions on behaviour change will also be measured through the survey responses. The understanding of the factors resulting in behaviour change will be explored through the qualitative fieldwork (case studies). Evaluation question 1 will report on overall trends in behaviour changes across the scheme. It will also explore participants' understanding of key messages.</i></p> <p>Evidence of specific messages and their take-up by beneficiaries, funders, policy makers</p>	
<p><b>Evaluation question 2</b>            What, if any, influence/impact has the Scheme had on participating organisations, projects, communities and individuals?</p>	<p><b>Assess the impact of the Scheme on participating communities and individuals</b>, in relation to the key themes of the Scheme (that the projects bid against) and which are aligned to Programme for Government commitments as follows:            - Promote healthier lifestyles for pregnant women, which have a positive impact on them and their family's health.            - Encourage and support individuals to lead healthy lifestyles by encouraging physical activity and a balanced diet, and discouraging people from risky behaviours such as smoking and excessive drinking, to decrease those at risk from cardiovascular disease (including coronary heart disease and stroke), cancer and diabetes. - Support the creation of a healthy hospitals initiative or a healthy colleges and universities initiative.</p>	<p>Proportion of stated outcomes reached (quantitative)  <i>It was agreed at the client meeting on 14/1/15 that evaluation question 2 will report on impacts by <b>individual theme and project</b> where relevant.</i></p> <p>Reasons for exceeding / not achieving targets, success factors, barriers (qualitative)  <i>The impact of different themes and projects on behaviour change will also be measured through the survey responses. The understanding of the factors resulting in behaviour change will be explored through the qualitative fieldwork (case studies). Evaluation question 2 will report on trends in behaviour changes by theme. It will also explore participants' understanding of key messages.</i></p>	<p><b>Impact on organisations and projects</b></p> <ul style="list-style-type: none"> <li>- Quarterly progress reports</li> <li>- Cost consequences analysis</li> <li>- Project consultations</li> <li>- Case studies</li> <li>- Grant holders meetings</li> <li>- Impact maps</li> </ul> <p><b>Impact on communities</b></p> <ul style="list-style-type: none"> <li>- Wider voluntary sector interviews</li> <li>- Case studies</li> <li>- Quarterly progress reports</li> <li>- Project consultations</li> <li>- Grant holders meetings</li> </ul>

Evaluation questions	Sub-questions	Indicators of success	Evidence source
	<p><b>Assess the impact of the Scheme on policy</b>, in relation to the key themes of the Scheme (that the projects bid against) and which are aligned to Programme for Government commitments as follows:</p> <ul style="list-style-type: none"> <li>- Promote healthier lifestyles for pregnant women, which have a positive impact on them and their family's health.</li> <li>- Encourage and support individuals to lead healthy lifestyles by encouraging physical activity and a balanced diet, and discouraging people from risky behaviours such as smoking and excessive drinking, to decrease those at risk from cardiovascular disease (including coronary heart disease and stroke), cancer and diabetes.</li> <li>- Support the creation of a healthy hospitals initiative or a healthy colleges and universities initiative.</li> </ul>	<p>Examples where linked /referenced in local / regional/ national strategies</p> <p>Examples of behaviour change in participants</p> <p>Evidence of impact on organisational development and planning at a strategic level</p> <p>Examples of approaches taken on in communities.</p> <p>Examples of interventions that will be sustained in communities through alternative funding sources or mainstreaming.</p> <p>Examples of commitment or embedded in local/ regional/ national strategic context.</p>	<p><b>Impact on individuals</b></p> <ul style="list-style-type: none"> <li>- Survey analysis</li> <li>- Case studies</li> <li>- Quarterly progress reports</li> <li>- Project consultations</li> <li>- Grant holders meetings</li> <li>- Impact maps</li> <li>- Projects self/ local evaluations</li> </ul>
<p><b>Evaluation question 3</b> What changes, if any, are required to maximise the effectiveness of the Scheme?</p>	<p>Could any changes be made to inform future programme targeting or programme design?</p>	<p>Success factors that have affected the extent to which projects have been delivered in line with their delivery plans</p> <p>Challenges that have affected the extent to which projects have been delivered in line with their delivery plans and how these might be addressed.</p> <p>(Qualitative assessment)</p>	<ul style="list-style-type: none"> <li>- Wider voluntary sector interviews</li> <li>- Quarterly progress reports</li> <li>- Cost consequences analysis</li> <li>- Project consultations</li> <li>- Case studies</li> <li>- Grant holders meetings</li> <li>- Impact maps</li> </ul>
<p><b>Evaluation question 4</b> Has the Scheme influenced the plans of</p>	<p>What sustainability planning have the organisations undertaken to sustain their HCWVSGS work?</p> <p>Do the participating organisations have mainstreaming plans in place for their HCWVSGS work?</p>	<p>Examples of sustainability plans</p> <p>Evidence of organisations building activities into</p>	<ul style="list-style-type: none"> <li>- Quarterly progress reports</li> <li>- Project consultations</li> <li>- Case studies</li> </ul>

Evaluation questions	Sub-questions	Indicators of success	Evidence source
<p>participating organisations to sustain the project activities beyond the funding period?</p>	<p>Have any of the organisations levered in funding to sustain their HCWVSGS work?  - Bid development/ partnership development/ service diversification</p> <p>Have any of the organisations explored alternative options for sustaining their HCWVSGS work?  - Any evidence of social investment options/ social enterprise/ training arms etc</p> <p>What dissemination activities have taken place to support sustainability?</p>	<p>their core offer.</p> <p>Evidence of funding secured from other sources to sustain activities.</p> <p>Evidence of alternative business models to fund future activities.  (Qualitative assessment)  <i>It was agreed at the client meeting on 14/1/15 that Ecorys will explore where projects obtain information and advice on alternative business models and potential funding sources from.</i></p>	

#### 4.4 Evidence sources for the remainder of the evaluation

In addition to the existing work programme, it was agreed that several additional tasks are added to enhance the evidence sources above:

- **Programme manager interviews** – Interviews will be held with the programme managers from the Welsh Government to explore their expectations for the HCWVSGS and compare these with the actual impacts achieved by funded organisations at the end of the programme. These interviews will take place in early March 2015 and be repeated in early December 2015.
- **Impact on the voluntary sector** – Ecorys will conduct a small number of additional telephone interviews with wider delivery partners towards the end of the programme to explore wider impacts on the voluntary sector. Stakeholders could include Ash Wales, the British Heart Foundation, Mind and WCVA.

#### Quantitative evidence

- **Quarterly progress reports** – Extensive analysis of the progress reports will be undertaken as part of the data analysis task to assess progress against targets.
- **Cost consequences analysis** – This will provide a full calculation of the costs associated with running each project alongside a full list of the benefits achieved.
- **Survey returns** – Ecorys will request **monthly** updates on survey completion from the projects. We know already some are unlikely to meet the 45 sub-group target. Some are confident they can meet it (Princes Trust), or exceed it (Kids Clubs).

## **Annex One: Project summaries**

**HEALTH CHALLENGE WALES VOLUNTARY SECTOR GRANT SCHEME  
2013-2015 – SUCCESSFUL BIDS**

**Organisation: Sustrans Cymru**  
**Project Title: Healthy Universities**

**Location: All Wales**

**Budget: £135,698**

**Project Aim**

Support universities to take responsibility for and implement a health initiative at their institution. Influence, encourage and support beneficiaries (staff and students) to take responsibility for their own health and to live healthy lifestyles. Contribute to wider health improvement in Wales through networking, evaluation and policy influencing.

**Key Theme Addressed**

Support the creation of a healthy hospitals initiative or a healthy colleges and universities initiative.

**Organisation: Sustrans Cymru**  
**Project Title: Healthy Hospitals Alliance**

**Location: All Wales**

**Budget: £133,003**

**Project Aims**

Ensure that hospitals have the right strategies and plans in place to support and encourage staff and patients to adopt healthy behaviours. Directly influence, encourage and support staff to live healthy lifestyles; becoming role models for the patients and visitors that they engage with. Contribute to wider health improvement in hospitals across Wales through sharing learning from the project and using this to influence policy and practice. Establish a clear evidence base for the efficacy of interventions in reducing sickness absence in order to encourage NHS Health Boards to continue the interventions beyond this project.

**Key Theme Addressed**

Support the creation of a healthy hospitals initiative or a healthy colleges and universities initiative.

**Organisation: MIND Cymru**  
**Project Title: Perinatal Mental Health and Resilience – Early Support**  
**Location: All Wales**  
**Budget: £145,820.**

Project Aims

The project will seek to raise awareness of perinatal mental health problems and increase recognition of early signs in order to encourage people to seek support.

Key Theme Addressed

Promote healthier lifestyles for pregnant women which have a positive impact on them and their family's health.

**Organisation: Clybiau Plant Cymru Kids' Clubs**  
**Project Title: Play, Learn and Grow Healthy**  
**Location: All Wales**  
**Budget: £58,556.**

Project Aims

The project aims to raise awareness within the childcare sector of the benefits of physical activity and balanced nutrition and encourage positive attitudes towards a healthy lifestyle and discourage risky behaviours of tobacco and alcohol use. To enable children to take more responsibility for their own health and make independent lifelong choices using the Play Learn & Grow Healthy Activity Pack, together with additional materials.

Key Theme Addressed

Encourage and support individuals to lead healthy lifestyles by encouraging physical activity and a balanced diet, and discouraging people from risky behaviours such as smoking and excessive drinking, to decrease those at risk from cardiovascular disease (including coronary heart disease and stroke), cancer and diabetes.

**Organisation: The Prince's Trust**  
**Project Title: Active Youth**  
**Location: All Wales**  
**Budget: £146,642.**

Project Aims

This project will support unemployed young people between the ages of 16 and 25 in specific locations across Wales to support and consequently empower them to take action to improve their health and wellbeing.

Key Theme Addressed

Encourage and support individuals to lead healthy lifestyles by encouraging physical activity and a balanced diet, and discouraging people from risky behaviours such as smoking and excessive drinking, to decrease those at risk from cardiovascular disease (including coronary heart disease and stroke), cancer and diabetes.

**Organisation: Breast Cancer Care Cymru**  
**Project Title: Best Foot Forward**  
**Location: Rhyl and Cardiff**  
**Budget: £35,977.**

#### Project Aims

This project aims to support people coming to the end of treatment for breast cancer and to encourage them to become physically active and live healthier lifestyles in a supportive environment. It plans to establish initially 3 walking groups in Wales and will recruit and train a total of 24 new volunteers as Walking Group Leaders over two years to deliver this service. The new Walk Leaders will lead regular health walks with people who are living with or beyond breast cancer. The walkers will be referred from the Moving Forward Passport to Rehabilitation Course which includes receiving information from Health Care Practitioners on the benefits of physical activity and healthy eating, encouraging them to adopt the advice and make positive lifestyle changes.

Also working in partnership with Lymphoedema specialists in 3 Local Health Boards to reach and make available preventative information sessions on Lymphoedema. To that end the project will need to recruit 4 volunteers to support those information sessions which will be delivered on a monthly basis in 3 separate locations to support the delivery of the service and to offer peer support to patients as part of their treatment pathway. Potentially this will benefit in excess of 500 patients.

#### Key Theme Addressed

Encourage and support individuals to lead healthy lifestyles by encouraging physical activity and a balanced diet, and discouraging people from risky behaviours such as smoking and excessive drinking, to decrease those at risk from cardiovascular disease (including coronary heart disease and stroke), cancer and diabetes.

## **Annex Two: Evaluation timetable**

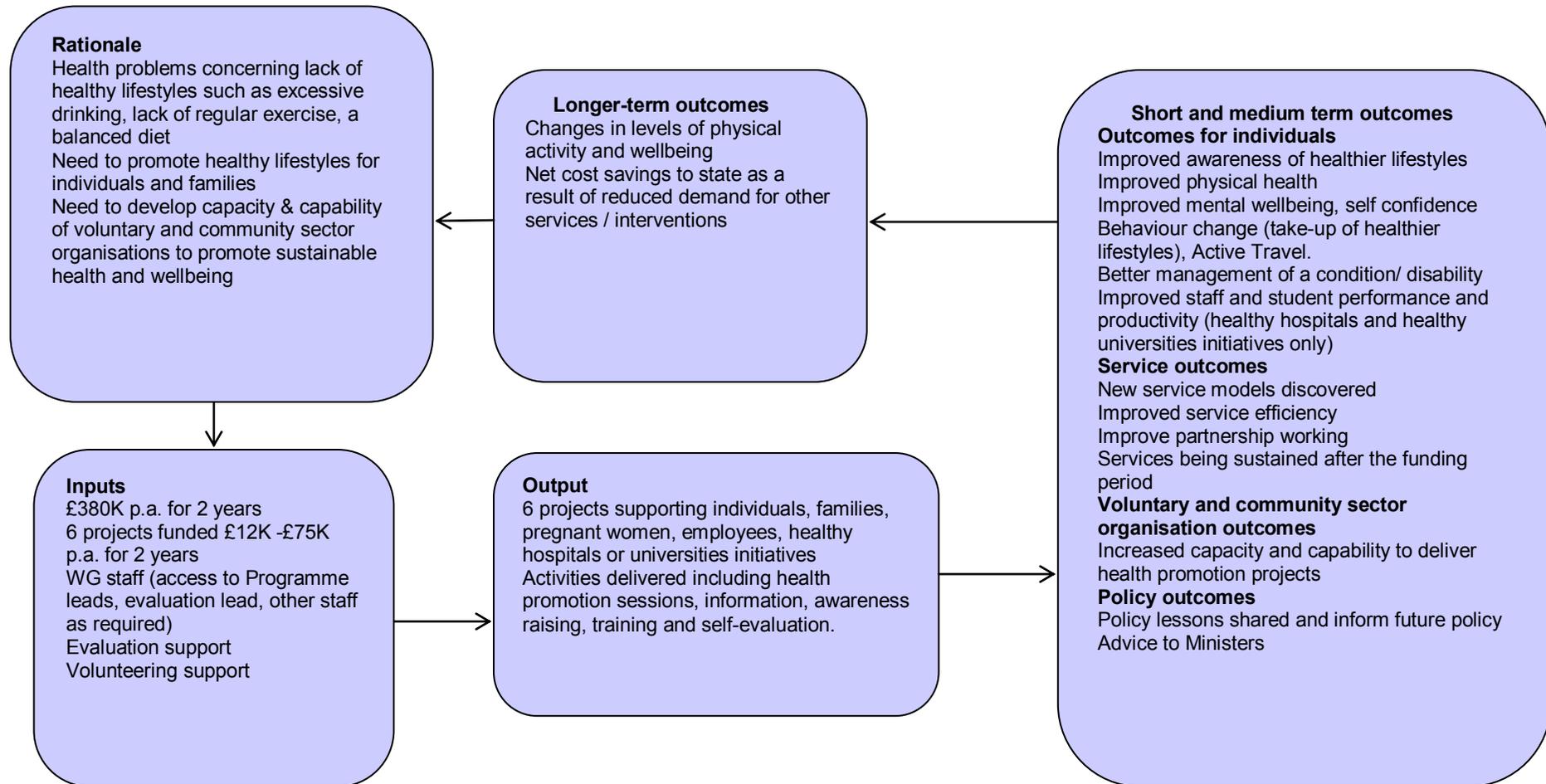
### Health Challenge Wales Voluntary Sector Grant Scheme 2013-15 Evaluation work plan

Task	Q3 2013			Q4 2013			Q1 2014			Q2 2014			Q3 2014			Q4 2014			Q1 2015			Q2 2015			Q3 2015			Q4 2015		
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
<b>WP1 Inception &amp; desk review</b>																														
1.1 Inception meeting & report																														
1.2 Strategic stakeholder consultations																														
1.3 Development of logic model & common indicators																														
<b>WP2 Project level evaluation</b>																														
2.1 Evaluation training																														
2.2 Development of evaluation resources																														
2.3 Provision of project evaluation support																														
<b>WP3 Programme level evaluation</b>																														
3.1 Project consultation																														
3.2 Data review & economic analysis																														
3.3 Case studies & validation																														
Programme managers consulted																														
Wider voluntary sector interviews																														
<b>WP4 Analysis &amp; reporting</b>																														
4.1 Grant holders Seminar																														
4.2 Reporting																														
4.3 Presentation & dissemination																														
<b>WP5 Project Management</b>																														
5.1 Progress updates																														
5.2 quarterly reports & meetings every 5 months				X				X					X					X					X						X	

\*\* Sustrans only

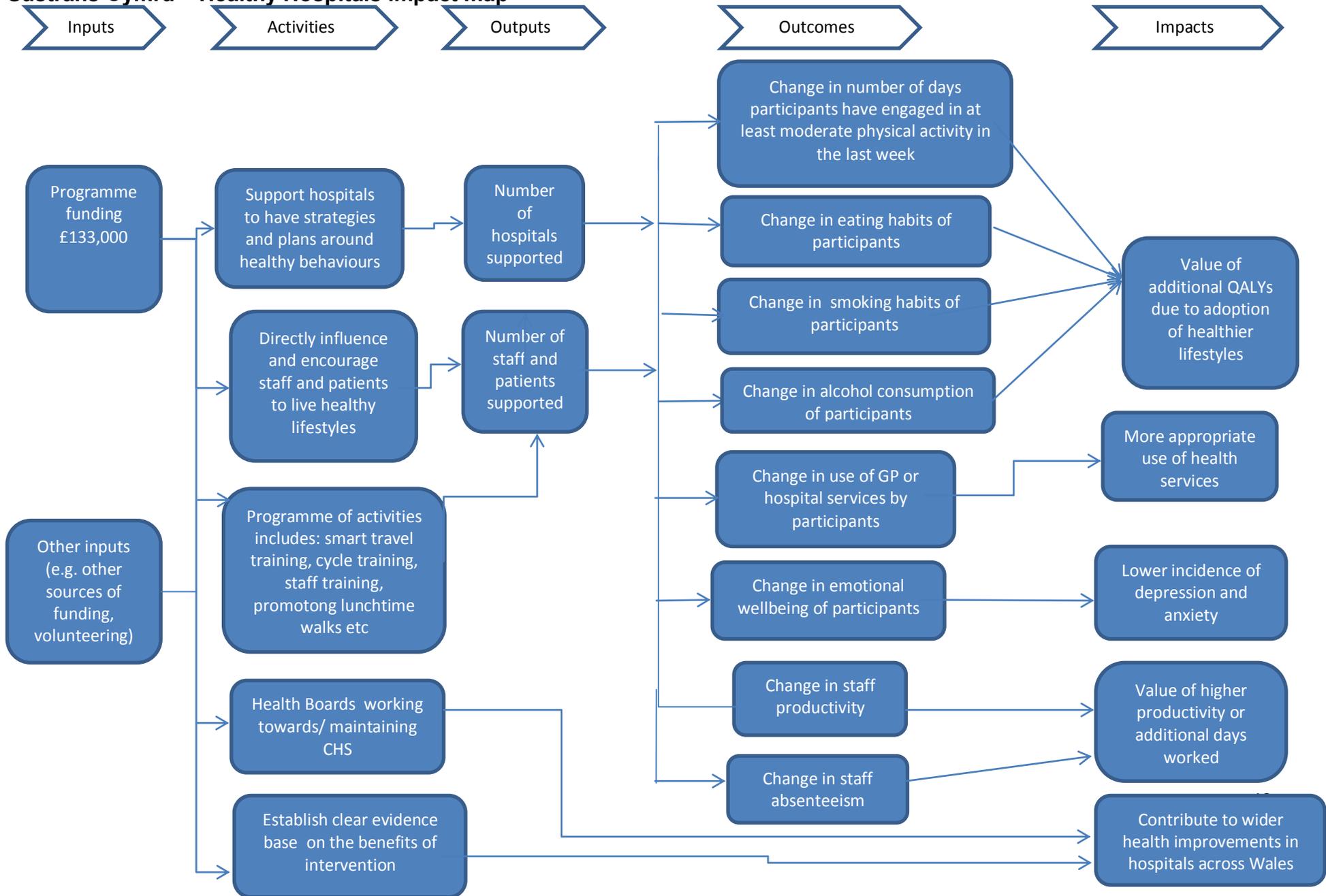
## **Annex Three: Programme logic model**

## Health Challenge Wales Voluntary Sector Grant Scheme 2013-15 – Programme Logic model

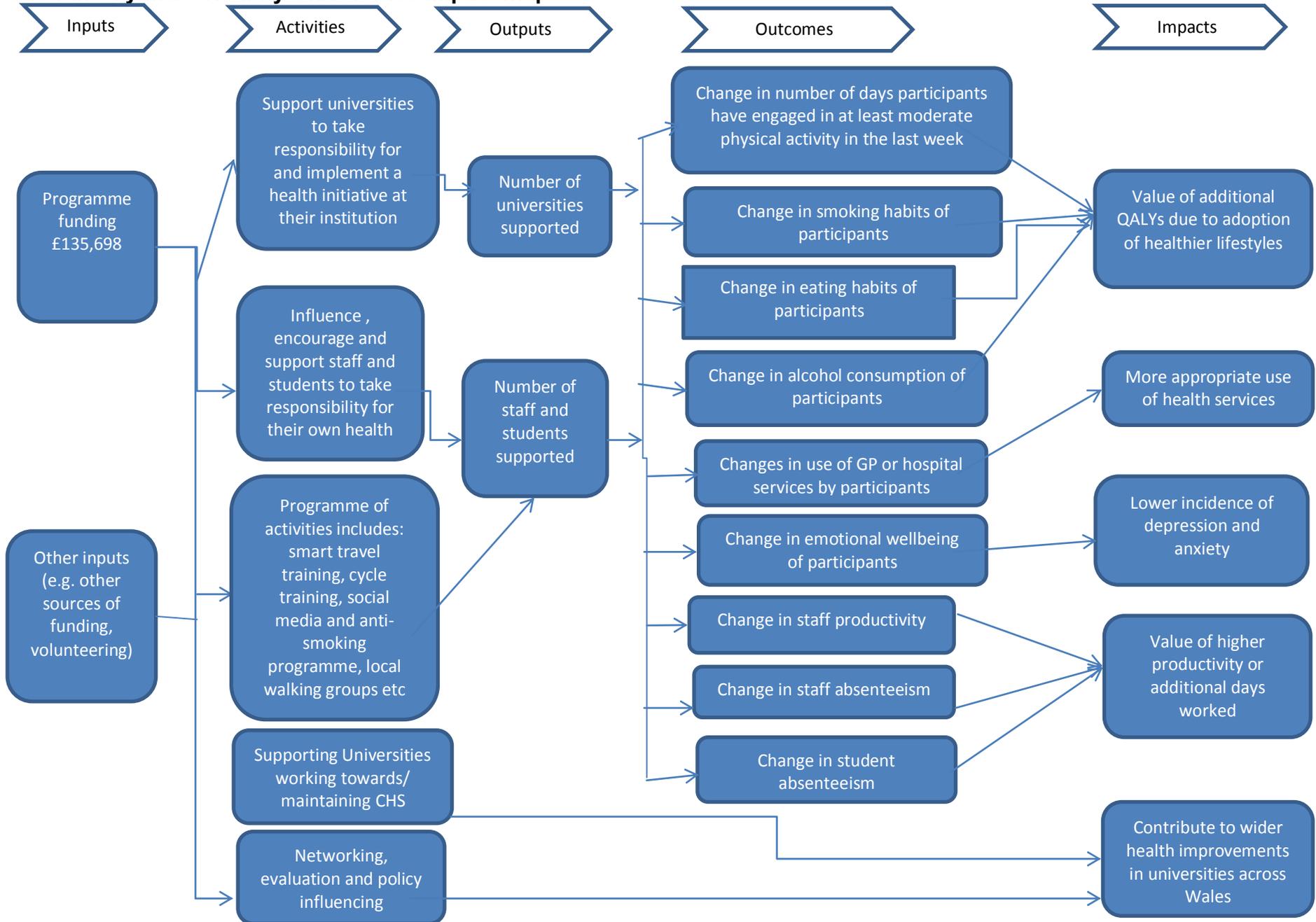


## **Annex Four: Impact maps**

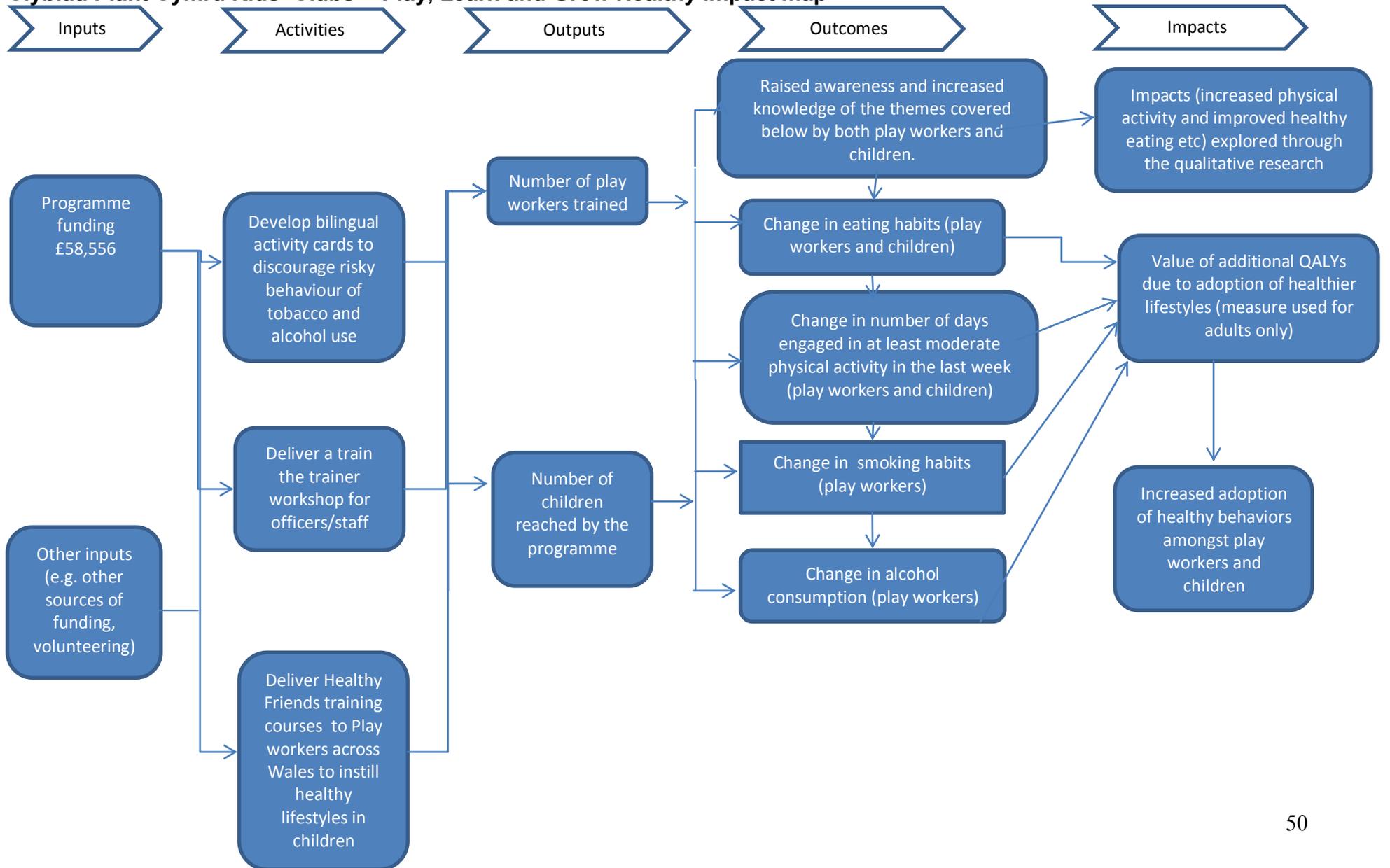
# Sustrans Cymru – Healthy Hospitals impact map



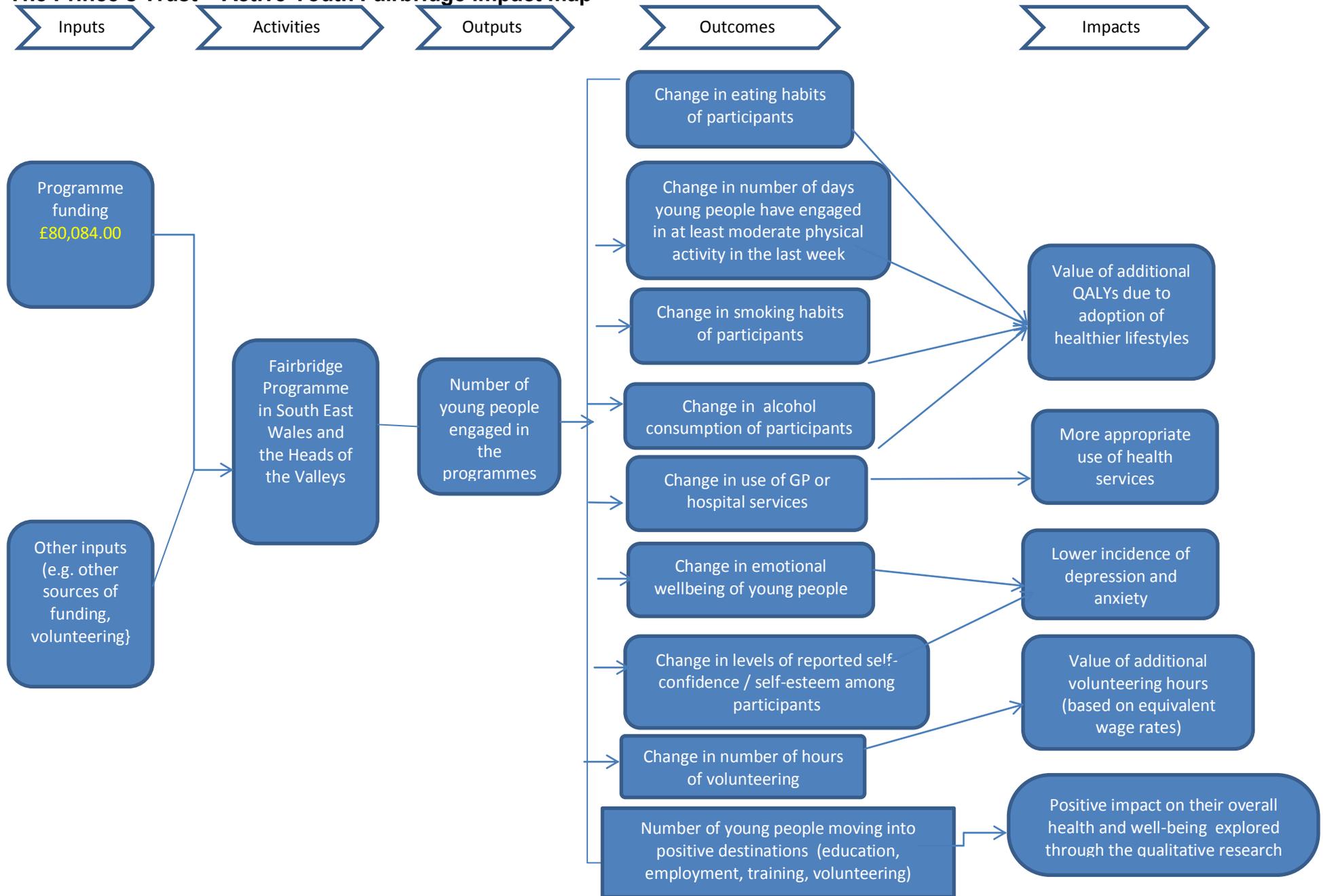
# Sustrans Cymru – Healthy Universities impact map



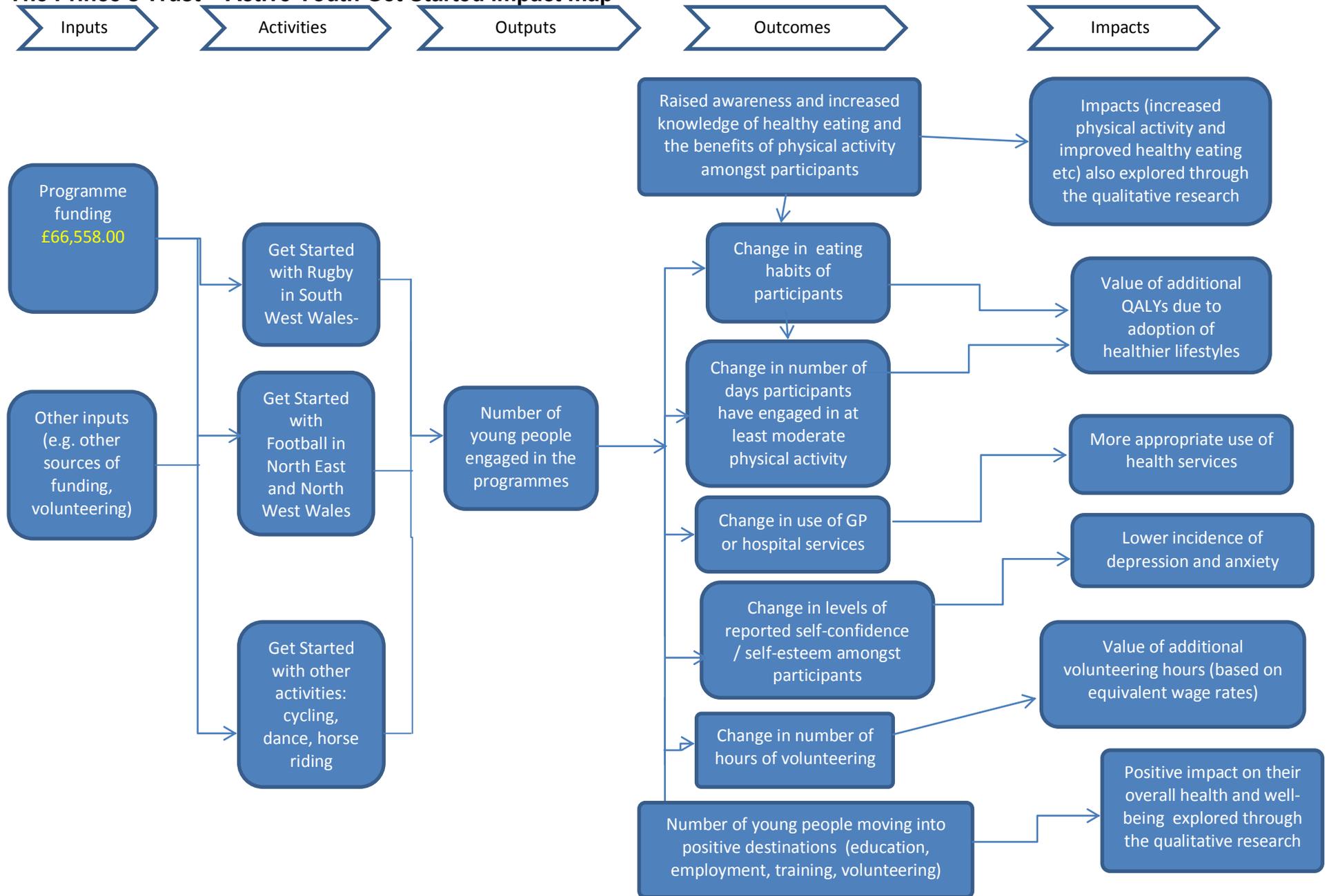
### Clybiau Plant Cymru Kids' Clubs - Play, Learn and Grow Healthy impact map



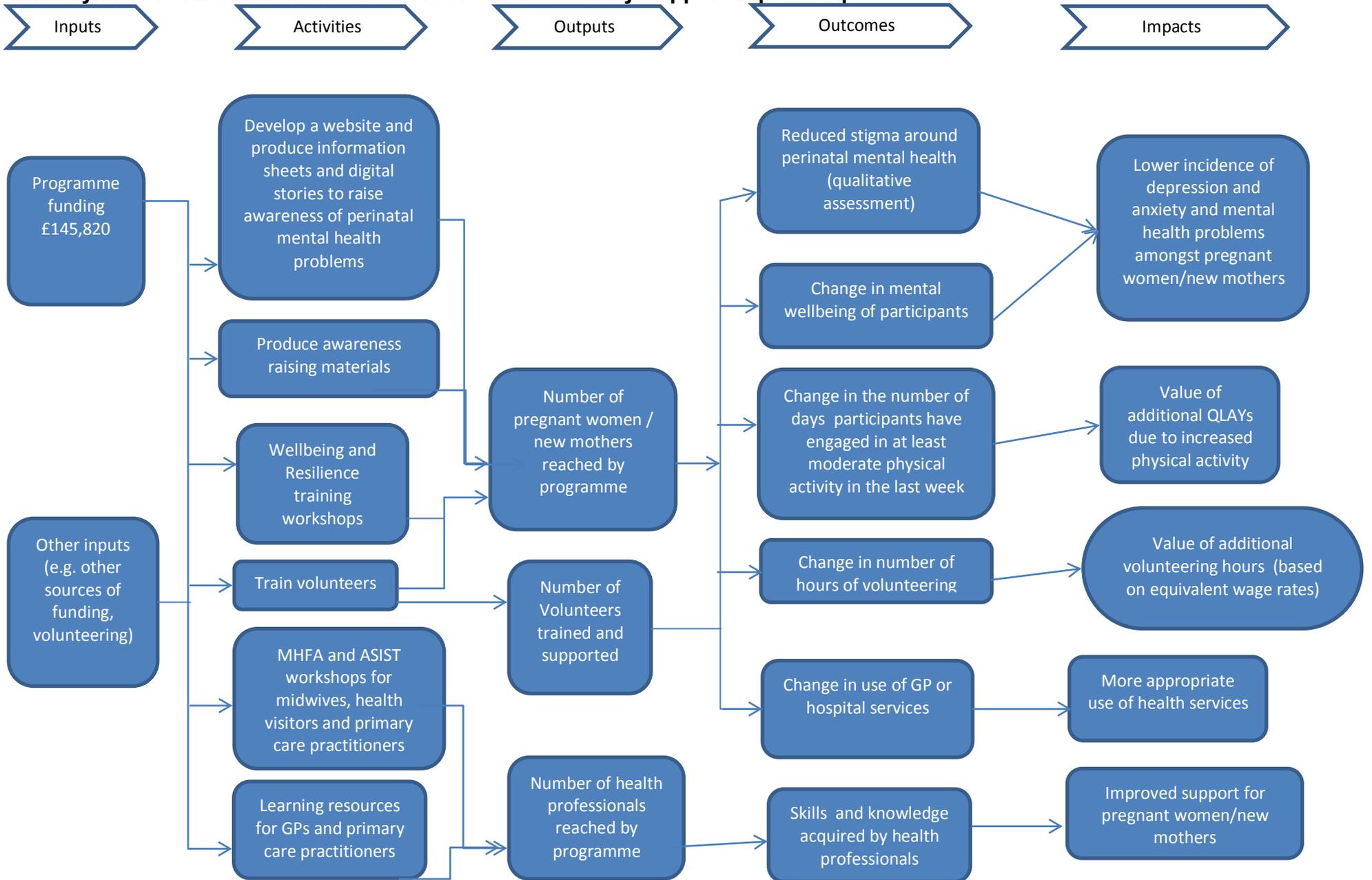
# The Prince's Trust – Active Youth Fairbridge impact map



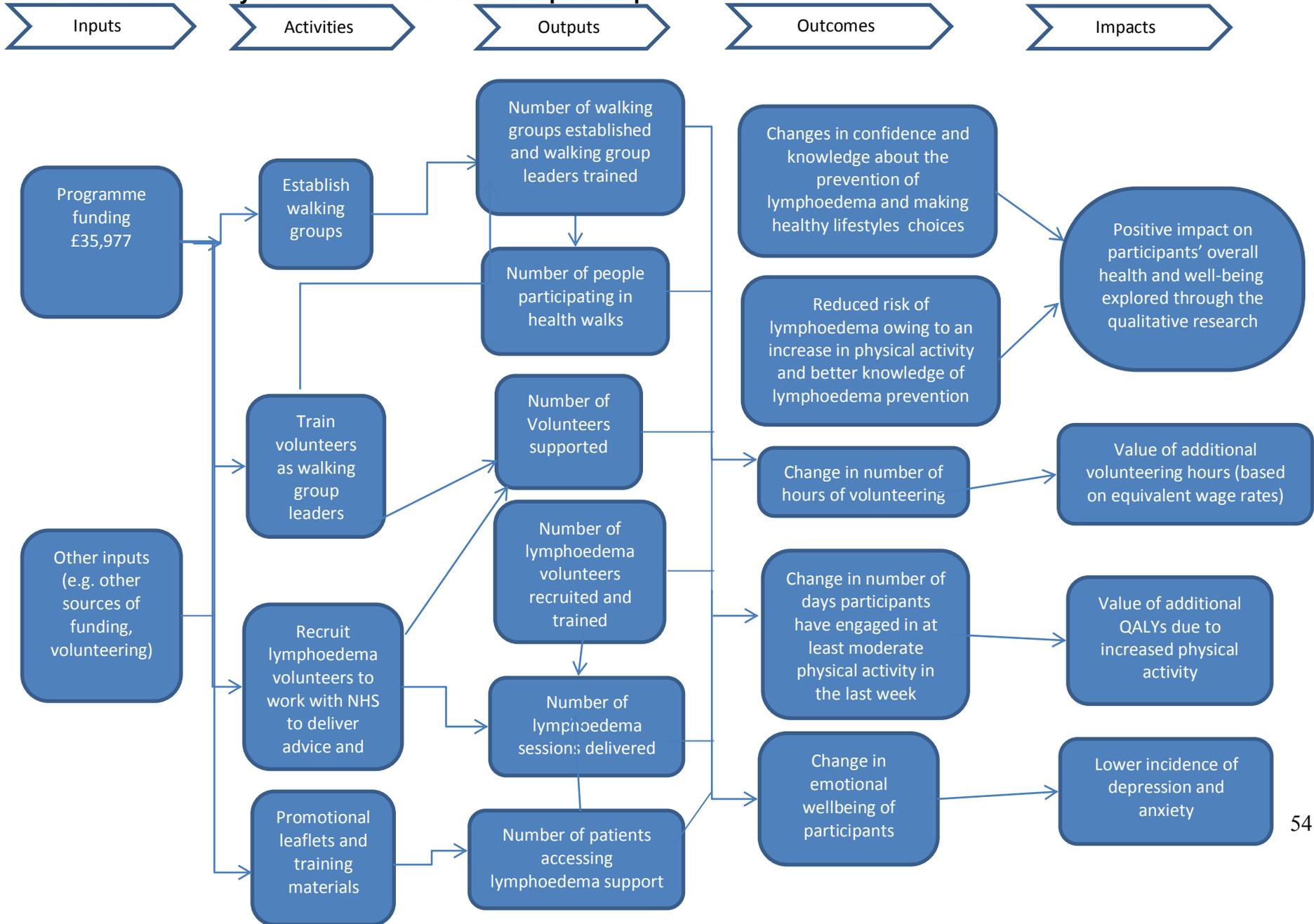
# The Prince's Trust – Active Youth Get Started impact map



# Mind Cymru - Perinatal Mental Health and Resilience – Early Support impact map



# Breast Cancer Care Cymru – Best Foot Forward impact map



## **Annex Five: Project materials**

Postcard, produced by the Mind Cymru project.

## Pregnant? Just had a baby? Are you struggling with your emotions?

Come and check out other mums and dads stories  
plus lots of resources online at [twoinmind.org](http://twoinmind.org)

About 3 in 10 women  
experience significant  
stress, anxiety and  
depression during and  
after pregnancy

Many women are reluctant to  
discuss the type and depth  
of their feelings during  
pregnancy and after birth



Get in Touch: [info@twoinmind.org](mailto:info@twoinmind.org)

 mind cymru  
for better mental health  
o baid gwell iechyd meddwl

Most pregnant women  
do not seek help from  
their doctor or health  
professional if they  
are struggling with  
their mental  
health

7 in 10 women said  
that their relationship  
with their partner had  
been affected by their  
mental ill health

4 in 10 fathers reported  
anxiety and depression  
during this time too

Lack of support  
and 'pressure  
to do things  
right' are key  
factors why  
women can get  
depressed or  
anxious

8 in 10 women said they felt  
low and tearful at this time

The top five things that  
help women recover  
and feel better are;

- o Time
- o Recognising they  
are mentally unwell
- o Medication
- o Support of their family
- o Self-help

Other things include:  
Stress reduction, peer  
support, talking to experts,  
counselling, exercise and  
healthy eating



Ariennir gan  
Lywodraeth Cymru  
Funded by  
Welsh Government

Source: Perinatal Mental Health Experiences of Women and Health Professionals at:  
[www.tommys.org/file/Perinatal\\_Mental\\_Health\\_2013.pdf](http://www.tommys.org/file/Perinatal_Mental_Health_2013.pdf)