# case studies

## implementing outcomes based accountability in children's services







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### Introduction

Outcomes Based Accountability (OBA) is an approach that Children's Trusts and Children's Services can use to assist with planning services and assessing their performance. The OBA approach focuses on outcomes that are desired and monitoring and evidencing progress towards those desired outcomes. OBA makes a distinction between two types of accountability:

- population accountability, which is about improving outcomes for a particular population within a defined geographical area
- performance accountability, which is about the performance of a service and improving outcomes for a defined group of service users.

Using the OBA approach entails the use of a Turning the Curve exercise. This involves identifying the desired outcome, projecting what would happen over time if nothing changed, and then planning changes which will lead to improved outcomes or 'turned curves' that move away from the initial projection. A second key feature of OBA is the use of performance management categories which distinguish between 'How much did we do?', 'How well did we do it?' and, the most important category, 'Is anyone better off?'

This report presents nine case studies which each focus on using OBA in Children's Services.

- Case study 1 focuses on using OBA to assist with developing the Children and Young People's Plan (CYPP) and to develop further parenting services and extended schools.
- Case study 2 focuses on applying the OBA approach to performance monitoring of all contracts across the

spectrum of Children and Young People's Services including, for example, mental health services and improving accessibility to leisure and positive activities.

- Case study 3 focuses on using OBA to review the CYPP and in relation to specific performance indicators, such as first-time entrants into the criminal justice system.
- Case study 4 focuses on the Children's Trust's use of OBA to support the monitoring of a locality-based project.
- Case study 5 focuses on how OBA has been used by the Business and Commissioning Team to improve the performance of services, and subsequently the lives of children and young people.
- Case study 6 focuses on the OBA approach from a regional perspective involving work with neighbouring authorities, and more locally on using OBA to reduce under-18 conception rates.
- Case study 7 focuses on how the OBA approach has been used to develop the CYPP, where it was introduced to ensure that the priority areas in the CYPP were more outcomes-focused.
- Case study 8 focuses on how OBA was used in 'hotspot' wards where there were long-standing issues related to high rates of teenage conceptions.
- Case study 9 focuses on the use of OBA to improve school attendance, alongside its use across the Children's Trust to address smoking, obesity and under-age conception rates.

#### Summary

This case study is based on the information provided to NFER through interviews with two local authority (LA) staff from a London Borough Council and background documentation supplied. Both interviews focused on how the OBA approach was used to assist with developing the Children and Young People's Plan (CYPP). The second interview also covered wider issues relating to using OBA to develop further parenting services and extended schools. This case study demonstrates how the OBA approach can contribute to the development of a CYPP that focuses more closely on outcomes and ensures the Children's Trust is able to evidence the impact on outcomes.

#### **Key learning**

OBA can be used by Children's Trusts as a joint planning tool when developing their CYPP. Implementation can be supported by:

- starting gradually select a service area to focus on, such as extended services, and then move into other service areas
- having experienced OBA mentors who can introduce the approach to others and support implementation
- having the support of senior managers

   for example involving staff at Director and
   Deputy Director level in workshops so they
   understand the principles of OBA and can see
   the potential benefits of using this approach
- tailoring the OBA approach as required – rather than using it too rigidly.

#### Who was involved?

The Knowledge Management team led on development of the CYPP. Key heads of service, including the Head of the Knowledge Management team, Deputy Directors and the leadership team, have been taking forward the OBA approach within Children's Services. The Children's Trust Executive Board agreed to the OBA approach being used for the development of the CYPP, and Board members attended the OBA training and workshops.

Many partner agencies involved in the Children's Trust also attended OBA workshops including the police, the health sector, housing associations, voluntary organisations and schools. Parents and children and young people also attended some OBA workshops.

#### How was OBA used?

The LA needed to revise their CYPP for 2009–11. They decided to use OBA to make their CYPP more 'alive' and meaningful for children and young people and for the professionals who would be working to deliver it. The LA also wanted to be able to evidence impact on the Every Child Matters (ECM) outcomes for inspections, including the Comprehensive Area Assessment.

In 2008, a needs analysis was carried out to identify the key issues and outcomes which needed improving. In early February 2009, the Children's Trust organised nine *Turning the Curve* workshops on the key issues including teenage pregnancy, parenting support, obesity and early years services. Children's Trust partners were invited to attend the workshops. The workshops started by identifying the outcome and the data available. Attendees were then given 'the opportunity to share all of our information and all of our knowledge about the issue'. 'Low cost, no cost' and 'off the wall' solutions were brainstormed 'to get some fresh thinking and innovation into the thought process'. Bringing together different perspectives was very beneficial as it enabled agencies to consider a range of approaches and options. For example, ideas put forward by representatives from the health sector on teenage pregnancy and obesity had not previously been considered by LA staff.

When drafting the revised CYPP, the ideas developed in the *Turning the Curve* workshops were included, including the low cost or no cost ideas which OBA encourages. The LA tried to use the OBA approach to focus the CYPP on outcomes rather than on processes. In addition to the OBA approach being used to develop the overall CYPP, specific teams within Children's Services used OBA to monitor performance within their service areas.

- **Extended services** use OBA to monitor the performance of their services in terms of quantity and quality. This informs the commissioning process. For example, in schools the quantity measures include the number of children attending an out-of-school club and the number of sessions attended, and the quality measures include improved school attendance.
- Extended services have used OBA to develop their parenting strategy by conducting a *Turning the Curve* workshop with key partners. The focus was on the outcome of parents being confident and having a positive relationship with their children. A performance management framework based on the OBA model has been developed to monitor the success of the service.
- The Local Safeguarding Children's Board used the OBA methodology to assist with ensuring their annual plan had more of an outcomes focus and to strive to identify appropriate outcomes relating to safeguarding. Report cards are one element of this and officers are working to identify outcomes to include in the report card rather than process measures but this has proved difficult to achieve (report cards set out plans to improve outcomes with indicators that can be used to monitor progress).

The barriers and challenges when implementing OBA identified by interviewees included:

 the approach not being embedded across the Children's Trust as a whole but led by Children's Services which is an agency (the LA) within the Children's Trust. Although Children's Trust partners were involved in OBA through, for example, the *Turning the Curve* workshops, it was felt that greater engagement of strategic managers across the whole Children's Trust may have helped embed the use of OBA more widely. One interviewee felt that OBA could become more embedded by offering more training and evaluating the impact of using OBA and disseminating learning more widely

- **lack of time and capacity** to involve all of those required within the Children's Trust, particularly in the *Turning the Curve* workshops
- managing change: Embedding the process of OBA requires managing a process of change from a focus on processes to a focus on outcomes. One interviewee felt that having an OBA champion could contribute to overcoming this.

#### Impact

OBA has enabled Children's Trust partners to focus on outcomes when developing their CYPP priorities. OBA has also enabled the extended services team to have a stronger focus on outcomes when monitoring the performance of services. As a result some services which were not delivering good enough outcomes are no longer funded.

Interviewees felt it is perhaps too soon to assess the impact that using the OBA approach has had on outcomes for children and young people. However, the gap between the most disadvantaged young children and other young children in the Early Years Foundation Stage Profile (NI 92) has narrowed in 2009.

#### Next steps

The LA intends to evaluate the impact of OBA. One interviewee reflected that OBA could also be used within the LA for 'tough decision making' when preparing for anticipated future budget cuts. If there is less funding available, OBA could help determine what to focus on, and where to prioritise future spending so as to achieve desired outcomes.

#### Summary

This case study is based on the information provided to the NFER through interviews with two local authority (LA) staff from a County Council in the South East of England and on background documentation they supplied. Both interviews focused on applying the OBA approach to performance monitoring of all contracts across the spectrum of Children and Young People's Services including, for example, mental health services and improving accessibility to leisure and positive activities.

#### Key learning

OBA can be used as a framework for commissioning and contract monitoring. Implementation can be supported by:

- using the OBA performance grid to distinguish between indicators which focus on 'How much do you do?', 'How well do you do it?', 'Is anyone better off?'
- using action learning sets facilitated by an external consultant, which was a particularly useful way of 'honing in my thinking about it that I couldn't have done just by reading a book ... or using a tool kit'
- including all relevant parties 'It might be a bit time consuming but it will result in much smoother working.'

#### Who was involved?

The Children and Young People's Trust (CYPT) Board support the use of OBA and agreed to the commissioning strategy across Children's Services and the Primary Care Trust which embodied the OBA approach. The divisional director for commissioning and the joint commissioning divisional manager in the Children's Services directorate have taken the lead on driving forward the OBA approach. They both attended team meetings across the different service areas to discuss the reasons for using OBA and to highlight the potential benefits. In turn, operations managers who report to the divisional manager use the OBA approach in procurement.

#### How was OBA used?

Approximately two-and-a-half years ago (in 2007), the LA decided to start using OBA for the performance monitoring of all contracts to ensure that service delivery was more focused on outcomes. It stated: 'Our strategy is to be outcomes focused, and this was a tool that helps you to be outcomes focused.' In the past monitoring was said to be more focused on how many people used a service and not what happened as a result of using the service. The OBA outcomes matrix (see Figure 1) was incorporated into the standard service specification template and the monitoring framework to help distinguish between outputs and outcomes and quantity and quality with the focus on 'How much did we do?' 'How well did we do it?', and 'Is anyone better off?' Each time a service specification for a contract is developed, the outcomes matrix framework is used for developing a set of performance measures. An extract from an outcomes matrix framework for Child and Adolescent Mental Health Services (CAMHS) is included in Figure 1.

Staff attended various workshops and seminars which were organised by Local Government Improvement and Development (LG Improvement and Development) including action learning sets.<sup>1</sup> These events enabled staff from different LAs to share ideas and issues on implementing OBA in their authority.

CASE STUDY 2

#### Figure 1 Extract from outcomes matrix framework for CAMHS

	QUANTITY	QUALITY
OUTPUT or EFFORT	<b>Children and young people:</b> e.g. number of referrals e.g. number of service users	Children and young people:
		e.g. waiting: percentage offered an assessment within 4 weeks
		e.g. priority access for specific vulnerable groups, such as percentage of service users 'looked after' or 'care leavers'
OUTCOME or EFFECT	e.g. customer satisfaction: NUMBER who at the end of the service, children and young people report the main presenting problem improved e.g. NUMBER of re-referrals within 12 months	e.g. customer satisfaction: PERCENTAGE who at the end of the service, children and young people repor the main presenting problem improved e.g. PERCENTAGE of re-referrals within 12 months
		5

OBA is routinely being used by staff involved in commissioning to provide a framework for thinking about performance indicators. OBA assists with ensuring a focus on how to measure outcomes. For example, every contract incorporates the OBA grid with all parts populated, in particular, the 'bottom right' box on outcomes.

In order to help staff adopt the OBA approach, a series of internal *Turning the Curve* exercises have been held with staff from a range of services including mental health services, teenage pregnancy and occupational therapy. A workshop has also been run for local voluntary sector organisations. One interviewee highlighted that OBA was largely embedded in the process of defining service level agreements, monitoring and receiving feedback: '...I wouldn't be able to bullet point and say we are doing these things [using the OBA approach because] it has sort of become embedded in our work'.

The main barriers and challenges of using OBA have been:

 ensuring that all staff understand the approach – this may take time and requires persistence because of the need to learn the concepts which are part of the OBA approach and 'sometimes you can't predict what you have to do for people to have that light bulb moment' so 'if they don't get it, you have to try again'

- writing service specifications based on outcomes – this was difficult for some staff when the approach was first introduced. However, this challenge has slowly been overcome by staff providing support and guidance to each other
- ensuring that all staff outside of the commissioning team have an understanding of OBA – this is necessary to ensure that all can contribute to defining appropriate outcomes and that there is a consistent approach adopted. This requires additional resources to 'spread the message'.

#### Impact

The OBA approach has helped staff to devise measurable targets and outcomes and become more focused about what they are trying to achieve. All contract monitoring procedure forms and monitoring of service level agreements focus on outcomes.

Service providers present routine feedback on service-user views and use a formal system of a 'before and after' questionnaire with users to measure impact. One interviewee said: 'The feedback process as a result of OBA is now an established process that we did not have previously.'

The OBA approach has given staff who commission services a way of focusing on the five

outcomes of the Every Child Matters agenda. It has also provided clarity about the distinction between inputs and outcomes.

OBA has promoted a collaborative approach to working towards a set of outcomes and has ensured that staff are accountable for those outcomes. At this stage the LA had not identified specific whole population outcomes that had improved as a result of OBA because of the difficulty of attributing causality in some cases. However, for service specific outcomes, the commissioning annual report to the Children and Young People's Trust highlighted improved outcomes for children and young people in several areas and OBA was the key tool in gathering this information.

#### Next steps

Although the use of OBA is embedded in the strategic approach to contracting, interviewees

felt that there remains scope for further development in taking forward OBA at an operational level. The next steps will involve monitoring whether the outcomes are improving, and if not, repeating a *Turning the Curve* exercise to explore alternative actions. In those instances where outcomes are improving, discussions will focus on how further improvements can be made. One interviewee said: 'We have now got a way of measuring outcomes so we need to go on to all the things associated with that so you could argue it's just the start of the journey really.'

#### Note

1 Action learning is a process of learning and reflection. It normally takes the format of a group session, where participants are encouraged to share their experiences, skills and information with others.

#### Summary

A Children's Trust in the North West of England has used OBA to review the Children and Young People's Plan (CYPP). In addition, the OBA approach is used in relation to specific performance indicators, such as first-time entrants into the criminal justice system.

This case study is based on the information provided by two local authority (LA) staff and background documentation supplied. One interviewee gave an overview of how OBA has been used by the Children's Trust, while the second focused more on applying the approach to work on first-time entrants to the criminal justice system.

#### **Key learning**

OBA can be used to help make the CYPP more outcomes focused. This can be facilitated by:

- ensuring there is high-level commitment to OBA within the Children's Trust. This entails senior LA officers engaging staff by providing support and guidance about the approach and ensuring staff are aware of how it can influence outcomes
- making OBA accessible to all staff, for example through the promotion of good practice and by using common terminology or 'branding' to describe OBA so that it is accessible to a range of stakeholders, including young people
- **training people** in OBA, including partners from across the Children's Trust.

#### Who was involved?

The performance, planning and commissioning team within Children's Services are the core officers involved in OBA and the Children's Trust Development Officer has championed the use of OBA across the Children's Trust sub-groups. Staff from across the Children's Trust (for example, the Making a Positive Contribution outcomes subgroup, related to the National Indicator NI 110: Young people's participation in positive activities), have been involved in OBA workshops.

#### How was OBA used?

OBA was introduced after a small number of staff attended a Mark Friedman conference on OBA three years ago (in 2006). As a result of the conference, the format for information sharing workshops was replaced by the *Turning the Curve* element of the OBA approach. This involves using data and stakeholder knowledge to understand the story behind the baseline and provides a framework for planning how to achieve results which are an improvement on the projected baseline. The Children's Trust decided to use OBA in the review process of the CYPP and incorporated it into the terms of reference of the performance improvement group. The performance, planning and commissioning team led a pilot initiative which involved each of the outcome-based sub-groups selecting one performance measure linked to one of the CYPP priorities. A *Turning the Curve* exercise was undertaken in order to understand better what was working and what could be improved. This pilot was monitored by the performance improvement group and was found to be successful in a number of ways, including those noted below.

 Partner agencies found it useful to share practice and ideas on preventative services in order to recognise what was working well and to identify any gaps.

 Clear pointers were established on how to work effectively within multi-agency teams.
 Subsequently, where there were concerns over performance on a particular indicator, the OBA approach was used to bring partner agencies together to undertake a *Turning the Curve* exercise and devise an action plan to address performance concerns.

The performance improvement group have embraced the OBA approach as a useful tool to help improve outcomes and have used the approach to help ensure the priorities in the CYPP were more outcomes-focused, by establishing performance indicators to be measured using OBA. The group felt this would help to raise awareness, and further embed the OBA approach, across the Children's Trust.

The Making a Positive Contribution sub-group used OBA in a different way in July 2009, in their work on reducing first-time entrants to the criminal justice system (National Indicator NI 111). The group used OBA to understand why there had been a significant reduction in the number of firsttime entrants in 2008/09 compared to the previous year and to measure the extent to which the initiatives undertaken by the Children's Trust had an impact on this. In order to do this, the group held a workshop and asked participants to share their views on the causes and forces influencing the improvement and to consider the story behind the improvement by sharing case studies and looking at organisational and structural issues. Following this, the group completed an OBA performance matrix.

The barriers and challenges with using OBA related to:

 ensuring there was commitment and support at a senior level – the interviewees felt that, although there was high level verbal commitment to OBA, in some cases, it was seen 'as useful in one scenario rather than as something [the LA] can use more widely'. Interviewees felt that, with further support from senior LA officers 'we could make much more rapid progress'.

- ensuring enough staff were involved there seemed to be only a small group of OBA 'champions' within the LA and therefore 'a change in staff could have a big effect on whether OBA would really continue to be used'. Broadening the staff involved through increasing training opportunities would address this issue. In addition, the promotion of successful work and good practice was seen as essential in acting as a 'springboard to more universal commitment'.
- enhancing the accessibility of OBA for more staff – it was reported that some officers were initially put off by the language used in OBA. One way suggested to help improve this was to ensure the OBA language is made accessible to all stakeholders, including young people, through the use of different terminology. For example, this could involve referring to *Turning the Curve* exercises as data and information sharing meetings.

#### Impact

The Children's Trust have used OBA in some aspects of their work, such as performance monitoring, and this had been beneficial. For example, one interviewee reported that 'our reviewed CYPP is much more outcome focused since we have adopted an OBA approach' and, similarly, another commented on the 'clear and methodological way of looking at outcomes' achieved by the use of OBA.

OBA has had a positive impact on partnership working. Reflecting on the recent work on firsttime entrants, one interviewee commented it was an 'an excellent example of how people can be very much involved in performance management, because it can easily lapse into just one person reporting on figures'. Similarly, another interviewee reported that outcome sub-group members found the *Turning the Curve* exercises helpful in order to understand the range of agencies who have a part to play in making improvements, and this is important for partnership working.

Both interviewees acknowledged that it was not yet possible to evidence improved outcomes for children and young people as outlined below.

The use of OBA did not yet sufficiently adhere to every stage of the process in order for interviewees to be able to state that 'OBA has definitely helped us to change direction or ultimately achieve better outcomes for young people'.

OBA has been used to identify the reasons behind the success in reducing the number of first-time entrants to the criminal justice system. OBA provided a framework enabling partners to continue to focus on the good practice identified. Data on the number of first-time entrants in the next monitoring period will help to evidence the impact of OBA on outcomes for young people.

#### Next steps

OBA will continue to be promoted across the Children's Services team by sharing the practice to date.

#### Summary

This case study is based on information gathered by NFER through interviews with two local authority (LA) officers, supported by background documentation. One of the Local Area Agreement (LAA) priorities in a rural County Council in the South West region has been to address the high levels of deprivation and challenging outcomes for children and young people in one of its towns. The Children's Trust is addressing the issues in the town through several outcomes-focused 'Narrowing the Gap' programmes. Staff within the authority felt that OBA would be a suitable model to help drive forward their outcomes-focused agenda for the town as it would focus partners more on 'outcomes straight away rather than being bogged down by ... processes'. They are in the initial stages of using the approach to ensure a 'Healthier and Safer Homelife' for children and families.

This case study outlines the Children's Trust's use of OBA to support the monitoring of a localitybased project, which is currently at an early stage of implementation.

#### **Key learning**

Implementation of the OBA approach can be supported by:

 ensuring the OBA model is understood. It was felt to be crucial for Children's Trust partners to 'understand the model and the story' together to ensure joint buy-in. Most agencies work in a process driven way and, to ensure commitment, the OBA approach has to be presented confidently and comprehensively so staff can see how it can support improved outcomes. Interviewees felt the OBA approach was easy for different groups of people from different backgrounds to understand, and could help to drive forward the improvement of outcomes

- agreeing a common language at the start of the project. It is vital to ensure that the OBA language, of outputs and outcomes, is understood by all involved so that issues are addressed with an outcomes focus
- using a facilitator who is not closely involved with any of the key partners. The facilitator can adopt an enabling role, rather than being 'part of the group'
- ensuring effective leadership of the OBA approach. OBA will help to identify the action needed to improve outcomes. Good leaders are required to support the change process.

#### Who was involved?

The Children's Trust began using OBA in March 2009 and partners from both statutory and voluntary agencies have been involved in taking the 'Healthier and Safer Homelife' project forward. The Children's Trust team, includes county and district councillors, representatives from the police, schools, the Primary Care Trust and faith community groups. Colleagues from the Youth Service, Connexions and Jobcentre Plus have also had an active role in the project. Planning and service delivery partners were also involved.

There is good representation from a range of services on the project board and the project working group, with the recognition that 'the whole community has a responsibility for the wellbeing of children and their families, rather than just one service'.

#### How was OBA used?

The LA identified one of its towns with a high level of deprivation, where it was felt that OBA could be used to help improve outcomes, particularly for vulnerable children. The town has higher than average levels of:

- under-18 conceptions
- accident and emergency attendance and emergency hospital admissions
- drug-related and violent crime
- childhood obesity.

The Children's Trust is addressing these issues through a number of outcomes-focused 'Narrowing the Gap' programmes and OBA is being used to help drive forward this agenda. As one interviewee explained: 'There's already some good work going on in [the town], but [OBA] is all about coordinating it and bringing it together' by providing a mechanism for partners to focus on where they want to get to rather than 'a process driven way of working'.

Due to the multi-disciplinary nature of the issues within the town, the Children's Trust decided to use OBA to focus on a priority area that was 'linked to the whole family, not just the child', and which cut across multiple service areas. The project group agreed to use the OBA approach in the 'Healthier and Safer Homelife' project. OBA was seen as an effective tool which could help the Children's Trust to focus on outcome indicators. The OBA approach provided the opportunity for the team to map out the entire project from inception through to expected outcomes. Two Turning the Curve workshops have been held. These were attended by key partners, including members of the town's Poverty Action Group, childcare providers and coast and countryside services. The target population was identified, an action plan was developed and the roles of each agency agreed. A further meeting

took place with a focus on mapping services and undertaking a gap analysis.

At this early stage of implementation, there were no major barriers associated with using OBA, but interviewees identified the following more minor issues:

- **the language**: ensuring the language of OBA was consistently understood by those involved across the Childrens' Trust, in particular the meaning of outcomes in contrast to outputs
- progressing sufficiently: while the OBA approach has been well received, implementation had been slower than expected. This was felt to be because initially OBA had been championed by only one or two people, although the pace of change was improving as the Children's Trust adopted OBA as a preferred way of working.

#### Impact

At the time of the interviews, the implementation of the OBA approach was at an early stage, and it is therefore too soon to comment on whether outcomes for children and young people have improved or whether OBA is the appropriate model to adopt. However, at an organisational level OBA was providing an opportunity for partners across the Children's Trust to look at issues in a different way.

#### Next steps

Following the *Turning the Curve* workshops, the project team have identified a range of health-related indicators for children and families in the town which they will continue to collect to create a baseline against which outcomes can be recorded, and against which the impact of OBA can be measured. They are developing an Action Plan and score cards to show progress on the identified indicators.

#### Summary

This case study is based on the information provided to NFER through interviews with two local authority (LA) staff and background documentation supplied. Both interviews focused on how OBA had been used by the Business and Commissioning Team. This case study demonstrates how OBA can be used to improve the performance of services, and subsequently the lives of children and young people.

#### **Key learning**

OBA can be used by LAs and Children's Trusts as a way of performance managing services, by ensuring they are focused on outcomes. Implementation can be supported by:

- ensuring capacity and engagement from professionals involved, in terms of being given the time to attend OBA training and being able to evidence the work they are doing by collecting information and measuring the outcomes. Teams involved need to be clear about the benefits of evidencing outcomes using OBA
- **having an OBA lead** who is able to be the main point of contact, provide support, and gather and coordinate information.

#### Who was involved?

The Business and Commissioning Team have used the OBA approach to develop locality commissioning. A variety of individuals at different levels have been involved, including key members of teams and senior managers. The Quality Compliance Officer leads OBA for both locality commissioning and action planning in the teams working with vulnerable groups of children and young people. This includes working directly with service providers. The LA funded a consultancy agency to provide support with OBA through initial training and action learning sets.<sup>1</sup>

#### How was OBA used?

Before OBA was implemented, there were a wide range of projects for children and young people in the LA which were funded through the Inclusion Fund, and procured through a straightforward and open application process. Services and organisations were able to request funding for a project by submitting an application. These projects supported large numbers of children and young people, but the families who were using the services tended to be those who were very good at accessing support, rather than the harder-to-reach families with higher levels of identified needs that the LA wanted to target. These target groups included: children with disabilities or complex needs, poor school attendees, young people who had been excluded, children on the child protection register, rurally isolated children, migrant families, young carers and children at risk of anti-social behaviour or alcohol/substance misuse.

The use of OBA to support the process of ensuring that services that were procured by Children's Services were targeting the children and young people the authority wanted to target was introduced as a pilot in 2008. Prior to this, in 2007/08, 80 projects had been funded enabling over 9,000 children and young people to access short-term activities but these children and young people were not necessarily from the target groups. In contrast, in 2008/09, fewer projects (24) had been funded, as a result of detailed monitoring through OBA identifying which services were unable to achieve the aim of targeting specific groups. These 24 projects were focused on providing on-going support at an early intervention level for children in the target groups, such as: access to emotional health and well-being support

in schools, positive diversionary activities and targeted, family-based support for young offenders.

The services that were purchased were monitored using the OBA performance matrix which focuses on quantity, quality and outcomes of the service:

- quantity how much do you do? numbers of children and young people supported by the project
- quality how well do you do it? how positive they found this support, based on service-user feedback returns
- outcomes / effects is anyone better off? – for instance, emotional support in schools was measured by changes in selfesteem, and behaviour in school and at home.

An OBA *Turning the Curve* workshop is held to deal with any performance issues, such as low levels of feedback from children and young people who use the services. Although all services ask for feedback, the response rate was felt to be 'quite low'. The Business and Commissioning Team will use a *Turning the Curve* workshop to work with service providers to try to find out why this was the case, look at good practice from other LAs around service user feedback and then generate specific action plans for service providers to improve the response rate from users of their services.

Following the success of the pilot in targeting services to ensure attendance of harder-to-reach groups in May 2009, the Business and Commissioning Team began to use OBA to assist with locality action planning. The locality teams participated in an event to ensure that they had a good understanding of an action plan, including the use of SMART principles (Specific, Measureable, Achievable, Realistic and Timebound), and how they would assess impact rather than focus on processes. The action plans will be monitored on a quarterly basis to see if they are having the intended impact of ensuring that the most vulnerable target groups use the services. The main initial challenges for implementing OBA with locality teams were as follows:

- workload concerns: Professionals were concerned that OBA would create a lot of additional work for them rather than viewing it as evidencing work they were already undertaking
- service providers feeling threatened: In addition to the teams, the change was also said by one interviewee to be viewed by some service providers as 'very threatening, particularly if it identifies that the services they are providing are not having the desired outcome, with the knowledge that the outcome of that is that they cease to exist'.

Information sharing with some of the multidisciplinary locality teams could have been improved, such as highlighting the importance of attending the training events and workshops. Some professionals within the localities felt OBA was not in their remit, and still do not understand what OBA means. If more professionals had been involved from the start they would all be 'singing from the same hymn sheet rather than it being a cascade effect'.

#### Impact

OBA has enabled the LA to 'evidence some excellent outcomes for children and young people'. Data on services included in the pilot show fewer children and young people receiving support overall, but an increase in numbers of children and young people from the target groups receiving support, as a result of the more focused service provision. In 2008/09, approximately twothirds of all children receiving support were from a target group.

Large percentages of children and young people reported positive outcomes following the targeted services and support they received:

 78 per cent (1395 children and young people)<sup>2</sup> made new friends (NI 50)<sup>3</sup>  59 per cent (106 children and young people) reported now having someone to talk to (NI 50)<sup>3</sup>

 56 per cent (2554 children and young people) accessed inclusive/diversionary activities (NI 110)<sup>4</sup>

The majority of these positive outcomes were an improvement since the implementation of OBA and interviewees felt that OBA was associated with these positive changes because its use had led to more targeted services. That so many children made new friends was a 'big thing' for the LA, because a large proportion of children within this LA live in rurally isolated areas. In addition, 67 per cent of young offenders had not reoffended 12 months after their targeted support ended (NI 19).

OBA has proved useful for practitioners too, as it enables them to evidence the positive impact their work has on children and young people rather than just how much work they have done. The focus on outcomes is beneficial because 'everybody is always working really hard and doing their best, but to be able to evidence what that has actually meant for young people is a real boost'.

The Business and Commissioning Team have also found OBA useful because, as one interviewee said, 'it basically tells us what works and what doesn't work'. It achieves this by providing a mechanism that allows them to determine which localities are not targeting as well as they could, and where more work is needed, for instance, where practitioners are not linking up well with available services that Children's Services has funded. As a result of detailed monitoring through OBA, the LA have decommissioned some services which have not been able to achieve the required outcomes, and reinvested the money elsewhere. This has led to a reduced number of projects funded working with fewer children and young people overall, but more work with specific target groups of children and young people.

#### Next steps

The LA intends to embed OBA fully within locality commissioning and locality action plans, and more widely across Children's Services. In the longer term, the aim is to use OBA universally across the LA.

#### Notes

- 1 Action learning is a process of learning and reflection. It normally takes the format of a group session, where participants are encouraged to share their experiences, skills and information with others.
- 2 These numbers are based on a range of data sources and funded projects provided by the Children's Trust.
- 3 National Indicator 50: Emotional health and wellbeing children and young people user perception.
- 4 National Indicator 110: More participation in positive activities.

#### Summary

This case study is based on the information provided to NFER through interviews with two local authority (LA) staff and background documentation supplied. One interview focused on the OBA approach from a regional perspective involving work with neighbouring authorities. The second focused more locally on using OBA to reduce under-18 conception rates.

#### **Key learning**

OBA can be used as a framework to promote collaborative working between LAs and as a framework for Children's Trusts to plan to tackle particular issues such as reducing teenage conception rates. Implementation can be supported by:

- ensuring it is driven from the top down

   make sure that there is senior management
   approval otherwise implementation could
   become more challenging than it needs to be
- collaborating with other LAs in the region – to share skills and knowledge, thus in turn, developing expertise in OBA at a regional level
- planning it in ensure that use of OBA by individual staff is manageable by ensuring time to implement it effectively is factored into staff workload.

#### Who was involved?

At a regional level, officers across five LAs and the Regional Improvement and Efficiency Partnership (RIEP) are involved in a project that aims to cascade the benefits of the OBA approach to other LAs. This is managed by a project board and the roles of the staff involved differ but largely focus on commissioning.

At the local level, colleagues from Children's Services and the Primary Care Trust (PCT) are working closely to take forward the OBA approach in order to reduce under-18 conception rates. Colleagues from the Youth Service as well as education officers are involved in the *Turning the Curve* exercises and action learning sets. One said that 'there is quite a wide range of people that we have been speaking to and getting them involved to help make this a successful project'.

#### How was OBA used?

At a regional level, the use of OBA had previously been inconsistent and shared learning was not disseminated. The LA decided to bid for funding from the RIEP to share the benefits of OBA with neighbouring authorities. The project launched in March 2009 with a regional conference. Officers were asked to identify projects where OBA could be used to improve outcomes for children and young people. Ten out of twelve LAs in the region decided to participate. Each LA nominated a local project. Six action learning sets were created to promote the regional use of OBA.<sup>1</sup> The learning sets are externally facilitated and provide officers with support when applying OBA to their projects. The action learning sets have also provided an opportunity to network and discuss challenges and issues. In addition, there is also some taught input on OBA. The LA decided to promote OBA at a regional level because the interviewee felt that, having attended a few sessions organised by Local Governemnt Improvement and Development (LG Improvement and Development), 'there is a growing evidence base that it works'. From a regional perspective the barriers and challenges included:

- ensuring capacity and developing a skills base – staff need time allocated to be able to focus on OBA and attend the action learning sets. Equally, time is needed to build skills and confidence in using the approach
- minimising the risk that OBA might be perceived to be 'just another initiative' rather than a tool to assist with planning. In order to overcome such perceptions, OBA is being embedded through making it part of, rather than additional to, individual staff's existing work, and disseminating its benefits regionally.

At a local level, under-18 conception rates were identified as a particular challenge facing the LA. These rates were higher than those of other authorities in the region. The OBA approach has been used in developing the local teenage pregnancy action plan to try and seek a better understanding of cultural attitudes that prevail within the area that make it socially acceptable to become pregnant at an early age, and to try and *Turn the Curve* in order to reduce the teenage pregnancy rate. To achieve this, the LA has arranged a series of *Turning the Curve* exercises with various groups, including young parents and those over the age of 18, to try and explore and gather information on the culture of under-18 conception. In addition, a working group has been established to implement OBA and to ensure that the required outcome is achieved.

The two main challenges in terms of using OBA to reduce under-18 conception rates were:

• **overcoming a deep rooted culture** within the area of the social acceptability surrounding teenage pregnancy. It is anticipated that the planned *Turning the Curve* exercise with young people to identify the cultural attitudes towards teenage pregnancy will help establish how these can be challenged  ensuring that there is real understanding of the OBA model – OBA may appear straightforward because 'it is about speaking in plain language and setting out a plain simple outcome', but the term 'OBA' can be used 'a bit loosely' and therefore care is needed to ensure it is fully understood.

#### Impact

After only six months, following the introduction of OBA in the LA, it was perceived to be too soon to be able to identify improved outcomes for children and young people. It was hoped this work would have an impact within a year. Feedback from the *Turning the Curve* exercises with different groups in relation to teenage pregnancy will provide a good indication of whether the right things are currently being done at a local level, and if not, help to identify what changes need to be made. As an interviewee observed: 'I think the simplicity of it [the OBA approach] is definitely going to help us break down any issues.'

The regional strand of the project has helped to further promote collaborative working in the region. More specifically, it has helped LAs to share their skills sets, and thus further develop expertise.

Similarly, it was felt that collaboration between the LA and PCT to tackle the issue of under-18 conception had been beneficial in terms of building relationships for the future.

The OBA approach, which helps steer the focus away from inputs and outputs and towards outcomes and making a difference was felt by one interviewee to be a positive change: 'I think that philosophy really does help because I think sometimes you get caught up in looking at what's going on ... rather than whether it is making a difference'.

#### Next steps

The regional project will be reviewed when the learning sets are completed in December 2009. There could potentially be a phase two of the project and discussions are currently taking place about what this might involve.

The next steps for OBA at a local level will be dependent on the success of the current projects that are under way. The LA is planning to continue using OBA because it focuses on what matters most – the outcome.

#### Note

1 Action learning is a process of learning and reflection. It normally takes the format of a group session, where participants are encouraged to share their experiences, skills and information with others.

#### Summary

This case study is based on the information provided to the NFER through interviews with two local authority (LA) staff from a County Council in the East of England and on background documentation supplied. The focus of the case study is on how the OBA approach has been used to develop the Children and Young People's Plan (CYPP). OBA was introduced to ensure that the priority areas in the CYPP were more outcomes-focused.

#### **Key learning**

In order to use the OBA approach in developing a CYPP it is recommended that Children's Trusts:

- ensure all relevant staff understand the OBA methodology and have ownership of it

   this requires time for staff to 'get to grips' with OBA and champion it at strategic level and team level to support the routine use of OBA
- **use data effectively** think through the key data that is available before doing a *Turning the Curve* exercise

#### Who was involved?

Initially, the Assistant Director of Children's Services championed OBA. More recently, the performance and improvement team who provide support and drive the processes for developing and refreshing the CYPP have helped move the OBA approach forward at a strategic planning level. The team that is responsible for overseeing the district Children's Trust partnerships will champion the OBA approach across the districts. There are also other 'champions' who are starting to spread the use of OBA across Children's Services in the planning process.

#### How was OBA used?

OBA was first used to develop the 2008/09 CYPP because a senior manager with responsibility for performance and planning considered it to be a strong methodology that would improve the prioritisation and focus on outcomes in the CYPP. The previous planning process had resulted in a large number of priorities without any clear prioritisation. As a senior manager explained: 'We decided that this would be a way of radically changing the methodology we used for drawing up the plan and actually focusing it properly on the right outcomes.'

The CYPP priorities were identified at a strategic level informed by national priorities and local needs. For each CYPP priority, workshops were held with representatives across the partnership, including staff from the LA, schools, police and the health, probation and fire services and the voluntary and community sector, to explain the conceptual framework of OBA and to identify the target population. The workshops also focussed on what success would look like and which performance measures would help to indicate whether improvements had been made.

As noted below, there was some improvement in outcomes identified as a result of the OBA process. The OBA methodology was viewed as a 'helpful framework ... it is really good to have that tight focus on restricting your indicators and your actions', and it has been used to refresh and extend the CYPP for 2009/11. Similar sessions were held with officers as in 2008 but these were simplified: for example, limited to explaining the approach and providing examples of how OBA has helped to achieve outcomes. In addition, a few sessions were held for officers involved in the strategic planning work. These sessions introduced the OBA methodology and provided an opportunity to try out a *Turning the Curve* exercise in a practice environment.

The main barriers and challenges in using the OBA approach included the following.

- The approach takes time to understand and is particularly difficult for individuals who become involved part way through. It was suggested that, if OBA is to continue to be used as the main methodology, new staff should be given training and coaching about the approach at their induction.
- It is essential to gain acknowledgement and understanding of the distinction between a population and a performance measure and maintaining a focus on outcomes.

#### Impact

The LA has seen continued improvement in some of their educational achievement areas. More specifically, aspects of narrowing the gap for minority ethnic groups have been positive. However, it was felt to be difficult to attribute improved outcomes for children and young people directly to OBA, as one interviewee noted that the OBA approach can lead to improvements in planning, which in turn may lead to improvements in outcomes as a result of better planning. The approach has 'helped them [staff] to have a clear focus, to keep their eye on the indicators and to be confidently asking the questions about impact'.

In terms of the staying safe priority area, it was felt that OBA has encouraged officers to look for

innovative ways to collect information identified as key through the OBA process, which is difficult to measure or for which data is not readily available. For example, the LA has trained a group of young people to act as information gatherers and investigators in their own school about, for example, bullying. When staff have scrutinised the data which emerges from the information gathering exercise and have identified the key issues, they contact the trained students and ask them to find out more information.

The OBA approach has resulted in more frequent performance monitoring linked to clearer performance indicators – as one interviewee stated: 'we have got more information, more regularly that we can look at and that is a good discipline' – and fits with a wider commitment in Children's Services to enhance performance management. Staff now have a better understanding about why the priorities have been identified and the actions that need to be taken in order to achieve them.

#### Next steps

Interviewees indicated that OBA continues to be regarded as a useful methodology to support the planning process because of the focus on priorities, outcomes, indicators and the key actions required to work towards the outcomes. Officers are currently in the process of refreshing the action plans within the CYPP which will involve a series of *Turning the Curve* exercises focusing on progress. There will also be ongoing monitoring and measuring progress against performance indicators.

#### Summary

This case study is based on information provided to NFER through interviews with two local authority (LA) staff from a County Council in the East Midlands, and on background documentation supplied.

Children's Services used OBA to *Turn the Curve* in 'hot-spot' wards where there were long-standing issues related to high rates of teenage conceptions, and although schemes were in place to address this, the conception rate in these areas had not noticeably decreased. *Turning the Curve* was appealing as an alternative way of examining why underage conception rates in 'hot-spot' wards were not reducing quickly enough. The following demonstrates how OBA can be applied to reduce the under-18 conception rate (supporting National Indicator 112).

#### **Key learning**

OBA can be used as a framework for planning how to improve specific outcomes such as reducing the under-18 conception rate. It has helped the Children's Trust to focus directly on this particular outcome. Implementation can be supported by:

- forward planning being clear about the purpose of OBA and how it will be applied
- **investing in time** to help people at both the strategic and operational level understand the different concepts associated with OBA.

#### Who was involved?

The Local Area Agreement (LAA) Programme Manager and the Local Teenage Pregnancy Coordinator were both involved in the OBA work. Partners from the health team, police and regional teenage pregnancy coordinators attended a one-day event.

#### How was OBA used?

Although overall levels of teenage conceptions across this LA are lower than the national average, in some 'hot-spot' wards, teenage conception rates are much higher than the national average (more than 60 per 1000). The conception rates were not improving and the Children's Trust implemented OBA in mid-2008 to enable them to *Turn the Curve* and reduce the under-18 conception rates in the hot-spots.

A one day event using the *Turning the Curve* methodology was held to bring professionals based in the 'hot-spot' wards together. A range of partners attended the event, including those from the health service and the police. The event was externally facilitated by a Teenage Pregnancy Coordinator from the North West region who shared her experience of using OBA in reducing the under-18 conception rate. Participants examined ways in which they could:

- gather intelligence across the partners to identify issues in these wards: that is, to understand the 'story behind the baseline'
- establish improved ways of working collaboratively
- use new initiatives to try and reduce teenage conception rates.

The Local Teenage Pregnancy Coordinator developed local action plans based around the outputs from the day. These action plans contained a variety of no or low-cost pieces of work (which the OBA approach encourages) aimed at focusing on small-scale projects to help reduce teenage conception rates. For example, improving circulation of sexual health and contraception information available to young people, and updating and widely promoting the LA's directory of these services among all partners.

The main challenge encountered was:

 an incorrect assumption initially that OBA will 'do the work for you' which it does not, as the approach needs to be resourced, in terms of preparing and organising the engagement of staff effectively and following up on agreed action.

#### Impact

There have been reductions in teenage conceptions across the LA following the use of OBA, although there are still issues in the hotspot wards. Interviewees were reluctant to attribute the reductions specifically to OBA and did not consider there was a causal link. One consideration was the time-lag between OBA actions and national data being published (reported to be around two years in terms of teenage conception data) which was felt to hinder the LA in being able to evidence impact in this area. It is therefore difficult to determine whether or not OBA itself has had an impact on teenage pregnancies until the 2009 teenage conception data are published in 2011.

OBA has helped the LA to move to a more outcomes-focused approach to their work. The language of OBA such as 'improving outcomes', was found to be helpful because it is easy to understand.

#### Next steps

Thus far, OBA has been used as one tool to assist the planning process. The planning process will be reviewed for the next CYPP to ensure that the focus is on outcomes. This will include an evaluation of whether the use of OBA has supported a reduction in teenage conceptions. This evaluation will inform the next steps to be taken with using the OBA approach.

#### Summary

This case study is based on information gathered by NFER through interviews with local authority (LA) staff and background documentation supplied. A number of challenging areas were identified in a Metropolitan Borough Council with high levels of deprivation, located in the West Midlands. This case study explores the use of OBA to improve school attendance, alongside its use across the Children's Trust to address smoking, obesity and under-age conception rates, and offers some key points to support others implementing an OBA approach for service planning and provision.

#### Key learning

The key points recommended to Children's Trusts wishing to successfully implement the OBA approach are to:

- ensure buy-in from key partner organisations – for example, the LA, the Primary Care Trust, the fire service or the police. OBA presentations and workshops should involve all partner organisations where possible, and ensure that key aims and expected roles are realistic and clearly communicated. This will ensure relevant services are working collaboratively and addressing all factors which may inhibit successful implementation
- demonstrate how the approach has helped to improve performance – it is critical to provide 'real examples [and be able to] explain the process'
- provide sufficient staff resources and capacity to implement the approach – confident and knowledgeable staff are important when facilitating OBA and liaising with stakeholders.

#### Who was involved?

OBA has been used across a set of shared priorities owned by the Council and its partners within the Local Strategic Partnership (LSP). The focus of attention has been in relation to a number of Local Area Agreement (LAA) priority areas to address 'more stubborn targets'. Priority areas have included smoking and alcohol abuse, obesity, under-age conception rates and helping people and business through the economic downturn. Several OBA workshops have been facilitated by the partnership and the Council's Communities Unit and a wide range of colleagues from the statutory and voluntary sector were involved.

In relation to school attendance, a number of partner organisations were involved in taking forward the OBA approach. Colleagues including district partners and members of the senior leadership team from a pilot school, worked collaboratively on strategies to address school absenteeism at school and LA level.

#### How was OBA used?

OBA was marketed to the LA by the Department for Children, Schools and Families (DCSF, now Department for Education) as a tool to develop and improve services and 'the appeal of focusing on outcomes was key' to implementing OBA. The LSP team felt that OBA would be a good way of problem-solving and addressing 'a number of ... underperforming areas' within the LAA. The OBA approach was initially used within Adult Services and, later, elements of it were used in relation to smoking and teenage conceptions. Turning the Curve exercises were used as staff in the Children's Services team also felt that OBA would be a suitable method to use to increase levels of school attendance. OBA encouraged LA staff to focus on outcomes and to 'look at absenteeism in a different way, enabling a range of different agencies to be involved'.

An LA colleague held an introductory OBA session for senior staff and those engaged in commissioning across Children's Services, to explain the benefits of using the approach to address school attendance. Subsequently, three Turning the Curve workshops were held over a period of two months, where key partners were brought together to interpret the school attendance data story. One workshop was spent introducing the priority area, the second involved interpreting the data story and the third was spent identifying and targeting schools to include in the pilot and discussing strategies to address school attendance. Of the 12 target schools identified, one school expressed an interest in the pilot.

The LA wanted to develop a preventative approach, so the baseline in approaching the problem was not 'how you deal with nonattendance, but how you encourage attendance. What you put in place to make kids want to go to school rather than dealing with the consequences of kids not attending school.' Consultation with children, as the service users, was recognised as an important first step in tackling the problem and children were asked 'about what they thought was important about attending school and what made them attend'.

An OBA school attendance action plan was developed to 'fix the problem', including key indicators drawn up during an OBA workshop. The action plan included initiatives to encourage attendance, such as lunch time activities, awards for good attendance and a variety of other strategies designed to 'create a culture of good attendance at the school'. The action plan was put into practice over the course of an academic year, and has now been implemented for a full academic year.

The main barriers and challenges encountered when using the OBA approach across the Children's Services and the LSP team within the LA included:

- allowing sufficient time for OBA to become a frequently used tool in service planning. There were some challenges experienced in widening the use of OBA across the LA. However, this was said to be true of any new methodology, which may be 'difficult to get people to use for the first time and be open minded to new ways of working'
- ensuring buy-in from senior management. There has been mixed responses to the approach as senior managers reportedly found it difficult to see the relationship between OBA and meeting targets and did not see an explicit link between its use and achieving value for money, which was a key priority for them. They were said to have a view that OBA is more suitable for community partnership working and cannot be used effectively to tackle larger scale priorities. This was said to be partly because some senior managers view OBA as a theoretical model which they would prefer to pilot initially on small-scale projects. This had not prevented the introduction of the approach, and wide participation by partners using it, but it is not necessarily owned by the highest levels of management within the Council and its partners.

The main challenges for the Children's Services department when delivering the school attendance project were in:

gaining commitment of partners to use OBA. In relation to school attendance, 12 schools were invited to take part in the OBA pilot; however, only one school chose to participate. One interviewee felt this was likely to be because the schools were confident that the attendance strategies they were implementing would help to address low attendance in due course. Interviewees suggested that using the OBA approach with a range of schools with different contexts, in terms of absenteeism, and then sharing the effect of doing so with other schools, would offer further opportunity to assess the impact of OBA and to widen its use sustaining motivation and commitment throughout the life of the project. When the project initially started, a number of key stakeholders had signed up and were prepared to become involved. Towards the end of the project, numbers had declined and increased support from partners would have ensured it was an even more worthwhile exercise, although it should be noted that this experience is not unique to OBA and is relevant for many initiatives. The LSP has appointed an OBA lead for a period of 18 months to work with partner organisations and to sustain their involvement, a role which colleagues are not always in a position to manage effectively due to other commitments.

#### Impact

In relation to the school attendance project, there have been a number of follow up meetings with the pilot school since the OBA approach was implemented and the attendance initiatives are working well. The school indicated that 'over the course of the year, there were signs that attendance had improved'. Attendance is monitored on a weekly basis and schools were able to review attendance data regularly.<sup>1</sup> However, LA staff felt it was difficult to attribute any increase in school attendance solely to OBA, due to other strategies being undertaken at the school. One interviewee felt this was not necessarily a problem in itself and that 'OBA is not something we should be considering on its own. We need to consider it as part of a wider problem solving approach.' Overall, the OBA approach was recognised as a factor in improving attendance outcomes and endorsed by school personnel for 'engendering a much more positive attitude to school attendance' among children at the school.

OBA enabled collaborative and partnership working by bringing partner organisations 'together on a shared agenda, with shared outcomes'. This allowed colleagues to address school attendance issues — traditionally an issue tackled solely by schools — with a more unified approach, as opposed to one institution addressing problems in the usual way. The OBA approach offered the opportunity to 'look at many different kinds of solutions to a problem and specifically encourages no cost and low cost solutions'. LA staff particularly welcomed this approach and the shift in focus to encouraging children to attend school, rather than trying to address the different factors associated with non-attendance.

#### Next steps

The LSP team have appointed a new member of staff specifically to champion OBA and to take the approach forward. Senior LA officers felt that the OBA approach would gain wider and more systematic use across the LSP by being championed by a dedicated postholder, who would also have the time available to ensure that involvement from partner organisations was fully sustained. In order to widen awareness and use of OBA across a range of service areas, the team is currently considering the development of an accreditation programme for 'OBA champions' within each partner organisation. OBA champions will be able to drive forward the approach in their respective service delivery areas. The team are also working with the Regional Improvement Efficiency Partnership (RIEP) in their region, to promote OBA as a tool to help improve outcomes, support performance improvement and to contribute to the successful delivery of LAAs.

Within Children's Services, the OBA approach is being used on a project to increase physical activity as part of a strategy to reduce obesity, where there will be further opportunity to evidence the impact of the approach.

OBA is currently being used in a number of other areas across the LA encouraging a focus on 'outcomes as opposed to outputs'.

#### Note

1 This data was not shared with the research team.

