



Evaluation Guidance

This evaluation guidance is for groups who have been awarded funding from LSCICB.

Now that you have been successful in your application for funding from LSCICB you will need to evaluate your LSCICB funded service / activity.

This LSCICB Evaluation Pack Contains:

- Information about evaluation
- Tips and ideas on how to show the positive difference your LSCICB funded service / activity has made to local people
- Information about what you need to send to the LSCICB administrators
- Useful contact details for support and advice

Section 1 – What is an evaluation?

What do we mean by evaluation?

Evaluation is a process that the LSCICB fund providers and administrators use to look at what positive difference the fund has made to people and to see how the funding can be improved in the future.

Why evaluate?

Evaluating an LSCICB funded service / activity will allow you and your group to:

- ✓ Show what positive difference your service / activity is making to people.
- ✓ Let the LSCICB fund providers and their administrators know what difference the funding has made to local people.
- ✓ See if your service / activity is meeting local needs.
- ✓ See if your service / activity has worked well or in some cases not so well.
- ✓ Find out if there's anything that could be done to make your service / activity better for people.
- ✓ Share ideas and top tips with other groups.
- ✓ Collect evidence for future funding applications to different funding streams.

Evaluating an LSCICB funded service / activity will let the fund providers and their administrators:

- ✓ See what positive difference the funding has made to people across East Lancashire.
- ✓ How the support provided by projects can/may reduce inappropriate use of urgent care services.
- ✓ Find out if there's anything that could be done to make the funding process better for people.
- ✓ Share stories and examples of how the funding has been used to help people.
- ✓ Find out what services and activities are needed for people.
- ✓ See if people are being able to access what they need.

How do you evaluate?

There are many ways to evaluate a funded service or activity. Examples include:

- **Photographs** of people taking part in an activity.
- **Quotes** from people to show their thoughts about your service / activity.
- **Questionnaires** to evaluate people's experience of your service / activity.
- **Emails / Letters** from people to show their thoughts and experience of your service / activity.
- **Short interviews** also known as case studies to capture the positive difference you've made to people's lives.
- **Attendance lists** to see how many people have attended an activity / service.
- **Wellbeing Measure (ONS4) Forms**, a before and after measure to demonstrate the positive impact on clients' wellbeing.

Top Tips for evaluating your LSCICB funded service / activity:

1. Make sure you have people's consent if you want to take their photographs, share their quotes, stories, emails and letters.
2. Ask people who have taken part in your service / activity to complete an evaluation form or other idea for evaluating the project.
3. Use a range of evaluation ideas that are quick and easy to complete.
4. Ask people who are taking part in the service / activity to come up with their own evaluation ideas such as designing their own questionnaire.
5. Be clear about what you want to know and why you want to know it.
6. Think about the best way to capture the information you want to know.
7. Only collect information if it is needed.

Section 2 - What evaluation do you need to complete and when?

Now that you have been awarded funding from LSCICB you will need to evaluate your funded service / activity. You may also be contacted during the project for a general update and/or visit. Part way through your project we will ask for an interim report. This will help you monitor your progress to ensure your activity is on track and will highlight any problems you may need to address. A **full** evaluation will be required at the end of the programme.

You must send in:

- ✓ Photocopies of any *receipts for any goods purchased.
 - * Please note that receipts will only be accepted for items bought after the LSCICB funding has been granted and for those items related to the funded project as stated in your original application.
- ✓ Details of any other evaluations you have carried out.
- ✓ Any photographs you may have of people taking part in your service / activity (only if you have people's consent to take their photo and use them).
- ✓ Quotes from people who have taken part in your service / activity.
- ✓ Emails / Letters from people to show their thoughts and experience of your service / activity.
- ✓ Completed ONS4 forms (both initial and final) to evaluate people's experience of your service / activity.

What will happen with the information you provide?

The LSCICB providers and their administrators will collect all the information that is sent in from all LSCICB funded services / activities across East Lancashire so that they can find out:

- ✓ How much LSCICB funding has been spent.
- ✓ What items the LSCICB funding has been spent on.
- ✓ How many people LSCICB funding has helped.
- ✓ The positive difference LSCICB has made to people and their health and wellbeing.
- ✓ How it reduced inappropriate use of urgent care services.
- ✓ How the LSCICB funding process can be improved.

Section 3 – What if I have never evaluated a project before?

Who can I contact for support and advice?

Please contact the LSCICB administrators if you would like:

- Extra evaluation packs and / or forms.
- Help to complete the evaluation process.
- To discuss your ideas for evaluating your funded service / activity.
- Any other questions you have about this funding stream.

Please send in your evaluation information to BPRCVS by the deadline dates given in the letter with your cheque

The address details of your local LSCICB administrator:

Group Support Team, LSC ICB Grants,

Burnley, Pendle and Rossendale CVS, 62/64 Yorkshire Street,

Burnley, Lancashire BB11 3BT

Telephone: 01282 433740 Email: groupsupport@bprcvs.co.uk

The following are copies of the templates you will need to complete all monitoring, evaluation and reporting for your project. Links to the individual documents will be sent to you separately if your application is successful.

In accordance with GDPR the data you have provided will be stored safely and securely in BPRCVS' file storage. The purpose of this data is for BPRCVS to access group/organisation details in relation to the award of funding for the purposes of monitoring and evaluation. Your records are completely confidential and only BPRCVS staff and relevant volunteers will have access to them. We are required to share this data with the named funder. No information will be shared with other third parties without prior agreement. BPRCVS will store this data no longer than our funder's requirements. To view your rights as the Data Subject please visit BPRCVS' privacy policy at www.bprcvs.co.uk/index.php/privacy-policy, printed copies available on request.

Wellbeing Measure (ONS4)

Initial Visit

Name of Group/Project:

Client Name/Initials/Postcode/Reference number:

The responses given will help us evaluate the impact of your project. All results are collated anonymously. Below are some statements about feelings. There are no right or wrong answers. For each of the questions please give your answer on a scale of 0 to 10, 0 being 'not at all' and 10 being 'completely'.

2 forms must be completed for each beneficiary – an Initial Visit Form and a Final Visit Form to enable measurement of the impact of the project

Carer/staff/teacher/volunteer can complete the form on behalf of a beneficiary who is unable to complete the form themselves.

	Statement	Please write a number between 0 and 10
1	Life Satisfaction: Overall, how satisfied are you with your life nowadays?	
2	Worthwhile: Overall, to what extent do you feel that the things you do in your life are worthwhile?	
3	Happiness: Overall, how happy did you feel yesterday?	
4	Anxiety: On a scale where 0 is 'not anxious at all' and 10 is 'completely anxious', overall how anxious did you feel yesterday?	

Any other comments you would like to make about how you are feeling or about the project:

Wellbeing Measure (ONS4)

Final Visit

Name of Group/Project:

Client Name/Initials/Postcode/Reference number:

The responses given will help us evaluate the impact of your project. All results are collated anonymously. Below are some statements about feelings. There are no right or wrong answers. For each of the questions please give your answer on a scale of 0 to 10, 0 being 'not at all' and 10 being 'completely'.

2 forms must be completed for each beneficiary – an Initial Visit Form and a Final Visit Form to enable measurement of the impact of the project

Carer/staff/teacher/volunteer can complete the form on behalf of a beneficiary who is unable to complete the form themselves.

	Statement	Please write a number between 0 and 10
1	Life Satisfaction: Overall, how satisfied are you with your life nowadays?	
2	Worthwhile: Overall, to what extent do you feel that the things you do in your life are worthwhile?	
3	Happiness: Overall, how happy did you feel yesterday?	
4	Anxiety: On a scale where 0 is 'not anxious at all' and 10 is 'completely anxious', overall how anxious did you feel yesterday?	

Any other comments you would like to make about how you are feeling or about the project:

Your name and position:.....

Q2. Please tell us the name of your LSCICB funded service / activity:

Q3. How much funding did you receive?

Q4. How much funding did you spend?

(If you spent less than what was received please contact BPRCVS for guidance.)

Q5a. How many sessions have been delivered?

Q5b. In total, how many hours of support/activity have you provided?

e.g 40 sessions at 2 hrs per session = 80hours

Q6. How many unique beneficiaries did your funded service/activity help?

Q7. What are the age ranges of your beneficiaries?

Number in each age range:

0 - 5 years	26 - 39 years.....
6 - 12 years.....	40 - 59 years.....
13 - 16 years	60 - 80 years.....
17 - 25 years	80 plus years

Q8. What health conditions do your beneficiaries have?

Please state main health condition and number of beneficiaries with the condition.

Health Condition	Number
Health Condition	Number
Health Condition	Number
Health Condition	Number

Q9. What is the ethnic background of your beneficiaries?

Please state the number of beneficiaries of each ethnic background.

English/Welsh/Scottish/N. Irish/British	Number
Irish	Number
Gypsy or Irish Traveller	Number
Any other white background	Number
White and Black Caribbean	Number.....
White and Black African	Number
White and Asian	Number
Any other Mixed/Multiple ethnic background	Number
Indian	Number
Pakistani	Number
Bangladeshi	Number
Chinese	Number
Any other Asian background	Number
African	Number
Caribbean	Number
Any other Black/African/Caribbean background	Number

Q10. What were the main reasons for your beneficiaries engaging with your project?

Please state reason for engagement and number of beneficiaries who engaged for that reason.

- | | |
|---------------------------------------|---------------------|
| 1. Reason for engagement | Number |
| 2. Reason for engagement | Number |
| 3. Reason for engagement | Number |

Q11. If you used volunteers to deliver your services/activities:

How many volunteers were used?

How many volunteer hours were provided?

Q12. Please provide examples of any additional unexpected benefits

Q13. How many referrals have you taken from the Social Prescribing Team?

(either actual referrals or with a SP Team Member accompanying a person to your project/group/activity).

Q14. How many people have you referred into the Social Prescribing Team?

(either just signposting or an actual referral where you have completed a referral form).

Q15. Please provide 2 x Case Studies

Please use the form provided and submit these via email in Word format.

Q16. Has your project achieved the expected outcomes? What evidence have you of this?

Please provide short narrative here. Submit you evidence, if submitting photographs please send via email as JPG or PNG attachments.

Q17. You have received support from BPRCVS to complete the application and throughout the life of the project including during monitoring and evaluation – please tell us how that was for you

For example:

Was the support you received useful?

Was the support you received timely?

Did the support you received help you to deliver your project?

Has the support you received increased your confidence in applying for funding in the future to this or other funding streams?

Would you recommend BPRCVS to others?

BPRCVS also has to report to funders and this will help us to prove to them that we are doing what we say – Helping people to help others and to ensure you do not lose your CVS – thank you

Thank you for taking the time to complete this evaluation questionnaire.

Case Study Template

Background E.g.: Who are they? Remember to anonymise – a description of the person will suffice e.g., older lady with arthritis or Mum of four young children, etc Who referred them in?	
Needs E.g.: Why have they been referred? What do they need?	
Actions taken E.g.: What did the group do? What activities did the group help them with?	
Outcomes E.g.: What difference did attending the activity make to the person?	
Comments E.g.: Something from the person themselves i.e., 'thank you', etc	

Small Groups Funding 2025 - 26 Final Evaluation Checklist

Organisation Name	
Project Name	
Amount Received	
Amount Spent	
Contact person	
Documents that all projects <u>must</u> submit (without exception)	
1.	Completed Final Report Form
2.	Evidence of spend: Receipts and accounts
3.	Completed Well Being Forms: Initial and Final (at least 5 completed forms)
4.	Case Studies x 2
5.	Signing in/attendance sheets/copies of registers
6.	Photographs (please email these to groupsupport@bprcv.co.uk)

**You can submit electronically. The links will be emailed to you following any offer on approved applications. Additional items like photos should be emailed. Please send all documents within the same timeframe e.g., one after the other or a batch at a time. Please email your documents to groupsupport@bprcv.co.uk
[For additional support please email the group support team.](#)**