



Communities4Change Wales: Evaluation report



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1 Summary

Communities4Change Wales has been developed as an evidence informed, time-limited approach which brings together individuals from multiple agencies with a common goal to enable and accelerate change to improve health and health equity. Public Health Waels sought to pilot and evaluate the approach.

Communities4Change was piloted with Cwm Taf Morgannwg Healthy Housing Partnership. This multi-agency group aims to improve the health and well-being of the people in Rhondda Cynon Taf, Merthyr Tydfil and Bridgend Local Authorities through improving the quality of housing and level of support to those who are homeless.

The partnership applied the Communities4Change blueprint. This includes preparation, 100 day action and follow-up phases, with roles for facilitator, community leaders and a wider community. The focus of the pilot was developing a mechanism for sharing, interpreting and using data for action across partners in relation to housing and health. The action phase started in mid-December 2021 and ended in mid-April 2022, and workshops and meetings were virtual.

This evaluation took a qualitative approach to examine the process and outcomes of the Communities4Change pilot. We undertook three waves of semi-structured interviews (32 in total) with collaborative members, including facilitators, Project Oversight Group, senior leaders and wider members. We applied inductive element from Braun and Clark’s reflective version of Thematic analysis to develop themes, and a deductive approach to develop a coding framework in order to code data using ATLAS.ti software.

While the goals of the collaborative were not fully achieved in the action phase, significant progress was made toward developing a mechanism for sharing health and housing data including an information sharing agreement and developing the architecture for a dashboard. In addition, the time-limited approach led to developing effective relationships between housing and health and was associated with positive unintended outcomes including obtaining funding for a joint health and housing post. The blue print was largely implemented as intended, with some exceptions, and participants valued the Community4Change approach.

The evaluation has demonstrated the approach has utility, which extends beyond the life of the project. In addition to project outcomes, the approach showed the importance of the relationships between those involved, and the value of external facilitation and coaching. To apply Communities4Change effectively, resources, including skilled facilitation, need to be available at a point where there is the will to make a change to

address a problem, but where ideas on the nature of the solution(s) are not fixed.

The insights gained from this evaluation will contribute to refinement of the Communities4Change Wales blueprint.

2 Background

2.1 Public Health Network Cymru

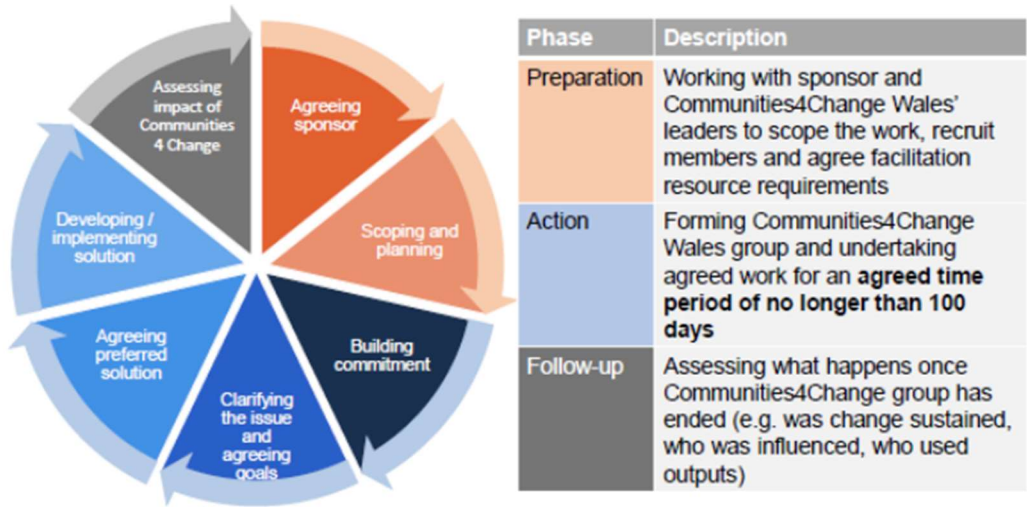
Public Health Network Cymru (PHNC) was established in May 2015, with the consolidation of four topic specific networks. It is hosted by the Wider Determinants of Health Unit in Public Health Wales and has over 2,500 members from academia and the public, third and private sectors. The network hosts a number of activities including conferences, seminars, roadshows, e-bulletins, podcasts and a one-stop shop website. In recent years the network has focused primarily as an information and knowledge exchange between members and topic experts. An evaluation undertaken in 2017 emphasised the value of the network but also identified a need for a more engaged membership who could actively contribute to discussions and be involving in accelerating public health action. One way of achieving this aim would be to develop an approach which would bring together diverse member perspectives in creative spaces to develop solutions and approaches to inform policy, practice and research.

2.2 Communities4Change Wales approach

Communities4Change (C4C) Wales is an evidence informed, time limited approach which brings together individuals from multiple agencies with a common goal to enable and accelerate change to improve health and health equity. The approach was developed by Public Health Wales following a snapshot review of grey literature in 2021¹ and consultation with subject experts on collaborative approaches to change including large scale change, quality improvement approaches and innovation approaches. A C4C Wales blueprint² was developed outlining the principles, essential components, phases and facilitation tools which can be used in the different phases. Figure one illustrates the C4C Wales life cycle. A facilitation guide was also produced.

Public Health Wales worked with partners to pilot the approach during 2021-2022. We established a Project Oversight Group to monitor and report project progress, consider learning from reflection workshops and provide steer and advice to the pilot implementation. The group included Lab Cymru who supported the oversight group through a series of design and reflection workshops. Co-production Network for Wales were commissioned by Public Health Wales to provide project management, workshop facilitation and coaching support and also participated in the Project Oversight Group. The Project Oversight Group developed a theory of change which was used to inform the evaluation (see Supplementary Annex One).

Figure 1: Communities4Change Wales life cycle



2.3 Cwm Taf Morgannwg Healthy Housing Partnership Communities4Change Wales collaborative (CTMHHP)

A request for expressions of interest to pilot the C4C Wales approach and establish the first C4C collaborative, was sent to PHNC members in September 2021. In their submission, interested organisations were asked to demonstrate that the problem they wish to address was related to a wider determinant of health (income and resources, level of education, access to fair work, secure and quality housing and our surroundings), was sufficiently understood, had senior buy-in for a time-limited period to work on a solution(s) and would require multi-agency collaboration.

Following an interview process, it was agreed to pilot the C4C Wales approach with the CTMHHP, sponsored by Cwm Taf Morgannwg University Health Board. The CTMHHP was a new partnership and over time sought to develop a long-term Cwm Taf Morgannwg Healthy Housing Plan.

The specific aim of the CTMHHP C4C Wales collaborative was to:

"develop a mechanism for information sharing between health, housing and local authority partners in the Cwm Taf Morgannwg University Health Board area to identify need in specific populations and geographical areas, tailor interventions and resources according to need, and monitor and evaluate initiatives which aim to improve the provision of secure and quality housing."

The action phase for the CTMHHP C4C Wales collaborative commenced on the 14th December 2021.

3 Evaluation objectives

This evaluation sought to:

- examine the degree to which the approach outlined in the C4C Wales blueprint was delivered as intended by the CTMHHP collaborative
- understand participants' reactions to the approach, any changes in their practice as a result of being part of the collaborative, their perceptions of what the collaborative has achieved and identify any lessons learnt,
- assess the extent to which the CTMHHP delivered the goal for the collaborative within the 100 day action phase and subsequent progress made in a six-month follow-up phase, and
- reflect on the extent to which the assumptions in the theory of change for the approach were correct.

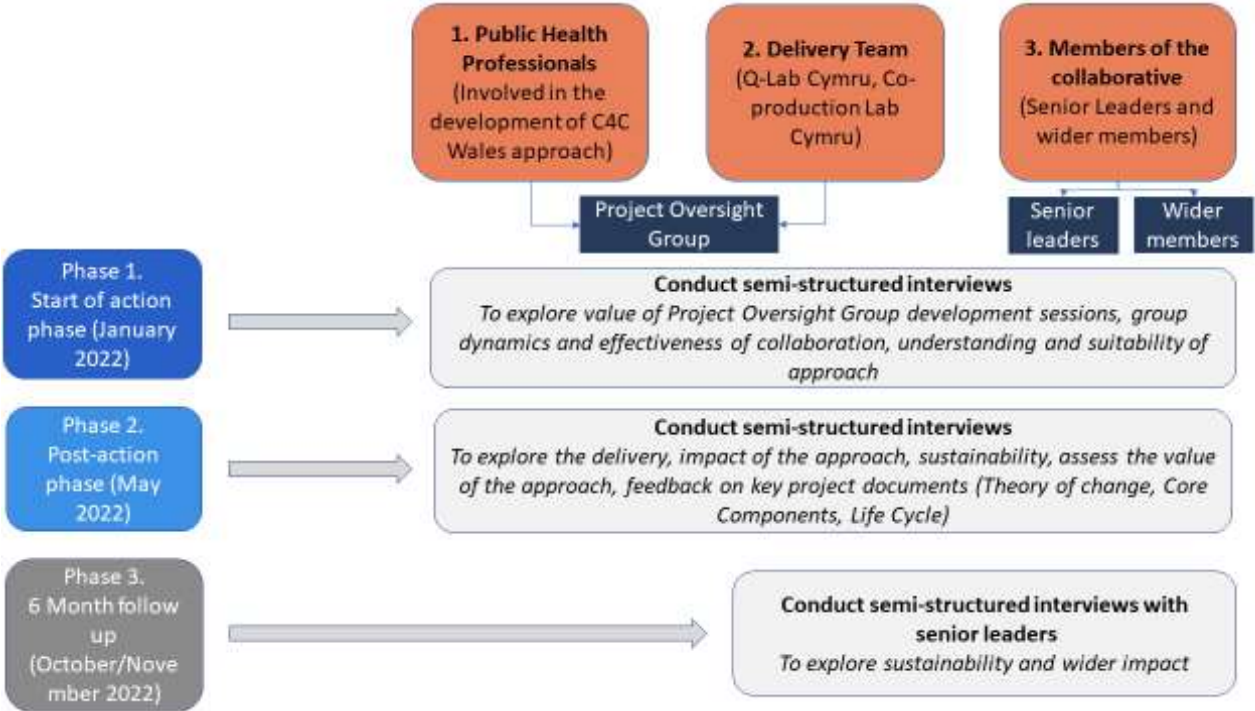
4 Evaluation approach

The evaluation used a qualitative approach to data collection, to collate insights from the key stakeholders, reflecting on their experience of taking part in the C4C process and outcomes the collaborative achieved. Remote/Online semi-structured interviews were undertaken by TW, CW and LH to obtain perspectives from the following groups:

- Public health professionals involved in the development of the C4C Wales approach
- Delivery team including Co-production Network for Wales facilitators and Q Lab Cymru who supported the Project Oversight Group
- Senior leaders and wider members of the CTMHHP collaborative

Interviews took place at three time points: (Phase 1) early in the 100-day action phase (January 2022), (Phase 2) post action phase (May 2022) and (Phase 3) six months follow up (October/November 2022). See Figure 2 for phases of the evaluation.

Figure 2: Phases of evaluation



5 Data collection and analyses

5.1 Ethical considerations

PHW’s Research and Evaluation team were consulted to determine if the evaluation required ethical approval and NHS R&D approval. As the evaluation was not considered to be generalisable research, approval was not required.

Participants completed a Participant Information Sheet (see Supplementary Annex Two) and consent form, completed prior to the interview (see Supplementary Annex Three), both available bi-lingually. Participants also had the opportunity to ask any additional queries at the start of the interview. The consent form provided information on issues such as confidentiality, anonymity, recording and transcription, withdrawal options and informed consent.

5.2 Participant recruitment

A bi-lingual recruitment e-mail (see Supplementary Annex Four) was sent to 23 potential participants, who represented a spread of perspectives across the three groups of interest (as listed in Section 4 and Table 1). The 23 potential participants were those who took part in the collaborative, project

oversight group members, an additional facilitator and Q Lab Cymru leads. In total, 18 participants (78%) took part in Phase 1 interviews. Subsequently, 12 participants (52%) took part in Phase 2 interviews and two participants (50%) in Phase 3 interviews (see Table 1 for detailed breakdown of participants).

The low response rate amongst the wider collaborative in Phase 2 may be due to degree of involvement in action phase and the low response rate of senior leaders in Phase 3 may be due to time pressures.

Table 1: Breakdown of participants

Phase	Total (N)	Project oversight Group (n)	Senior leaders (n)	Wider collaborative (n)
Phase 1: Start of action phase	18	8	4	6
Phase 2: Post-action phase	12	6	3	3
Phase 3: 6-month follow-up	2	*	2	*

* Not applicable

5.3 Semi-structured interviews

Interview schedules were designed by CHE and CH and tailored to the different participant groups (see Supplementary Annex Five). The question areas were informed by the theory of change. Phase 1 interviews explored the value of the Project Oversight Group development sessions, group dynamics and effectiveness of collaboration, and understanding and suitability of the C4C approach. Phase 2 interviews explored the delivery of the approach, impact of the approach, sustainability, assessed the value of the approach, and sought feedback on key project documents (Theory of Change, Core Components, Life Cycle). Phase 3 interviews explore sustainability, outcomes achieved and the wider impact of the collaborative.

Each semi-structured interview lasted between 30-60 minutes and was undertaken remotely using Microsoft Teams. With permission, interviews were recorded and transcripts downloaded from Microsoft Teams.

Phase 1 interviews were carried out by TW, Phase 2 interviews were carried out by LH and Phase 3 interviews were carried out by CW. In addition, one interview at Phase 1 and Phase 2 was undertaken by CP following a request by one participant to complete the interviews in Welsh. Welsh transcripts were transcribed into English by an external translator prior to analysis.

All downloaded transcripts from Microsoft Teams were checked for accuracy by the Wider Determinants of Health Unit administrative teams members and where there were substantive errors, these were corrected by listening to the original recordings. Once the transcripts were verified these were anonymised and analysed using the approach outlined in section 4.4. The recordings were subsequently deleted.

5.4 Data analyses

A Thematic Analysis approach was developed with support from LH and other colleagues in the Research & Evaluation division, Knowledge Directorate in Public Health Wales. The approach drew from the inductive elements from Braun and Clark's reflexive version of Thematic Analysis³ and the deductive approach of Framework Analysis developed by Ritchie and Spencer⁴.

During the inductive phase 'candidate themes' in the Phase 1 interviews were derived and used to draw up a preliminary coding framework. A deductive approach was then applied and the preliminary coding framework was developed and applied systematically to the data, alongside a data driven approach where new 'free codes' emerging from the data could also be generated.

A framework approach was selected for a number of reasons and informed by Gale et al. (2013)⁵. Firstly, it provides clear steps to follow and produces structured outputs of data. This is especially relevant to this evaluation because separate researchers analysed data over the different phases. The framework model was also chosen due to the relatively homogenous data outputs i.e. the data covered mostly one broad topic, making it relatively easy to categorise. The framework approach allows analysis of large data sets, where evaluation aims to gauge a holistic, descriptive overview of the entire dataset. Lastly, the approach was chosen because it is not rigidly aligned with a particular epistemological viewpoint. It therefore allows for flexibility and adaptability between inductive and deductive theoretical constructs. This process is outlined in more detail in 5.4.1 – 5.4.3.

5.4.1 Developing coding framework

From initial review of all Phase 1 transcripts, TW developed candidate themes which informed ongoing delivery of the pilot. This was fed back to the Project Oversight group in order to further tailor the C4C approach to the needs of the collaborative. TW subsequently developed themes and subthemes in MIRO from more in-depth Phase 1 transcript review and these informed the preliminary interview coding framework developed by CHE.

5.4.2 Quality assuring the coding framework

An inter-coder reliability test was carried out to test the robustness and replicability of the preliminary framework. A member of the Wider Determinants of Health Unit in Public Health Wales who was not involved with developing the evaluation approach or interview schedules and TW independently coded four transcripts (just over a 20% sample of the Phase 1 interviews) using the framework. Discrepancies in coding were discussed and recorded. Where necessary, refinements to the preliminary framework were made and an initial framework agreed (see Supplementary Annex Six).

5.4.3 Applying coding framework to transcripts

TW imported the initial coding framework along with all code definitions into computer-assisted qualitative data analysis software (ATLAS.ti Version 22) where all coding of the transcripts took place. Codes from the framework were applied to the appropriate transcript quotes. The coding process was dynamic, with codes being modified and created where appropriate by TW. Changes to existing codes and new codes were documented on the framework and displayed in a different colour to show they were later additions.

Phase 2 and Phase 3 transcripts were also coded in ATLAS by LH and CW, respectively, and summary reports were produced.

6 Results

The findings from each interview phase are presented below, summarising reflections on i) the process of taking part in the C4C pilot and ii) the outcomes achieved by the collaborative.

Key overarching themes identified during the Thematic Analysis, are summarised in the table 2 below.

Table 2: Thematic analysis themes and subthemes

Theme	Subthemes	
Enablers and barriers to implementation	<ul style="list-style-type: none"> • Multi-agency Project Oversight Group • Facilitator skills • Online collaboration tool • Working together/group dynamics • Knowledge and understanding of approach • Role clarity • Delivery environment - e.g virtual • Perceived value of approach 	
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Suitability of approach	<ul style="list-style-type: none"> • Size of collaborative and nature of problem • Solution generation • Degree of facilitation • End user involvement • Structure vs flexibility • Necessity of C4C approach • Delivery of approach
Effectiveness of collaboration	<ul style="list-style-type: none"> • Preparation time • Idea generation, innovation and problem solving • Trust to express views • Voice of collaborative members • Focus and purpose • Appropriateness of goals • Sustainability • Capacity and commitment to deliver
Project development	<ul style="list-style-type: none"> • Value and effectiveness of Q lab design workshop with Project Oversight Group • Value of preparation phase
Reflection and learning	<ul style="list-style-type: none"> • Coaching sessions • Changing practice
Miscellaneous	

6.1 Reflections on the C4C process

This section aims to examine the degree to which the approach outlined in the C4C Wales blueprint was delivered as intended by the CTMHHP collaborative as well as understand participants’ reactions to the approach.

6.1.1 Phase 1 interviews (start of action phase)

Analysis of interviews from Phase 1 identified five key themes, presented in more details in this section. These included:

- Enablers and barriers to implementation
- Suitability of approach
- Effectiveness of collaboration
- Project development
- Reflection and learning

Enablers and barriers to implementation

Participants from the CTMHHP collaborative found the external facilitation as a valuable enabler in driving progress and acting as an honest broker.

The facilitators were described as skilled, professional, inclusive and confident.

"It's very effective actually. It's a very kind, soft, compassionate approach to leadership. I think... work between partners can become a little bit political or heated." (Wider member)

Online collaboration tools, such as MIRO, which were used by the facilitators in the action phase, received excellent feedback and were described as useful, engaging and inclusive despite being a new tool to many participants.

Participants felt that the collaborative generally worked well together, however, some tensions were observed as it was felt by some that health dominated the partnership. As with all collective working, it was challenging to manage different personalities and some of the pre-existing relationships between senior leaders.

"You know, they're not a team because it's a hierarchy, but they're a team because they chose to come together. And that's really powerful. They work well together, they have trust with each other. You know...but some people are still finding their voice with this."
(Facilitator)

Most participants in the collaborative, particularly senior leaders, had a good level of knowledge and understanding of the project and the approach. However, there was less clarity on the approach and its value for the wider collaborative members. It was suggested that more time should be dedicated at the start of the process, to ensure alignment. Participants also highlighted that more emphasis should be placed on the importance of role clarity, as there was some confusion on the roles of collaborative members.

"I think things that maybe went a bit less well about that workshop are the introductions, so we hadn't worked together. I think there should have been a little bit more scene setting, making sure everyone knew each other, know each others roles, and just that kind of breaking the ice stuff."
(Member, Project Oversight Group)

Some challenges were reported relating to working together virtually and some felt that the approach may have been more effective if delivered face to face.

"I suppose, perhaps this is just me being a little bit old school. It would have been nice to do some work face to face rather than just over teams."
(Senior leader)

Lastly, the Project Oversight Group participants involved with designing and delivering the C4C Wales approach found the group helpful in providing new perspectives and solutions based on different expertise and knowledge.

*"You can kind of be a bit blind sighted through just looking through one lens, so it is very good when you got people with different perspectives 'cause they will challenge you to think."
(Member, Project Oversight Group)*

Suitability of approach

Some participants from the Project Oversight Group noted that certain aspects of the approach were not being delivered as the blueprint originally intended. In particular, the C4C Wales approach emphasises the importance of problem definition and looking at and testing a range of solutions. It was evident early in the preparation phase that the senior leaders already had a clear idea on the solution they wanted to execute.

"...they've jumped to solution a bit too soon and gone, 'this is what we need to work on'. Rather than going, how do we improve..." (Facilitator, Project Oversight Group)

In addition, the goal of the collaborative, data sharing, was a technical challenge. In comparison, the evidence which had informed the C4C Wales approach was based on multi-agency challenges which focused on service or service pathway improvement.

*"They often involve a lot more people, a lot more sort of subgroups, so this is quite small, so I guess that's a positive in some ways because we want to pilot the approach. However, on the flip side of the coin, are we really testing the approach for what it was designed for?"
(Member, Project Oversight Group)*

Questions were also raised regarding the suitability of the model due to the nature of the end users being internal rather than in the wider community.

Some senior leaders expressed concerns that the sessions were slightly over-facilitated and there was not enough flexibility in the sessions for collaborative members to 'follow their noses'. There was a general agreement that facilitation requirements needed more discussion in the preparation phase.

"I feel slightly over-facilitated sometimes. It feels like I just need a bit of room to breathe here and a bit of room to think... It feels like every minute of the time we got together is kind of regimented and we are ruled by the clock rather than just following our noses at times and go, if we're going somewhere useful." (Senior leader)

A greater degree of flexibility from the approach was suggested, as a few participants felt the C4C Wales approach outlined in the blueprint was too rigid.

"Maybe that needs to be put into the blueprint that this is kind of a template... These things can be adjusted, almost like a menu." (Member, Project Oversight Group)

Facilitators questioned the appropriateness and necessity of the C4C approach and felt that change could have happened without a structured evidence informed approach. However, facilitators also note that the approach excelled at bringing people together, and actively focusing members to achieve and deliver the goal set at the outset of the process.

"I don't think this group needed C4C to build this platform. On the one hand, they have been talking about doing it for a while and they haven't done it, so maybe this structure of 100 days means there is more motivation, but the reality, in my opinion, is they know what they need to do." (Facilitator, Project Oversight Group)

"Feels like we've got closer to something meaningful than we've ever got before, in quite a short space of time. So compared to my other experiences, it's being really positive so far. I don't know that it'll break all the barriers that we've experienced before, but it's certainly, I feel like, it's got us further along the track." (Senior leader)

Effectiveness of collaboration

The collaborative was described as a safe space where opinions were respected and facilitators made people feel comfortable. All members of the collaborative felt they were given the chance to share their views. However, there were also separate discussions taking place outside of the organised workshops, where people felt safer to air their views.

"Whether they took that opportunity in equal measure, probably not, but that doesn't mean they're underrepresented or their views haven't been taken into account... It was an open forum, definitely." (Senior leader)

"Yes, by the end of the workshop, there was agreement, but we know that, after that, there was some back and forth via email. Behind the scenes, people have been able to say things they didn't feel comfortable saying in the workshop." (Facilitator)

Overall, there was a sense that the collaborative was focused, the work was effective and generally doing well throughout the preparation and beginning of the action phases. Some participants, particularly facilitators, felt that

the collaborative had experienced a dip in motivation and were less engaged by the Day 25 workshop.

*"And there's some of the wider collective who couldn't make it either. And there had been that break over Christmas. So actually by day 25, really people had lost two weeks off that, so in half that time and there's a lethargy, people weren't really engaged, they kind of actively said 'no, I don't want to do that', when we suggested certain facilitation techniques."
(Facilitator, Project Oversight Group)*

Some participants felt that more preparation time and notice was needed between meetings, with materials and discussion points being sent out prior to meetings. Some senior leaders argued that the project did not foster idea generation, creativity or innovation, partly due to over facilitation and pre-determined solution. Despite this, the wider members did believe that, to certain extent, the approach did foster new ideas and increased problem solving.

"It's all those heads together now, all working strategically...that's easier for problem solving." (Wider member)

As a result of choosing a goal which was achievable in the timescales (to avoid 'failure'), some stressed concerns that the goal was not stretching enough. On the other hand, some participants expressed concerns that the goal was relatively ambitious, considering the timescale of the project.

Participants from the Project Oversight Group and Senior Leaders stressed the importance of ensuring continued collaboration, once the action phase finished. However, participants believed an exit strategy was not discussed as thoroughly, as it could have been.

"[...] how we are going to take forward the concept of what we started within the project going forward, because it's critical, we have to. We have to talk to one another. We have to find a way of keeping this mechanism going." (Senior leader)

The collaborative was genuinely committed and enthusiastic but there was some concern over resourcing and who is going to do what. Balancing other commitments was challenging and absence from all three groups (senior leaders, wider collaborative and Project Oversight Group) during the action phase workshops, particularly senior leaders, was felt to be a potential barrier to maintaining progress.

Project development

The Project Oversight Group participants provided mixed feedback on the Q Lab Cymru design sessions. Some felt they had learned a lot and thought the sessions encouraged the group to think in a new way, with probing

questions challenging assumptions. Others described the sessions as long, lacking in context and sometimes hard to follow.

"I remember thinking it was long. Maybe it was three hours. I don't remember. I think if we could have read a little more beforehand, maybe do a little bit before, to minimise the on-screen time, that would have been helpful." (Facilitator, Project Oversight Group)

"But overall, I think, they've been really helpful in challenging our thinking." (Member, Project Oversight Group)

The two preparation workshops with the collaborative's senior leaders were perceived as having achieved most of what the preparation phase set out to do. The workshops were effective in getting everyone together, ensuring that everyone understood the goals and reaching consensus on the research question.

Reflection and learning

The coaching sessions received a mixed response from senior leaders. Some felt that they were enjoyable, helpful and rewarding while others argued they were not impactful or useful. The facilitators argued that the one-on-one coaching sessions were vital in order to learn about frustrations and personalities in the group.

At this stage of the evaluation, participants did not mention changing practice as a result of the collaborative.

6.1.2 Phase 2 interviews (post-action phase)

Analysis of interviews from Phase 2 identified five key over-arching themes, presented in more details in the section below. These included:

- Enablers and barriers to implementation
 - Working together and role clarity
 - Knowledge and understanding of approach
 - Delivery environment
 - Perceived value of approach
- Suitability of approach
 - Blueprint, core components and lifecycle
 - Facilitation
 - What worked and challenges
- Effectiveness of collaboration
 - Sustainability
 - Sustainability of the approach delivery
- Project development
- Reflection and learning

- Theory of change
- Core Components

Enablers and barriers to implementation

Working together and role clarity

Participants all recognised the value of multi-sectoral working and felt the C4C approach had enabled them to work together more effectively. Members felt it was a true partnership and that taking part in this collaborative had strengthened relationships and created key connections across the sectors. Facilitators highlighted the openness of the group and believed the one-to-one sessions with the leaders helped the overall group dynamics.

"It did feel like a true partnership. You know, we weren't just turning up because we felt we had to. We were all quite committed people. It was something that we felt was relevant to our work. We saw the purpose of it." (Senior leader)

A distinction was made between the core working group composing of the senior leaders and wider participants who were co-opted into the collaborative. Whilst the blueprint outlines the need for a senior leadership group, it also emphasises the importance of distributed leadership through the collaborative and for senior leaders to adopt an adaptive leadership style. It became apparent that some members of the wider group felt their involvement was not necessarily needed and participants felt there was a tension between the process of delivering the product versus developing the community.

"I think the core group worked particularly well. I think there was a distinction made between the core group and the wider participants, which was interesting and again it's interesting because if you look at how the communities for change is supposed to be set up, there is not supposed to be one leader." (Senior leader)

Reflecting on the extent to which opportunities for adaptive leadership emerged, the facilitators felt wider members could have participated more if they had been brought in at an earlier stage, as it resulted in senior leaders taking on most of the workload.

With wider members being brought in at different points during the action phase, it made it hard to clarify their role and contribution. The collaborative felt key members of the wider group should have been identified and brought in earlier on in the process to ensure engagement and achievable timelines for delivery.

"First thing is the importance of making sure all the key partners are around the table. So if you're looking at sharing data and for the health board to analyse these, you need the people in information management who will be dealing with that process in the meeting. Otherwise, your achievements could be way off and your timelines could be unsustainable." (Wider member)

Knowledge and understanding of approach

While facilitators felt that the collaborative was committed to the agreed solution, there was a sense that the wider collaborative, and sometimes senior leaders, were unclear of what they had actually signed up to.

It was clear that more time needed to be allocated to the preparation phase in order to build commitment to the approach and ensure everyone clearly understand what the process involves and what is expected of them. Lack of understanding from senior leaders resulted in lack of involvement, especially during the key milestone meeting, which made it difficult for the collaborative to move the agenda forward.

"I think it's in the preparation phase. It needed to be separated. So a session on what the 100 day approach is exactly, what the components are, what the process is, what's expected. So building a commitment to the process. Then I think it needed also the other strand, which is about building that collaboration to the relationship side." (Facilitator, Project Oversight Group)

Delivery environment

The approach outlined in the blueprint was originally designed for an in-person delivery but remote delivery brought advantages and disadvantages.

Online facilitation required adaptation and changes to planning of material, content and delivery. It required a different set of facilitation skills, such as setting up clear ground rules and etiquette around contributions in a virtual space. The collaborative felt facilitators skilfully read the virtual room and ensured engagement from all.

"I think people got used to being facilitated because it's different to turning up to a meeting and just talking. [...] Each taking our turn to speak. Now it's your turn. Now it's your turn. There were different hand signals that we used in order to come in at particular points, for example." (Senior leader).

The use of MIRO was perceived as valuable although participants felt it would have been useful to know in advance which tools would be used. The majority of the collaborative participants were new to MIRO but most picked

it up quickly. Participants found the interactive MIRO boards useful for:

- Bringing everything together in one place
- Keeping key project documents and progress in one place
- Enabling live, virtual collaboration
- Outlining everyone's roles and responsibilities set against the work stream
- Knowing who to engage with

Participants suggested including a discussion with all members about expectations of online facilitation at the start of the process. It would also be beneficial to add a section on online delivery of C4C approach in the blueprint.

Some challenges with online facilitation were acknowledged, including limitations of using MS Teams for creating connections and networking. Participants felt perhaps a hybrid model would work well for the delivery of this approach.

"In terms of networking, MS Teams doesn't lend itself well to that. As if you don't have that bit of a conversation at the start while you wait for people to come in a room and then someone knows someone else and you start a different conversation." (Wider member)

Perceived value of approach

Members were generally very positive about the approach and felt the structure worked well, enabling engagement and strengthening of relationships. Participants were inspired to take back learning, in terms of ways of working, as well as adopting some of the tools used during the process, such as the use of MIRO as an online collaboration tool.

Moreover, the approach has been effective in bringing people together in a multi-sectorial working environment, enabling participants to focus on finding a solution to a complex problem. Participants particularly valued the external facilitation, project management and accountability, which offered a context and space for collaboration. Taking part has also made it easier to reach out to other members of the collaborative, as participants felt they had built and strengthened relationships, learnt more about each other's organisations and gained better understanding of the knowledge and capacity held.

Suitability of approach

Blueprint, core components and lifecycle

Participants identified inter-sectorial collaboration, sponsorship and co-producing a solution, as well as adaptive leadership, as the most important

components of the approach. Participants reflected on the extent to which the key principles underpinning the original blueprint translated into practice. The majority of participants felt this was mostly adhered to, apart from the core principles involving an iterative process and community-engagement. Participants reflected this was due to the group choosing to address what was perceived as rather a technical problem and end users in this case were primarily a community of professionals (from the different agencies represented in the collaborative).

"End users would usually be like communities or people who may be affected by the change you're making. They redefined end users more as the users of the dashboard, so professionals. I guess they are the end users, but not necessarily in the spirit by which the blueprint defined it in the first place." (Member, Project Oversight Group)

Members agreed that solution generation was perhaps less iterative and organic than the blueprint originally intended due to the collaborative already having a clear idea of the solution they wanted to take forward. This was partly due to the fact that during the application stage, applicants were required to outline any solutions they had to the problem they wanted to address. Some participants felt the process was a bit like reverse engineering – the collaborative started with the solution and then work backwards on how to achieve it. This resulted in a process driven approach rather than being explorative, as it was felt that there was no space to experiment with different solutions.

"We knew what the outcome was that we wanted, and we used the C4C programme to get there." (Senior leader)

"In the blueprint, it is explained that the purpose is to 'generate a range of solutions' and then 'agree a preferred solution'. The group didn't discuss more than one [solution] and there may be something to consider when people submit an application."(Member, Project Oversight Group)

Participants reflected that another unstated goal of the blueprint could have been explicitly emphasised from the start; to develop the long-term relationships between the senior leaders and the wider community.

Facilitation

Following feedback from senior leaders, the facilitators adapted the facilitation approach. It was highlighted in Phase 2 that the delivery of the approach really benefited from experienced facilitators, who were able to hold the space, read the virtual room and adapt flexibly during the sessions to what the group needed and create more reflective space. All participants agreed that flexibility was key for successful facilitation and delivery.

Despite the overall positive response towards the level of facilitation, some senior leaders felt the facilitation should have been more light touch.

*"It was more engaging and it was more conversational. I feel like you weren't attending something to just be spoken at."
(Wider member)*

"We had feedback from the leaders that they didn't want and didn't respond well to heavily facilitated sessions. They wanted the lighter touch, more intuitive kind of holding space. So we adapted to that. We knew we could help with that. We could hold shorter meetings, higher energy and get on with it." (Facilitator, Project Oversight Group)

Coaching sessions were also perceived as an important component of the model by some senior leaders. The facilitator felt that holding these one-to-one sessions with each leader helped them understand each leaders' strengths and frustrations, which enabled them to pick up on any blocks to the process and plan better for the group sessions. Coaching included helping leaders with adaptive leadership skills and coaching them about how they work together as a leadership group.

"I think actually that coaching is a really important part of the model. But how it's applied may vary from community to community. It panned out much more about coaching them in terms of how they work together as a leadership group." (Facilitator, Project Oversight Group).

However, some senior leader participants queried the purpose of the coaching sessions, which were described as needing to clearly define their purpose and boundaries around disclosure. There were some concerns voiced over confidentiality and sharing of potentially personally sensitive information with the wider group, which resulted in few of the members being discouraged from having an honest conversation and sharing personal reflections. The facilitators also reflected that the role and purpose of the coaching sessions was not explained well at the preparation phase, and that more time could have been spent with the collaborative to clearly set this out at the start and to manage expectations.

"We could have done more to explain why the one-to-one sessions were held, what was the purpose, so a bit more scene setting maybe. I think I presumed everyone would understand our role and I think we could have done more to explain that." (Facilitator, Project Oversight Group)

"A reflection on my role is to explain what the boundaries are and where they're solid, where they're porous. You know, so they're clear on that". (Facilitator, Project Oversight Group)

For many of the participants having a structured and time-limited approach with clear milestones, which group members were required to feedback on progress, was felt to work well and effective facilitation was integral to this.

"Bringing people together from different organisations and putting a timeline on it definitely worked well." (Senior leader)

What worked and challenges

Due to the nature of the problem and technical solution, the facilitators felt it was challenging to demonstrate how all components of the approach have been applied in practice. Senior leaders and Project Oversight Group members also recognised that the project was perhaps less complex and involved less people than it was envisaged in the blueprint, which proved challenging in terms of truly testing the approach. It was reflected that each community or project may be different and will have different core components that are more important to different projects. Most senior leaders and Project Oversight Group members agreed that to truly adhere to the blueprint, the approach would have been more suited to a community-driven initiative. This would have aligned with the original purpose and design of the blueprint.

*"I found it very tricky to write the end of community report in terms of showcasing what they've done with the approach. There's really hard to evidence a lot of it, so the report really just says that they built connections. The leaders built connections and that's what's worked. And that has worked. That's been a real success."
(Facilitator, Project Oversight Group)*

Effectiveness of collaboration

The initiators of the collaborative reflected on how the timing of pilot coincided with them looking at innovative ways to achieve cross-sectorial working, which would allow them to join up existing data across health and housing sectors. Linking health and housing data had previously been attempted but with no success. Participants believed it worked this time because of the shared goal and the opportunity for the integrated, cross-sectorial collaboration where everyone was committed from the outset.

Bringing together organisations from the different sectors required a degree of adaptation and adjusting the language to ensure each organisation understood each other's intention well enough. Furthermore, due to members' day jobs and other commitments, organisational permission to complete activities outside of these meeting was imperative to allow members to progress the work.

Reflecting on the lifecycle, facilitators felt the preparation phase could have benefitted from more time. This would have enabled the facilitators to better

understand the context and existing relationships. It would also have allowed for more time discussing the facilitation needs with the senior leaders and the tools being used.

"I think a lot of it is in preparation phase. I think we as delivery leads made assumptions that the leaders all knew each other better than they did and we made an assumption that the wider community would be actively involved in the process. I think in the preparation phase, maybe a time for everyone to be transparent about what they know about, what they don't know about, and let's all just come together and agree on what's going to happen." (Facilitator, Project Oversight Group)

Some participants in the collaborative felt that having more time to bring members together and define aims and objectives in the preparation phase, would have been beneficial. This would also have been an ideal time to identify who was needed to be around the table to ensure successful delivery of the solution.

The dashboard took longer than expected to develop and due to capacity challenges, it was not possible to complete within the 100 days. Reflecting on this, participants suggested bringing key individuals to the table earlier could have prevented this. Despite this challenge, the collaborative gained valuable insight in terms of understanding what data each organisation holds and how they may be able to share this across organisations.

Sustainability

The blueprint includes outlining an exit plan prior to starting the action phase to determine how the work undertaken in the 100-day period would be further developed, adapted or scaled. Due to the time constraints of the preparation phase, little time was spent considering next steps after completion of the action phase. Furthermore, exit planning was not considered during the action phase. This resulted in some uncertainty on the next steps at the end of the action phase, despite collaborative participants recognising there was value in continued partnership working between the health and housing sectors (e.g. jointly commissioning services, sharing resources, potential to take pressure of health services).

"Well, what happens next? Not just from our little core group that we were part of it, but from Public Health Wales as well. You know, whoever brought this project in, what do they want to happen next as well? Where do we go from here." (Senior Leader)

"There was certainly a feeling they wanted to keep going, but there were no clear steps. [...] I think there are some assumptions being made by all of them really, in terms of who's doing what and how it's gonna happen." (Facilitator, Project Oversight Group)

Sustainability of the collaborative, working relationships

If the approach is about long-term outcomes, participants felt this needed to be stated more clearly in the blueprint. It should emphasise developing ways of working together and more attention should be given to the sustainability aspect in the blueprint.

Senior leaders felt they had been able to establish connections across different sectors and create a foundation for future data sharing. A jointly funded post has also been established, which will be a key enabler for the sustainability of the collaborative.

There was commitment and appetite to deliver but the collaborative was restricted by capacity beyond the 100 day action phase and there were questions around what next and who would be taking the work forward. Core members seemed to keep the momentum going to ensure the data merging system was created and shared.

While the chosen challenge did not quite fit the approach, members felt they made it work as best they could and given the nature of the challenge, there was no space for iteration as the process was guided by permissions.

Sustainability of the approach delivery

An issue was raised regarding the sustainability to continue the future delivery of the approach. It will be dependent on securing funding along with competent, skilled facilitators. Members acknowledged skills and expertise of the external facilitators, as this was not currently available in-house, within the Wider Determinants of Health Unit team in Public Health Wales. Future application of the approach would need to consider how to either upskill existing team or continue to work with external facilitators.

Project development

One of the public health professionals involved (CHE) in the development of the C4C approach established regular reflection sessions with the lead facilitator. This provided a reflection space for the lead facilitator to talk through any challenges or solutions. The Project Oversight Group meetings also provided a reflective space for both Public Health Wales leads and the Co-Production Network Wales delivery team. This was especially important at the start during the norming phase when the members were adjusting to different organisational cultures and use of different language.

"The oversight group ended up being important in ways I didn't expect. In a way it created a bit of a safe space which was removed from the operational end and helped us think a little bit more about the bigger picture of what we wanted to get out of this as a whole, making sure we're thinking about our learning and not assuming that what we've done is

right. But recognising we're trying something out and we'll see how it goes." (Member, Project Oversight Group)

Reflection and learning

Participants, particularly senior leaders, reflected on the application process and believed that it will require more attention and time to ensure the right type of project is selected and with the right level of complexity to benefit the most from the C4C approach. Shifting the emphasis from defining the end result/outcomes and more towards emphasising the process itself, would be beneficial.

"I think there is a certain tension in order to get the support, we had to state what our problem was and how we were going to solve it. [...] I think a key part of this should be that it is less dependent on outcome, and it's more about the process, and the outcome is the building of the community, not necessarily the production of an end thing, of an end output." (Senior leader)

It was not possible to fully test the C4C approach, as envisaged in the blueprint, due to time restriction, the nature of chosen project and solution. Particularly, the iterative process and the end user engagement aspects.

For future projects, more considerations around framing and promotion of the approach may be needed to ensure getting the right project on board.

"I can see how this might work in my head and I could see how this is a really good offer for partners. But getting people to come forward to actually be part of this was really difficult. Well, actually, it didn't really fit their planning when the offer came out..."
(Member, Project Oversight Group)

Theory of change

The theory of change on the C4C Wales approach served as a valuable model and guidance throughout the process. It should, however, be approached with a degree of flexibility recognising the need to adapt it to different projects, depending on their focus. Some elements could also be added, for example the additional meetings just for the senior leaders. It was acknowledged by the Project Oversight Group that at first it was difficult to distinguish the theory of change on the approach from the specifics of CTMHHP. Q-Lab's insights were helpful to separate these concepts.

Core components and lifecycle

On reflection, two core components were proposed as critical to the approach; data driven insights and the importance of iterative process to generate solutions. Sponsorship should also be secured before the

programme start to ensure commitment and members should be encouraged to consider the exit plan earlier.

Although the requirement for adaptive leadership was limited due the nature of the problem and the solution being identified at the start of the action phase, it was visible to some extent as leaders adopted to working in different relationships. One-to-one sessions were found to support this.

Some parts of the lifecycle stages required more time than others, and overall, moving through the lifecycle process felt more iterative than linear. All interview participants felt that more time could have been spent in the preparation phase to set the scene, form relationships and build commitment. Additionally, it was suggested by the Project Oversight Group that the action phase could be split into testing and improving periods in order to emphasise the iterative aspect of the approach.

*"My reflection is we should spend more time on actually just working on some of those relational issues with those senior leaders and probably spend a whole session on just some activities which are about them, just working together and establishing how they see the world."
(Facilitator, Project Oversight Group)*

Lastly, facilitators reflected on what they had learnt delivering the pilot. They emphasised the importance of being flexible and adapting to the needs of the group, being able to take a model or approach and adapt without losing its essence, delivering shorter sessions and adapting to personality styles to ensure everyone has a voice.

*"Learning to adapt. For example, we had these long sessions. When sessions are very long, people disengage. A shorter, sharper session, validated that you can fit a lot into a short amount of time and work to people's attention spans and that's fine. [...] So I've taken a lot from it. I've learned a lot. I think for reasons we weren't expecting."
(Facilitator, Project Oversight Group)*

6.1.3 Phase 3 interviews (6 months follow up)

Findings from the Phase 3 interviews with senior leaders provided insights into the post-action phase progress, sustainability of the approach and their reflections on wider outcomes achieved by the collaborative.

The following key themes were identified:

- Enablers and barriers to implementation
- Suitability of the approach
- Effectiveness of Collaboration

- Project development
- Miscellaneous

Enablers and barriers to implementation

The main barriers mentioned by the senior leaders were capacity and resources. Members of the collaborative all had many other priorities on top of the work required by the collaborative.

Further barriers mentioned included bureaucracy and the virtual delivery of the approach. The collaborative found it challenging to obtain the desired data in the limited timeframe of the action phase. The virtual delivery resulted in barriers getting to know each other, which ultimately affected the group dynamics. Future projects should have at least some in-person sessions.

"I think it was just about that other people had other jobs. It wasn't people's sole job and that it just took a while to get hold of the data. [...] I think it was just time to be honest." (Senior leader)

As previously reflected in Phase 1 and Phase 2, senior leaders interviewed in Phase 3 also reflected on the value of having external facilitators and their expertise. The support and sponsorship that members of the collaborative had obtained was also considered a key enabler to implementation. Support from executive directors was believed to be imperative to the success of the collaborative. Overall, despite experiencing some barriers, the participants felt the approach was good and valued having been part of the pilot community.

Suitability of approach

Similar to reflections in Phase 2, the nature of the collaborative's issue was mentioned as well as the application process, which participants felt left them little room to change direction once the collaborative started.

"And in order to secure the C4C support, we actually had to come with a pitch to say we are this group and we will do X, Y and Z [...] And so, we were sort of bound into that." (Senior leader)

Members of the collaborative appreciated the work of the facilitators in terms of managing and keeping them on track. One participant felt that they probably could have utilised the facilitators more but the virtual nature of the process made this difficult. The virtual delivery also slowed down the development of relationships.

Lastly, the structure was perceived as appropriate and it ensured commitment to attending meetings. While the approach generally received

positive feedback, one participant felt that the process could have been longer in order to ensure the work would continue effectively beyond the facilitated sessions.

Effectiveness of collaboration

A sense of commitment to deliver during the collaborative was mentioned by senior leaders, as in Phase 2, but one senior leader questioned the sustainability of the connections and relationships developed. Due to members' workloads and other priorities, they felt an 'initiator' may still be needed to ensure continued collaboration between members. On the other hand, the other senior leader was quite positive and hopeful about the continued collaboration, as they had already met with members of the community after the 100 day action phase.

Project development

The preparation phase was repeatedly described as the most important phase of the process. Both senior leaders agreed that this stage is critical to achieving results. Reflecting on this phase and their experience, participants agreed that more time and effort should have been put into the preparation phase of the project.

One senior leader reflected on this phase as a crucial stage of the process where participants can begin to understand each other and start to identify as a group rather than individual representatives of their respective organisations. Successful group identification could lead to increased commitment and desire to reach agreed goal.

Miscellaneous

Another theme that emerged from the Phase 3 interviews was a slight sense of divide between health and housing. The language used by the senior leaders indicated that there was perhaps a lack of understanding or lack of communication between the two. Some comments suggested that health and housing's ways of working differ, so there may be challenges around how to work together in the future without the facilitation and time pressures of the C4C Wales approach. It was reflected that members from health perhaps do not fully understand the scope of housing and how they can really work together for maximum effect.

"I think health has to understand that it's not crisis management all the time. I understand that's the majority of how they operate in this world but it would be good to focus in on some of that from my personal perspective. [...] There must be areas where health feels that if housing was involved and we did it this way then we could sort of do something different." (Senior leader)

There was also some uncertainty around the new post that had been created as a result of the collaboration. This uncertainty was in terms of who would be directing the individual and deciding what to do with the data sets they would be producing. This may have been due to the newly created job post sitting under the health board and therefore the senior leader from health was more up to date at time of the Phase 3 interviews.

6.2 Outcomes achieved

This section aims to assess the extent to which the CTMHHP delivered the goal for the collaborative within the 100 day action phase and subsequent progress made in a six-month follow-up phase. It also aims to reflect on participants’ perceptions of what the collaborative has achieved and identify any lessons learnt.

The CTMHHP set a goal at the start of the action phase to develop a mechanism for information sharing between health, housing and local authority partners in the Cwm Taf University Health Board area. It was established early in the process that this mechanism would be a data dashboard.

6.2.1 Phase 2 interviews (post-action phase)

Analysis of outcomes achieved at the post-action interview phase identified two key themes, presented in more details in this section. These included:

- Goals of the collaborative
- Development of relationships

Goals of the collaborative

In the initial phase of the project, the collaborative felt that when they set the specific goals to secure an information sharing agreement between health and housing and produce a prototype data dashboard by the end of the action phase, was achievable. However, by the end of the action phase these goals had not been fully achieved. There were some unforeseen delays with pulling data together, securing approvals and analysis, which meant that although the architecture for the dashboard was developed the datasets had not been imported.

Despite challenges around data sharing and data protection, members felt they had been able to move forward to a point when the data can be brought together and have a proof of concept. Working towards developing a prototype allowed collaborative members to identify the data they wanted to focus on.

*"That was a real success. So that's really important to know that they did do that and that is because they came together and they committed to getting that dashboard. And so they had the data impact assessment approved, they were allowed to share the data. This had never happened before. So some big things did happen."
(Facilitator, Project Oversight Group)*

Following the action phase, core members met separately to finalise the analysis of the data. Members expected a final report to be circulated, outlining the results and recommendations for the organisations to take forward. The collaborative planned to use the final dataset to inform future work around innovative housing, and could see developing further another innovative piece of work on housing in the future.

Development of relationships

While facilitators were unsure about the sustainability of relationships, the collaborative members all agreed that the strengthening of relationships and building connections across the sectors was the main benefit of taking part in this project. All members described it as a very positive experience, beneficial to harnessing the inter-sectorial relationships. Senior leaders felt that there was a willingness to maintain the relationships established even though it would require some coordination.

6.2.2 Phase 3 Interviews (6 months follow up)

Analysis of outcomes achieved at the six month follow up phase identified three key themes, presented in more details in this section. These included:

- Developments
- Connections and relationships
- Next steps

Developments

At the six month follow up interviews, the original goal of the collaborative to create a shared data platform, had still not been fully realised. The data had been shared but not been imported into the dashboard for analysis. In spite of this, one senior leader still felt that work had been completed in terms of coming together, being able to share data between health and housing, and creating a joint job post for the future of this work.

However, the output from the work of the collaborative has helped informed further work in this area. For example, the data gathered for the dashboard was presented and shared at a Health and Housing summit in the summer of 2022, which was attended by Welsh Government, and this data has also

informed the content/ fed into the content for the Director of Public Health's Annual Report. Furthermore, as a result of this project, the focus on health and housing partnership has been added as an objective in the Cwm Taf University Health Board's long term strategy.

"We ended up sharing platforms at this health board wide summit around housing and health and the area of housing and health has now been put on long term strategy for the Health Board as well. So as a result of sort of seeing the potential of that group, we've now got housing and health as an objective within our 2030 strategy" (Senior leader)

Another outcome of the collaborative is the creation of a Health and Housing Programme Manager secondment post. The post will be based in the planning department of the Cwm Taf Morgannwg University Health Board and it was expected that the person in post would be from a housing background rather than health. Both participants felt that the creation of this post presented a huge opportunity for increased collaborative working but one senior leaders seemed slightly out of the loop in terms of knowing if a person had been appointed and started and what their remit would be. Senior leaders hoped that this will help with some of the barriers to sustainability.

Connections and relationships

Relationship building was one of the most valued aspects of the C4C Wales approach. Both senior leaders interviewed valued the new connections they had been able to make. One senior leader felt that coalescing and building relationships was the "main outcome of the process" for them.

As senior leaders, who already had connections in various organisation, they enjoyed being able to make those connections with people they had never previously met. The community brought people together with similar interests but who may never have had the chance to work together before.

Next steps

The two senior leaders who took part in the T3 interviews had slightly different views about the next steps. One senior leader felt uncertain about what happens next and did not know how or when they were going to come together again. This participant felt that for the work to progress further someone external, an 'initiator', to take charge and set the meetings for them, would be beneficial.

"What happens next, you know, was that a good story? Was that a bad story? If there was a good story what actions do we need to develop out of that? If it wasn't such a good story. ? What are the actions we're gonna do together as health and housing to take the next step? So I guess that's where I'm at the moment, a 'Question mark.'" (Senior leader)

On the other hand, the second senior leader interviewed felt that things were progressing well. They believed the new secondment post created would tie things together nicely in the future. For them, communication with other members had continued since the end of the action phase.

"I think the next stage then is to get that person in post. They can really motor forward." (Senior leader)

6.3 Theory of Change

Reflecting on the theory of change for the approach, the assumptions articulated by the Project Oversight Group were broadly correct.

However, the assumption that senior leaders would develop an exit plan was not upheld as an exit plan was not explicitly discussed by either senior leaders or the wider community. Members felt more time and planning should have gone into this process of discussing and agreeing a plan or strategy for the post-action phase.

Due to time constraints, the evaluation did not formally assess changes in participants' mindsets or the mindset of the collaborative. It was therefore not possible to assess the degree to which an individual and collective mindset for growth⁴ and experimentation had been developed during the life of the collaborative or had been maintained after the action phase.

In terms of impacts, the collaborative agreed solutions but did not achieve the intended goal of creating a dashboard. Members saw the value of the approach and learning was subsequently shared at the Health and Housing Summit. We do not know to what extent learning has been shared with teams across Health or Housing.

6.4 Key learning

Drawing on findings from Phase 1, Phase 2 and Phase 3 interviews, this section considers some key learning from the evaluation which should be taken into account for future iterations of the C4C Wales approach.

- The blueprint should more explicitly state some of the potential long term benefits of the approach, such as developing long-term relationships between agencies and agreeing ways of working together. In general, more attention should be given to sustainability in the blueprint.
- Selecting the right type of problem and agencies to receive the C4C Wales support is important. The application process should place less emphasis on applicants describing potential solutions and more on the

problem, what solutions have been tried in the past and who they would want to involve in the collaborative.

- A key consideration for future C4C Wales collaboratives is flexibility. The blueprint needs to reflect that flexibility is key to effective delivery of the approach, depending on the nature and context of the change required. Moving through the process is not necessarily linear and may require reiteration of certain points, which also reflects the skills needed of facilitators to be able to adapt during the action phase. The facilitators ability to pick up on any potential challenges that arise should also be added as a component in the blueprint. For example, where people have different perspectives and opinions, the facilitator is key to finding a resolution and maintaining progress.
- Senior leaders need consider members' capacity to deliver at the outset of the process. As stated in the blueprint, individuals should have permission from their respective organisations to work on tasks in between the meetings. Failure to receive support could be detrimental to the success of a community.
- Collaborative members found great value in the 100 day time-limited approach, as they felt it enabled accountability and ensured people were taking action. As previously mentioned, future iterations of the approach should allow more time in the preparation phase to ensure exit planning is considered, alongside adequate time to forming relationships and building commitment amongst the senior leaders. The final details of the exit plan can be refined during the action phase.
- Although the 100 day time-limited approach was seen as beneficial, some participants questioned its benefits for longer-term change and sustainability. The idea of supporting complex issues with intensive support and then leaving at the end of the 100 day was challenged by some participants in the interviews. This suggests a tapered level of support at post-action phase may be beneficial.
- Future C4C Wales should do their best to include some in-person events, particularly in the preparation phase and early in the 100-day action phase. If delivering the approach virtually again in the future, it was recommended to include a discussion on expectations of online facilitation at the start of the process with all members. This element should be added to preparation phase in the blueprint.

7 Conclusions

Overall, while there were some concerns about the suitability and necessity of the C4C Wales approach for the problem the CTMHHP were trying to

address, the collaborative felt the approach was useful and a good starting point for bringing everybody together, providing a roadmap and structured facilitation, which allowed the group to outline progress and maintain focus.

The goals for CTMHHP were not fully achieved in the 100 day action phase, however, significant progress had been made toward developing a mechanism for sharing health and housing data including an information sharing agreement and developing the architecture for a dashboard. In addition, the time-limited approach led to developing effective relationship between housing and health and positive unintended outcomes including obtaining funding for a joint health and housing post.

The evaluation has demonstrated the approach has utility but for this to be maximised it is important the right type of problem is selected and applicants have not determined their preferred solution from the outset. The pilot has provided valuable insight to further refine the blueprint. Overall the assumptions articulated by the Project Oversight Group in the theory of Change were correct, although it was not possible assess the degree to which a growth mindset⁶ was developed.

8 References

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