



Outcomes and Indicators Guide



VRU Violence Reduction Unit
Nottingham City and Nottinghamshire



NOTTINGHAMSHIRE
POLICE & CRIME
COMMISSIONER

Outcomes and Indicators

Purpose

The VRU has produced this guide to identify and improve collection of measurable key indicators of success. We call these **quantitative indicators**.

Organisations also measure the success of their programs using the personal experiences of those who have used them, often in the form of surveys, interviews, and panel discussions. These are called **qualitative indicators**.

We value both kinds of evidence, and the best way to paint a rich picture of the success of your project is to evaluate it using both. This guide will focus on helping you decide what quantitative indicators to use and how best to use them.

Quantitative Indicators: Outcomes that can be measured numerically, for example percentages of reoffending, number of people reached, etc.

Qualitative Indicators: Outcomes that are based on the personal experiences of those affected, often gathered using surveys, interviews, etc.

The VRU will work with partners to encourage a more consistent approach to measuring the success of our funded interventions. This will involve creating shared definitions of 'successful outcomes', as well as the indicators we use to measure these for an outcomes based approach. This shared understanding will:

- Improve service delivery
- Identify successful approaches
- Identify best practise and gaps
- Give a broader picture of the success of VRU funded services

The VRU, and other funders, increasingly expect service providers to be able to provide measurable indicators of success, as well as qualitative information. How much you use of each will rely on your particular intervention, and we hope this guide will help you decide how best to show your potential, demonstrate your achievements and increase your opportunities for future funding.



Home Office Outcomes

The VRU ultimately receives its funding from the Home Office, who provide us with the following key outcomes for young people:

- Reduced offending and victimisation
- Reduced involvement with statutory services (for example, the police, social services, etc)
- Improved attendance at school/college, including better behaviour and attainment
- Improved employability
- Improved mental health and wellbeing
- Improved physical and mental health
- Other.....

The Home Office intend these outcomes to be used as a guide, not a rigid set of instructions or demands. The 'other' category recognises there will be other outcomes relevant to specific organisations. However, the large majority of services working towards violence reduction will be covered by these outcomes, and if you are using these appropriately in your bid, it is a good sign you are on the right track.

Try to identify **one or two** clear outcomes from you work rather than **to prove impacts on multiple outcomes**. Don't spread your bid too thin - identifying the **key** outcome or outcomes for your particular intervention and having relevant and measurable indicators is more useful than vague, 'catch-all' statements and indicators that are hard to measure. For example:

"100 young people engaged in football as a diversionary activity"

is much better than

"100 young people were deterred from offending, had improved family relationships, reduced their risk of homelessness, etc"

That second example has too many indicators that are too hard to directly evidence. Adding more key words without any proof of how they can be achieved is not the best way to progress a bid.



Indicators

Well chosen, measurable indicators are key to helping assess the success of a service and to identifying areas of potential improvement. We cannot be prescriptive about the measures used as these will vary depending on the type of intervention being carried out. However, the guidance below may help you decide how to choose and monitor indicators.

Indicators should directly relate to the outcome being targeted and should come either from established, reliable data sources (such as the Police, the Council, universities etc...) or from sources under your organisations control, for example, your records of services users and their progress.

Care should be taken to ensure that it is having a positive impact on the outcome. For example, if the outcome being targeted is 'reducing involvement with statutory services', the indicator used should ensure that the reduced contact is for the right reasons, i.e., a result of the client no longer requiring the service rather than the client disengaging from it or services being withdrawn.

It is unlikely that a single indicator will give sufficient information to assess the success of an intervention. A well-chosen set of relevant indicators can give a richer picture of performance. For example, a service looking at improving employability might initially want to set the number of service users in work as an indicator. However, this might not only encourage the service to focus on getting as many people as possible into any work, for any length of time, but it also fails to take into account the individual challenges of service users and the sustainability of the intervention and so may encourage the service to identify and focus on the easiest to help groups. A suite of indicators might look at the employment and education history of the service users and measure how these have improved as a result of the service delivery. It should also return to the same group periodically to assess the long term impact of the service.

A comprehensive guide to identifying good indicators and avoiding pitfalls can be found in ["The Good Indicators Guide"](#) by the NHS' Institute for Innovation and Improvement.

Where possible, established research questions and methodologies should be used as indicators. Measures of mental health and wellbeing for example, are widely available and are more reliable as they have been rigorously academically tested.



The below table gives a list of potential indicators for the outcomes set out by the Home Office. These are examples and the indicators you choose should be tailored as appropriate to the individual aims and delivery of your project.

Outcome	Potential indicators
Reduced Offending and Victimisation	<ul style="list-style-type: none"> • Establish pattern of offending/ victimisation prior to engagement with the project • % of participants not offending/being victimised during the project • % of participants not offending/being victimised within a year of the project ending
Reduced Involvement with Statutory Services	<ul style="list-style-type: none"> • % of participants where services have proposed reduced engagement • % of participants released from engagement with services • Time spent with statutory services (hours, days, sessions) prior to and post intervention
Improved attendance at school/college, including better behaviour and attainment	<ul style="list-style-type: none"> • % of participants with reduced number of unauthorised absences during the project • % of participants with reduced number of unauthorised absences during the following year • Additional days in school compared to previous year • % of participants with reduced number of days lost to exclusion during the project • % of participants with reduced number of days lost to exclusion during the following year
Improved employability	<ul style="list-style-type: none"> • % of participants entering further study • % of participants in employment for more than 6/12 months • Additional days in work compared with previous year/ long term average • % of participants completing a course of further study • % of participants no longer NEET
Improved mental health and wellbeing	Before, after and follow up surveys of mental health/ wellbeing using established methodologies (WEMWBS, WHO 5, Oxford Happiness Questionnaire etc)
Improved physical and mental health	% of participants with increased participation in activities during and following the project.



Monitoring

You should identify your indicators early in the service planning process and monitor them at least quarterly during delivery. It is best practice follow up your indicators after delivery to ensure results are sustainable. This will not be possible for all services, but an ideal framework would include:

- Baseline measures being established prior to the intervention being delivered.
- Ongoing monitoring during service delivery to identify progress and inform practise is refined and improved.
- Final indicators at the end of service delivery to demonstrate its effectiveness and,
- Ideally, the service should return to service users periodically to establish whether the impacts have been sustained.
- If the positive impacts have not been sustained it might be helpful to provide some context. For example Covid had a significant impact on services.
- A service being delivered to a large group and/or where the delivery timeframe is short (i.e. a session being delivered to a school class) should aim to at least show a baseline and final indicator to show the impact of the service.

Theory of Change and Logic Model

The VRU would advocate adopting a theory of change. We work closely with the Youth Endowment Fund who use the Early Intervention Foundation resources.

The VRU will be making resources, help and advice available through an Incubation Hub which will be launched shortly through the Nottingham and Notts VRU website <https://www.nottsvru.co.uk/>. In the meantime, please refer to [EIF evaluation hub: creating a theory of change](#) and [EIF evaluation hub: developing logic models and blueprints](#) including how to guides, video explanations and templates.

A theory of change clearly explains the how and why - what the project involves and how the activity achieves its intended impact. It can help to map backwards, describing long term goals and explaining how the intervention will get you there.



A logic model helps all stakeholders to clearly define the objectives to be achieved. It provides a graphic representation of the inputs, activities and outputs.



Success

Projected successful outcomes should be established at the beginning of the service delivery to show how successful the service has been and help to refine and improve service delivery in the future. Most research methodologies would advocate measuring the indicators against a control group of similar people who weren't service users, but in many cases this will not be possible. Using previous service users as a comparator group can enable providers to assess the effectiveness of changes in delivery.

We are happy to help to support you to develop your outcomes and indicators at the project design stage. Even if these change for any reason this can be demonstrated via monitoring and we can help ensure relevant adjustments are made for your project.

