

Approach to Wellbeing Evaluation: Summary of Findings

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Background and evolution of the Approach to Wellbeing (A2WB) model

In 2019, County Durham developed an Approach to Wellbeing (A2WB) that was an asset-based model intended to engage communities and encourage devolution of power to them, alongside increasing shared decision making. The Approach built on the success of Area Action Partnerships (AAPs) and their long-established work with communities across County Durham.

The principles of the A2WB model were developed as part of an iterative process engaging members of the Resilient Communities Group, the Mental Health Strategic Partnership Board, the Public Health Team, the Mental Health Stakeholder Forum and teams within Durham County Council and the NHS. Implementation of the model resulted in two strands of work; the design of a theoretical model and an 'audit' tool that would enable people to put the principles into practice, which resulted in the development of the Self-Assessment Framework

Aims and Objectives

The primary aim of this study was to evaluate the implementation of the County Durham A2WB. The evaluation was intended to take place in three phases with associated objectives as follows:

Phase 1: A retrospective review of early adopters in order to:

- Explore the reasons why some teams adopted the use of the Wellbeing principles at an early stage to influence their work.
- Consider what barriers there may be to others adopting the Wellbeing approach and how those barriers could be lifted.
- Determine whether the use of the wellbeing principles has been helpful in framing future and more long term intentions of use.
- Explore whether the Wellbeing approach was used to underpin any emergency strategy or response put in place during the COVID-19 global pandemic

Phase 2: A contemporaneous chronicle of activities pertaining to community engagement, including testing, further development and refinement of the wellbeing principles, alongside the co-production of the evaluation objectives themselves. Including:

- Identifying specific communities of interest.
- Reviewing the method of community engagement used.
- Exploring the extent to which solutions to issues affecting communities have been co-produced.
- Identifying examples of power being devolved to communities.

Phase 3: To examine essential factors pertaining to future internal evaluation of the adoption, impact of the adoption, and implementation of the wellbeing approach across relevant County Durham organisations, as well as development of a recommendation of a feasible model for how this may be achieved. This stage includes:

- Which measures of wellbeing will be taken as constitutive of success when gauging outcomes from the approach to wellbeing?
- Where will responsibility for future evaluation lie, and how will continuation of evaluative measures be ensured in future?
- How can the wellbeing approach itself be at the heart of future evaluation?

Conclusions & Recommendations

Having considered each phase of evaluation, including recommendations from the Community Hub case study and Internal Stocktake paper, the following conclusions have been reached, and recommendations made:

1. The Community Champions model was found to be a very effective vehicle for implementing the Approach to Wellbeing and could be replicated in order to engage and improve levels of wellbeing in areas and communities that may be less well connected. **It is recommended that in this case, particular effort is made to reach out and attempt to recruit Champions who are as representative of the community they work with as possible as this was found to be a significant factor in their success.**
2. Although there is evidence of a clear commitment at all levels to follow the approach to wellbeing and apply its principles, in practice this can be difficult due to their, sometimes abstract, nature. While the Self-Assessment framework and wellbeing principles 'as is' are suitable at strategic level and provide a valuable instrument to guide and review decision-making and performance, these are often too time-consuming or too far removed from everyday practice in delivery settings. For this reason, **it is also recommended that dedicated training in the approach to wellbeing be coupled with measures designed to place the approach at the heart of each role. For example, including these elements in role specifications and key areas of focus will also aid in affecting whole system 'culture shift' towards the wellbeing approach. Appraising key role competencies in a manner that is wellbeing-driven can also be a valuable approach to affecting such culture shift.** When dedicated training is delivered, it can sometimes be difficult to transport any learning from this environment to the 'real world'. Furthermore, the more time that passes following this training, the more difficult it becomes to recall its content and purpose. Because of this, **a further recommendation is to look at ways of embedding the wellbeing principles within role descriptions and at the heart of team meetings and development sessions.**
3. It has been suggested that the communication of the approach to wellbeing may still be too abstract for use in community settings. **A recommendation to address this is to develop practical mechanisms that support a clear understanding of the role the Approach to Wellbeing can play in supporting better outcomes for communities and provide tangible ways to engage with**

the Self-Assessment tool, for example enabling users to complete and submit forms via a web page and access peer mentoring opportunities. **Consideration should be given to how this mechanism might enable gathering of qualitative data and link to other initiatives and methodologies that support meaningful engagement**, for example co-production and consultation.

4. It is important to be able to objectively measure and monitor wellbeing within County Durham over time in order to support the continued application of the approach to wellbeing and to ensure this is done iteratively. **It is recommended that this monitoring of wellbeing within County Durham is done in a standardised, consistent and universal way in order to ensure the greatest benefit. This involves the creation of standardised and systematic methods for collecting and sharing data.** Although it is essential that nuanced and rich qualitative data forms part of this monitoring, **it is also recommended that this measurement/monitoring use an externally validated, quantifiable measure in addition to qualitative data gathering to maximise how robust any data collected is, thus strengthening any conclusions drawn from such data.**
5. **It is recommended that the *ONS-4 Measures of Wellbeing* are used (in conjunction with the *Personal Wellbeing Scale*) as the quantitative measures in this endeavour, as these offer the best combination of ease of introduction, brevity, readability and richness of existing data. In applying the wellbeing principles, the Council should also explore complementing this with qualitative data.** While it is anticipated that introducing the *ONS-4/PWS* hybrid measure alongside standardised qualitative data gathering will result in the creation of a robust and instructive dataset in a manageable fashion, this is currently hypothetical. Therefore, **it is recommended that a small-scale pilot be run in which suitable services begin to introduce routine collection of *ONS-4* data alongside developing standardised methods of qualitative data collection to gauge its suitability in real terms.**