



Using off-the-shelf tools to measure change

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Introduction

A key part of evaluating your projects and services is measuring ‘distance travelled’—the change that has taken place among your clients during and after your intervention, which can provide strong evidence of your impact. There are a wide range of different tools available to help you measure this change, which may also provide feedback during your programme, allowing you to improve as you go and better support your clients.

This document provides an overview of off-the-shelf tools useful for voluntary sector organisations working with offenders and ex-offenders. It is not designed to be a comprehensive review, but provides introductory guidance and signposts to other useful resources. A selection of tools for various relevant outcomes are summarised at the end of the document.

In measurement, the word ‘tool’ is used to refer to any approach that measures change. This could be a number of things: a questionnaire, a psychometric scale or a system for recording practitioner observations. An off-the-shelf tool is one that is ready-made, and may have been developed by academics, companies, or other charities. A tool usually consists of questions about service users’ feelings, attitudes, behaviour, skills or living situation that the service intends to help change. Typically, the tool is used with the client at least twice: first, near the beginning of their time with the service, and then again later on when a change is expected to be observed. The difference between the first and second reading indicates distance travelled, or change towards the intended outcomes.

Some outcomes do not require specific tools to measure them because they are easily observed. These ‘hard’ outcomes, such as level of qualifications or sustained tenancies, have easily-defined indicators: the actual qualifications received. However, many important ‘soft’ outcomes, including improved personal capabilities, self-esteem, or changing attitudes or beliefs, are more difficult to measure. An effective indicator, such as an improved score from a well-designed outcomes tool, can help you demonstrate change in these soft outcomes in a quantitative, or numerical, way.

You may be able to describe change without quantitative outcomes tools, for example by using qualitative, non-numerical methods like focus groups or observation. But outcomes tools have the advantage of standardising the questions you ask clients and the format of their response, allowing you to analyse and compare information on a number of clients and calculate the aggregate change for an entire project.

It is possible to develop your own tools. However, off-the-shelf tools are widely available because while different organisations offer different services and work in different ways, the outcomes they aim to achieve are often similar. It is important to remember that even the best tools will not meet *all* your evaluation needs. A tool for assessing outcomes is only part of an overall approach. While it’s an appealing thought, **there is no off-the-shelf tool that can do evaluation for you**. Because your services are specific to you, your evaluation plan must be tailored to your individual needs. However, a well-chosen off-the-shelf tool can provide a key part of the puzzle.

Before thinking about tools, and your measurement process in general, we strongly recommend that you develop a logic model or [theory of change](#) for your organisation or the project on which you are working. This will help you to clarify what you need to measure and should help you to choose the right outcomes tools.

A **theory of change** shows a charity's path from need to activities, outcomes and impact—the change you want to make, and the concrete steps involved in making that change occur. A good theory of change will help you decide what to measure by isolating the most important activities involved in working towards your overall aim.

This document provides information on using tools and signposts you to some of the most popular off-the-shelf tools available. Some tools stand the test of time (especially those developed and tested by academics), while others may come and go quickly and vary in quality. The least useful tools are no better than things you could have developed yourself, while others have been through a robust testing process. For this guidance we have focussed on tools that are:

- of a good standard - if possible, developed by experts and tested for validity and reliability;
- accessible and free or cheap to use; and
- current - newer tools with some evidence of ongoing use, or older tools that have stood the test of time.

About outcomes tools

The benefits of using tools to measure outcomes

Your outcomes are important for your clients, your organisation and your funders. Measuring the right indicators in the right way provides insight into what works and what doesn't for which service users. The process also gives evidence of change for funders and other stakeholders, and evidence for particular issues and areas of need.

Measuring outcomes using off-the-shelf tools is often a very practical option for charities. Creating your own tool is time-consuming, and involves not just designing questions but testing them for validity, reliability and sensitivity to important changes. Measuring soft outcomes may require multiple revisions to ensure the relevant information is captured consistently. In contrast, off-the-shelf tools have various benefits:

- The time, knowledge and investment needed to develop the tool has already been contributed by someone else, including testing and piloting to improve validity and usability.
- Tools have often—though not always—been developed by measurement experts.
- If the tool is widely used you may be able to compare your results to those of other organisations or projects, share findings and learn more easily from others.

- Off-the-shelf tools may have more credibility with funders. They may already be familiar with the tool, so it is easier for them to understand the outcomes information you present.
- Some off-the-shelf tools have guidelines, training packages and/or IT packages to support them.
- Results are likely to be higher-quality and more informative, though it is important to make sure you are measuring the right indicators for your work.

However, because off-the-shelf tools have not been designed with your service in mind, their content might not be ideal. It may be tempting to pick and choose parts of tools, and add your own questions to adapt them for your services. This can be an effective option, but using single questions from a tool or adding questions in a different format may invalidate it. Always consult the guidance notes or the developer for further advice when adapting tools in this way.

A further disadvantage of using off-the-shelf tools is that you can miss out on the process of engaging staff and clients to think about intended outcomes and how they might be evidenced. This process can also be achieved by thinking about theory of change.

What types of questions are included in tools?

Tools might combine a range of different types of questions relating to hard and soft outcomes. For example:

Concrete questions about the client's situation at a particular moment in time.

- Is the client registered with a GP?
- Does the client have a support need in relation to drugs and alcohol?
- How many times has the client visited an Accident and Emergency department in the last six months?

Subjective scales about how the client feels in relation to an area of their life.

- Rating satisfaction with the client's housing situation on a scale of one to five, where one is very dissatisfied and five is very satisfied.
- Recording how often the client feels confident and motivated: always, often, sometimes, infrequently, never.

Evidence or service delivery?

Some tools are designed solely as instruments for research and producing evidence, but others—such as the Outcomes Star—are intended to link closely to service delivery and action planning with clients. In these cases the tool is used to identify the client's current position in relation to each area, think about where the client would like to be on the scale in a few weeks' or months' time, and agree the actions required to reach that goal. The advantages of this approach are:

- it makes clear to service users and practitioners what the intended outcomes of the service are and provides a focus for activities;
- it provides an overview of the client's situation and, when the tool is used again, a sense of where they have or have not made progress;
- it offers managers a quick way of taking an overview of a practitioners' caseload, looking at what kind of clients they have and if progress is being made; and
- it can be motivating for clients themselves.

Many outcomes tools are suitable for both evidence and action planning to varying degrees. Most of the tools recommended in this document are designed primarily as research instruments, but indication is given where tools are more suited to planning.

Other kinds of tools

The term 'tool' does not always refer to a tool to measure outcomes. Confusingly, some other products and services may be referred to as outcomes tools though they serve a different purpose. Other types of tools include:

- **Assessment tools:** create a clear picture of a service user needs (e.g., OASys)
- **Management tools:** aid overall management of an organisation (SWOT analysis)
- **Quality tools:** assess the extent to which a service is following good practice in the way it is managed and delivered (PQASSO)
- **Other evaluation tools:** approaches that help you to decide what to evaluate in your service and how to do so. These may include theory of change, planning triangles, Results Based Accountability, and Social Return on Investment (SROI).

Choosing tools

Before you decide how to measure—by choosing your tool—it is important to decide what you are measuring, and why. This is most effectively achieved by developing a theory of change. Following this, there are various things to consider when choosing the appropriate tool for your project and organisation.

Practical issues

Assessing the tool

- Some tools are freely available on the internet, while others require a request to the copyright holder or come with a **cost**. Costs can be one-off or on a per-participant basis, which may limit the size of your study group.
- Unless indicated, tools may not be used without permission from the **copyright** holder—but permission can often be obtained easily.

Collecting the data

- Some tools require **training** to use, or can only be administered by a **licensed practitioner**, requiring extra resources.
- Consider **how long** the tool will take to use. A long questionnaire may require additional resources to administer and process, or make evaluation too much of a burden for the people delivering your service. Longer tools risk poor quality answers and partial completion, and may only work better where there is a higher level of contact between staff and clients.
- Think about how accessible the tool is for your **clients**. Is the language and material suitable for the people you are working with? Is it visually engaging? Can the tool be filled in by clients on their own?

Using the data

- Consider how you are planning to use the data. Different tools will offer **results** in different ways—some will just provide raw data, while others may give more engaging visual results.
- Different tools have different potential for **further analysis**—some more sophisticated tools are designed to be able to calculate composite measures, in which all the questions answered are reduced to one or two scores.

Support materials

You may need support to use some of the more complex tools. Some providers may offer a range of additional resources, including:

- **Training manuals**
- **IT packages** to analyse or allow the tool to be completed online, sometimes giving an instant summary of the score, often in graphic form.
- **Modifications** for different client groups. These may be changes to the outcome areas measured or to the way the tool is used - for example versions in different languages. Some tools come with benchmark data from other users that can help you interpret your own results.

Research methods issues

Structure

- When assessing the quality of a tool, think about **how it fits together as a whole**. Expertly developed tools may have been statistically tested to ensure that the questions work together as expected, allowing individual question responses to be summed up in an overall score.

Validity

- This is the extent to which a tool measures what you want it to measure. This is particularly important for soft indicators like self-esteem. Do the questions get to the heart of the issue? Use your judgement on whether the scale is **valid** in that it measures what it claims to measure and whether it covers what is being assessed adequately. For tools developed by academics this may be judged and presented in a published paper.

Responsiveness

- If the client makes important progress or changes, **will they register on the tool?** Yes/no questions or short three- or five-point scales may not be sensitive enough to capture the changes created by your project. 10-point scales are recommended for measuring change.

Reliability

- Consider whether the scale is **reliable**—if it was used by different members of staff, would it give the same results? Does a high score in one area mean the same for different people? Factual questions tend to be more reliable but do not give much information about attitudes and beliefs. Questions that ask for more subjective information or that use the views and opinions of key workers and researchers to assess progress can produce different results depending on who is asking and answering the questions. To help with this you can run moderation exercises in which staff independently assess a client case study and discuss how their views differ, which may help resolve differences in approach.

Choosing tools to support key work

Using a tool to support action planning and key work with clients may entail a different set of considerations, for example the importance of accessible, client-friendly language and adapting tools for service users with particular needs (eg, learning or concentration difficulties). It will also be important that the areas measured by the tool are the same areas on which the key worker and client are focusing.

Using tools

Getting ready

Using an outcomes tool may require organisational changes, and impact on service delivery. Homeless Link's [guide to outcomes tools](#) highlights key issues to consider when preparing to implement an outcomes tool:

Creating an outcomes orientation

Shifting the focus from services to clients will help foster positive attitudes to outcomes. Without this shift, the outcomes tool may be filled in mechanistically - because it is a requirement—reducing the potential benefits for improving services. Our [guidance on engaging staff and volunteers](#) in monitoring and evaluation provides further information.

Integrating the tool

It may be necessary to adapt key work processes through training and supervision to accommodate use of the tool. Consider amalgamating existing paperwork to avoid duplication, and keep in mind the IT capacity you may require to manage your data - database design and use is a particularly important skill.

Who, how and when?

The person doing the measuring may be just as important as the tool itself. Some tools are designed to be self-administered - the service users fill in the questionnaires themselves - while other tools may require the support of staff or volunteers. Establishing trusting relationships with clients may be important if addressing sensitive issues. In addition, consider whether training or expert advice will be necessary.

Where key workers and staff are involved, it may be necessary to conduct a validation exercise to ensure everyone is using the tool in the same way. Asking staff to conduct a dry run using the tool on a fictional case study and then comparing their data can highlight any differences in interpretation.

When to use the tool

To measure change the tool should be used at least twice. Before the programme, the tool can be used to establish a baseline - where your service users are now. Results from after the programme are compared with the baseline to measure change. The tool could also be used at regular intervals through a longer programme to give a more detailed picture of change over time. Try to make sure the tool is used in the same way each time, to allow comparison of results.

Consent and confidentiality

It is important to gain informed consent from the participants in your evaluation. You should inform service users about the purpose of the tool, how the data will be used and ask for their agreement to take part. In some cases, responses to questions are given anonymously—for example with an online questionnaire. Where this is not the case, assuring the participant that their answers will be confidential may lead to more honest responses. Personal data like names and addresses must be stored according to the Data Protection Act 1998. For further information, see our [guidance on engaging service users](#).

Example tools

Reoffending rates

Of course, one of the major outcomes you may be looking to measure is **reoffending rates** for your clients. You don't need a tool to measure this as it is officially recorded, but the challenge is to get access to the data for the clients you work with. One option is to establish partnerships with statutory services such as Police or Probation that have access to this data (we are producing guidance alongside this document with ideas about how to do this). The other option is to use the [Ministry of Justice Data Lab](#), which provides reoffending rates alongside the rate for a matched comparison group. For more information, see our [Justice Data Lab guide](#).

Tools being created specifically for voluntary sector organisations in criminal justice

It is worth highlighting two specific tools that have been commissioned by the National Offender Management Service (NOMS) and are currently being piloted, due for publication later in 2014. The tools are being designed to help projects working with offenders around:

- improving family ties and relationships; and
- mentoring projects and arts-based initiatives.

They cover a range of dimensions that are relevant to reoffending, and it is hoped that once published they will be widely used and enable voluntary organisations to compare what they achieve with other organisations through the collection of consistent data. If you are interested in using these tools, please get in touch with james.noble@thinknpc.org for draft versions.

Other tools

In addition to reoffending rates you should be interested in a range of intermediate outcomes that affect the likelihood of clients reoffending, as well as their general quality of life. As such, this guide recommends a selection of commonly-used tools in the following topic areas:

- measuring **self-esteem** and mental **well-being**;
- measuring **capabilities**, related to employability or other goals;
- measuring **risk and resilience** - external factors and the client's ability to respond;
- measuring programme engagement; and
- **general tools** that can be adapted for measuring different outcomes.

The tools recommended in this document have not been subject to any independent quality assessment by NPC and Clinks, and are largely sourced from a review of the current guidance literature. For more detailed information about their robustness and quality in comparison to other options, please refer to the further sources indicated below.

The list below is by no means exhaustive. If you have used other tools that were useful then please let us know and we will add them.

Measuring mental and physical well-being

There are dozens of tools designed to measure self-esteem, mental well-being and physical well-being outcomes such as addiction. Some are primarily designed as diagnostic tools, but may be adapted to measure changing outcomes.

Warwick Edinburgh Mental Wellbeing Scale (WEMWBS)	
<p>The WEMWBS is an academically developed and tested 14-item scale with five response categories covering various aspects of mental wellbeing. It was commissioned by NHS Scotland and is validated for use across the UK with those aged sixteen and over, and has been included in the annual Scottish Health Survey since 2008.</p>	
Access	WEMWBS is freely available and use is encouraged, but the tool is subject to copyright. Contact frances.taggart@warwick.ac.uk . A sample copy can be viewed here .
Further information	The Health Scotland website .

Office for National Statistics Wellbeing Questions	
<p>Since 2011, the Office for National Statistics (ONS) has included four questions about personal well-being in the Annual Population Survey, rated from 0 to 10—for example, ‘Overall, how happy did you feel yesterday?’ Though ‘yesterday’ may not be a typical day for the respondent, the large sample size of the APS ‘averages out’ this difference—note that this may not be the case for smaller samples of clients. Because ONS asks these questions of large samples in the general population there is good comparison data to compare your clients against.</p>	
Access	The questions are freely available for use from the ONS, subject to Crown copyright.
Further information	Background information from ONS.

Clinical Outcomes in Routine Evaluation (CORE)	
<p>The CORE questionnaire lists 34 statements about how the client has felt over the past week, to be assigned a numerical value of 0 to 4 from most to least positive response. The tool is used in over 500 psychological therapy services in the UK to provide an indicator of ‘global distress’, and could be used as a measure of well-being outcomes. However, results may not be particularly accessible for non-practitioners and questions are specifically developed for psychotherapy settings. Benchmarking data and software is available to allow services to compare outcomes with an overall average for a specific service or client group. CORE has been tested and validated.</p>	
Access	CORE forms can be freely downloaded but are subject to copyright and cannot be modified.



Further information	The CORE website .
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Some particular aspects of mental well-being, like self-esteem, have specific outcomes tools.

Rosenberg Self-Esteem Scale (RSES)	
RSES is a 10-item scale with four response options, measuring feelings of self-worth and self-acceptance using positive and negative statements about the self. Though developed in the 1960s, it is still widely used and has been scientifically tested as valid and reliable.	
Access	The tool is available from various sources—a copy can be viewed here .
Further information	Original source: Rosenberg, M. (1965) <i>Society and the adolescent self-image</i> . Princeton, NJ: Princeton University Press.

Further resources

- For a critical comparison and quality assessment of tools measuring further aspects of mental well-being, including optimism, trust and emotional intelligence, see **Health Scotland's [guide](#)** to selecting scales assessing mental well-being in adults (2007).
- For a comprehensive guide to measuring well-being and further resources, including guidance on identifying outcomes and tools, see the **Mental Well-being Impact Assessment [toolkit](#)** (2011).
- For a compendium of tools to measure mental health more broadly, including tools for addiction, see this **National Institute for Mental Health in England [publication](#)** (2008).

Measuring capabilities

Organisations working with offenders may be interested in developing and measuring the skills and capabilities of their clients. Capabilities can include practical skills, such as leadership and communication, or personal qualities such as determination and self-belief.

General Self-Efficacy Scale
The General Self-Efficacy scale was developed in 1979 to assess respondents' sense of self-efficacy—their self-belief and perceived ability to cope with daily hassles and adapt to stressful life events. It consists of 10 questions on a four-point scale to be included randomly in a more comprehensive questionnaire. When used before and after an intervention, it can be used to assess change, though as a general measure it will not capture information about specific behaviours. Guidance on how to write additional, more specific questions is provided. The measure is widely used in various contexts and has been subject to validity and reliability testing.



Access	The scale is freely available in 33 languages providing the source is cited.
Further information	The GSES English website and guidance document . Original source for English-language tool: Schwarzer, R., & Jerusalem, M. (1995). <i>Generalized Self-Efficacy scale</i> . In J. Weinman, S. Wright, & M. Johnston, <i>Measures in health psychology: A user's portfolio. Causal and control beliefs</i> (pp. 35-37). Windsor, England: NFER-NELSON.

Duckworth et al's Short Grit Scale	
The Grit Scale measures perseverance and self-control—the ability to sustain interest towards long-term goals, and the voluntary regulation of impulses. The scale consists of eight statements and a five-point scale in which the respondent scores how far the statement is relevant to them. The scale has been validated for establishing differences between individuals among adults and adolescents: higher scores were associated with educational attainment and fewer career changes. However, the tool has not been validated to measure change over time.	
Access	The eight-item Short Grit Scale is available to download free from the University of Pennsylvania website for non-commercial use only.
Further information	The University of Pennsylvania website . Development and validation information can be accessed here .

Employment and employment related skills are recognised as one of the seven pathways that can support offenders in positive change and desist from crime. As part of the Inspiring Impact shared measurement programme, NPC has developed the **Journey to Employment (JET) framework**, a guide to measuring indicators that matter for the employability of young people.

The Personal Development Scale (Employability)	
The Personal Development Scale is designed to measure changes in communication, leadership and teamwork skills among young people aged 13-18, with whom it has been used as part of the National Citizen Service evaluation. The respondent scores their feelings about a situation—such as ‘Meeting new people’—on a five-point scale of confidence. The tool was tested by NatCen and received expert input.	
Access	A modified version of the tool can be found in the JET framework.
Further information	The Inspiring Impact website .

The JET framework also provides tools for measuring **emotional capabilities** including autonomy, control and empathy, as well as a range of other employability-related outcomes. Though some are specific to young people, others may be used for a range of different client demographics.

Measuring individual's risk and resilience

Many factors affect the likelihood of offending and reoffending. These tools are designed to give a general view of risk factors and clients' ability to respond to them. Information on measuring more specific outcomes in areas such as substance misuse and housing is provided in the resource list at the end of this section.

Asset Young Offenders Assessment Profile	
<p>The Asset tool is a questionnaire used by Youth Offending Teams to assess risk and resilience factors among young offenders and to track improvements. The tool was developed out of an extensive review of risk and resilience in youth offending. The tools can be used both to guide interventions by assessing the needs of an individual, and to measure change in outcomes over time. The tool has been subject to validity testing and was last updated in 2006.</p>	
Access	The questionnaires and full guidance can be downloaded freely from the Ministry of Justice website.
Further information	The MoJ website .

Adult Social Care Outcomes Tool (ASCOT)	
<p>The ASCOT measure was developed to capture information about an individual's quality of life in relation to social care. The measure looks at a number of outcomes areas: control over daily life; personal cleanliness and comfort; food and drink; personal safety; social participation and involvement; occupation; accommodation cleanliness; and comfort and dignity. The measure can be used to assess an individual's needs and capacity to benefit, and to also assess change over time. Developed and regularly updated by the Personal Social Services Research Unit at the University of Kent, the tool is available in various versions including self-completion questionnaires, interview, and observation tools for various settings. Guidance, supporting tools and information about training are available online.</p>	
Access	ASCOT is available for free for non-commercial use (website registration required). The tool may not be altered without permission.
Further information	The ASCOT website and guidance document .

The Penrose Outcomes Tool	
<p>The Penrose Outcomes tool was developed by the charity Penrose, which works with offenders. Five areas are covered, corresponding closely to Department of Communities and Local Government indicators—financial health, enjoying life and achievement, health, safety and contribution to the community. These are divided into a total of 17 areas, ranked on a defined five-point scale agreed by the client and key worker. The tool is specifically designed for work with offenders and provides reliable data to both support key work and measure outcomes. However, the five-point scale may not be sensitive to small changes in behaviour. There is no evidence of academic testing, though the tool went through an extensive development process with staff and</p>	

service users.	
Access	Not publically available. Contact Penrose for information about use.
Further information	The Penrose website .

Further resources

You will probably be familiar with the seven pathways commonly associated with preventing reoffending—housing; education, training and employment; mental and physical health; drugs and alcohol; finance; family; and attitudes, thinking and behaviour. There are a large number of specific outcomes that could be measured within each of those areas—for more information, see the resources below.

- For more information on the seven pathways to reoffending, see the Home Office Reducing Re-offending National [Action Plan](#) (2004).
- For an **overview of social outcomes** for offenders and ex-offenders, see the Big Society Capital offenders [outcomes matrix](#) (2014).
- For a review and ranking of outcomes tools used by **homelessness** organisations, including tools for **social care, substance misuse, well-being and employability**, see the Homeless Link [review of outcomes tools](#) for the homelessness sector (2010).
- For the **family relationships** of prisoners and offenders, NPC is currently working with the National Offender Management Service to develop a shared toolkit for charities to measure the impact of work to improve family ties and peer relationships, to be released in Spring 2014—please contact jamesnoble@thinknpc.org.uk for further information.
- For outcomes in **violence**-related behaviour and influences, particularly amongst youth, see the CDC [guide](#) to tools measuring violence-related attitudes, behaviours and influences (US-based) (2005).
- For measuring **attitudes to offending**, the fully validated [CRIME-PICS II tool](#) from M&A Research may be useful. Questionnaires are available for a cost (from £90.00 for 50 copies), alongside a free downloadable scoring tool.



General tools that can be adapted to measure different outcomes

Some aspects of your intended outcomes may fall outside the categories above, or you may prefer a more general measurement framework that can be adapted to a range of different areas. In these cases, an adaptable outcomes tool may be useful.

These are tools where the structure or scale is defined but not the content, so you can change the wording to suit your needs. There are many tools like this and, as well as being adaptable, they all have the merit of being relatively simple to use. The disadvantages are that as you are adapting the tools for your own purposes you will not be able to compare the results with any other services, and even within your service it can be difficult to get consistent scores across service users and over time. For example, if a scale is subjective or undefined then one person’s three out of ten may be another’s six.

The You Ladder	
<p>The You Ladder is a basic, adaptable tool that asks clients to assign a ‘rung’ rating in two key outcome areas—originally housing and drug use—and give a reason for any change in ratings at repeat readings. The tool provides a useful visual way of engaging with clients about their progress. However, the rungs and outer limits of the tools are not defined, and rankings are very subjective, making it difficult to compare scores. The tool may therefore be more useful for supporting key work and visualising progress rather than for rigorously measuring outcomes.</p>	
Access	Freely available online.
Further information	Developed by Kevin Callaghan. See the Evaluation Scotland website .

Outcomes Star(s)	
<p>The Outcomes Star is a flexible approach to measuring distance travelled in a wide range of different outcome areas. Bespoke outcomes stars can be developed to suit a particular programme, or existing versions cover different client groups including homelessness, mental health, teenagers, work and training, and alcohol and drugs. Within each star, the client judges their position along a series of 10-point scales in discussion with a key worker—the scale might cover managing money, using time meaningfully, offending or mental health. Repeated readings are taken to track progress.</p> <p>Outcomes Star scales are not fixed and ratings depend on trust and discussion with a key worker, so individuals’ stars cannot be meaningfully compared. The stars may therefore be more useful in supporting key work in long-term projects, rather than reliably evidencing outcomes. A defined and validated scale will provide you with better, more robust evidence of your impact.</p>	
Access	All paper versions of the Outcomes Star are available for free download.
Further information	The Outcomes Star website .

The Rickter Scale

The Rickter Scale is a method of measurement designed for work with young offenders, but customisable to a wide range of areas. The method consists of a physical grid with ten outcome areas and sliding scorers, which are controlled by the client. Various overlays can be ordered or customised to cover different outcomes. The tool is a useful way to engage and build rapport with clients, and is used extensively with young people aged 13-19 by Connexions. Training and supporting software are available.

Like the Outcomes Star, Rickter Scale ratings are meaningful only for individual clients and are not consistent or reliable between people or over time. The Rickter Scale is better used as a practical tool, and will not produce reliable evidence of impact.

Access	Users must be licensed and receive mandatory training. Boards cost £89.90 each +VAT; training for up to 8 delegates £950.00 for one day. Other product and service prices available online.
Further information	The Rickter Company website .

Measuring programme engagement

Beyond measuring change with outcomes tools, you may also want to assess engagement—your service users’ commitment to change and to the project itself. NPC recommends the following Programme Engagement Scale, a tool that can be administered by a key worker to rank the level of engagement of a client using a defined scale.¹

1. Disengaged	Indifferent or antagonistic to change. Does not acknowledge risks/problems/wrongness of current path.
2. Listens to alternatives	Will listen to alternatives to current behaviour and lifestyles. Alternatives may not seem palatable but will engage in discussions.
3. Anticipate benefits	Understands how theories, ideas and resources of the programme are applicable to them. Develops cautious expectations.
4. Achieve quick wins	Some evidence of progress, albeit on a limited scale. But still facing repeated challenges in adapting behaviour.
5. Maintain commitment to change	Has recalculated behaviours and lifestyles and accepts the wisdom of continuing with the programme. Starts to take control/responsibility of elements of the programme and programme goals
6. Working with us	Plays an active part in the work and fully engages with potential changes in behaviour and lifestyles.
7. Graduate	Leaves the programme without further need for support and may even go on to act as an ambassador to other potential users.

¹ Based on Pawson (2013) *The science of evaluation*.

Further resources

There are many other tools that may be adapted for use by criminal justice charities to support key work and provide evidence for outcomes. For a more thorough review and ranking of available options, see the Homeless Link [guide to outcomes tools](#) (2010).

Bibliography

Cooke, A; Friedli, L; Coggins, T; Edmonds, N; Michaelson, J; O'Hara, K; Snowden, L; Stansfield J; Steuer, N; Scott-Samuel, A (2011) *Mental Well-being Impact Assessment: A toolkit for well-being* (3rd edition). London: National MWIA Collaborative

Copps, J; Plimmer D (2013) *Inspiring Impact. The journey to employment: A guide to understanding and measuring what matters for young people*. London: Inspiring Impact/NPC

Dewson, S; Eccles, J; Tackey, N D; Jackson A (2000) *Guide to Measuring Soft Outcomes and Distance Travelled*. London: The Institute for Employment Studies

Health Scotland (2008) *Mental Health Improvement: Evidence and Practice Guide 5: Selecting scales to assess mental wellbeing in adults*. Edinburgh: Health Scotland

de Las Casas, L; Fradd, A; Heady, L; Paterson, E (2011) *Improving prisoners' family ties: Piloting a shared measurement approach*. London: NPC

MacKeith, J; Graham K (2010) *A practical guide to outcomes tools* (2nd edition). London: Homeless Link

MacKeith, J; Graham, K; Burns, S (2010) *Review of outcomes tools for the homelessness sector* (2nd edition). London: Homeless Link

Michaelson, J; Mahony S; Schifferes J (2012) *Measuring Well-being: A guide to practitioners*. London: nef (the new economics foundation)