



National Audit Office

GUIDE

Auditing Behaviour Change

Evidence of Economy, Efficiency and Effectiveness

Our vision is to help the nation spend wisely.

We apply the unique perspective of public audit to help Parliament and government drive lasting improvement in public services.

The National Audit Office scrutinises public spending on behalf of Parliament. The Comptroller and Auditor General, Amyas Morse, is an Officer of the House of Commons. He is the head of the NAO, which employs some 880 staff. He and the NAO are totally independent of government. He certifies the accounts of all government departments and a wide range of other public sector bodies; and he has statutory authority to report to Parliament on the economy, efficiency and effectiveness with which departments and other bodies have used their resources. Our work led to savings and other efficiency gains worth more than £1 billion in 2010-11.



National Audit Office

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Summary

Behaviour Change and the Government

1 The Government has traditionally used a combination of incentives and levers, such as information campaigns or regulation, to encourage individuals to change their behaviour in a way that will help Government achieve its policy goals. There is a growing belief within Government that these goals may be achieved more effectively if the design and use of interventions incorporates a better understanding of behaviour. For example, many policy outcomes depend on how and whether we, as individuals and groups, change our behaviour. Addressing lifestyle diseases, environmental sustainability, and the pensions deficit will all require a degree of citizen behaviour change.

Behaviour Change and Value For Money

2 Behaviour change is important for value for money (VFM) because it can often contribute to, or be a prerequisite for achieving a policy outcome cost-effectively. Risks to delivery will be exacerbated if departments have a poor understanding of either the behaviours they are seeking to change, or the impact of different behaviour change mechanisms. Broadly, risks to VFM can arise at three stages:

- **Design** – Inadequate theoretical and/or evidence base
- **Implementation** – Absence of process evaluation
- **Evaluation** – Lack of objective measurement
 - Absence of convergent evidence (triangulation)
 - Failure to establish cause and effect

3 Reporting on the VFM of behaviour change can, however, be difficult: programmes may involve a variety of interventions, be of long duration, and produce benefits that can be hard to assign a monetary value to. This guide provides the National Audit Office's emerging thinking on what auditors might look for when doing a VFM assessment.

Introduction

Auditing Behaviour Change

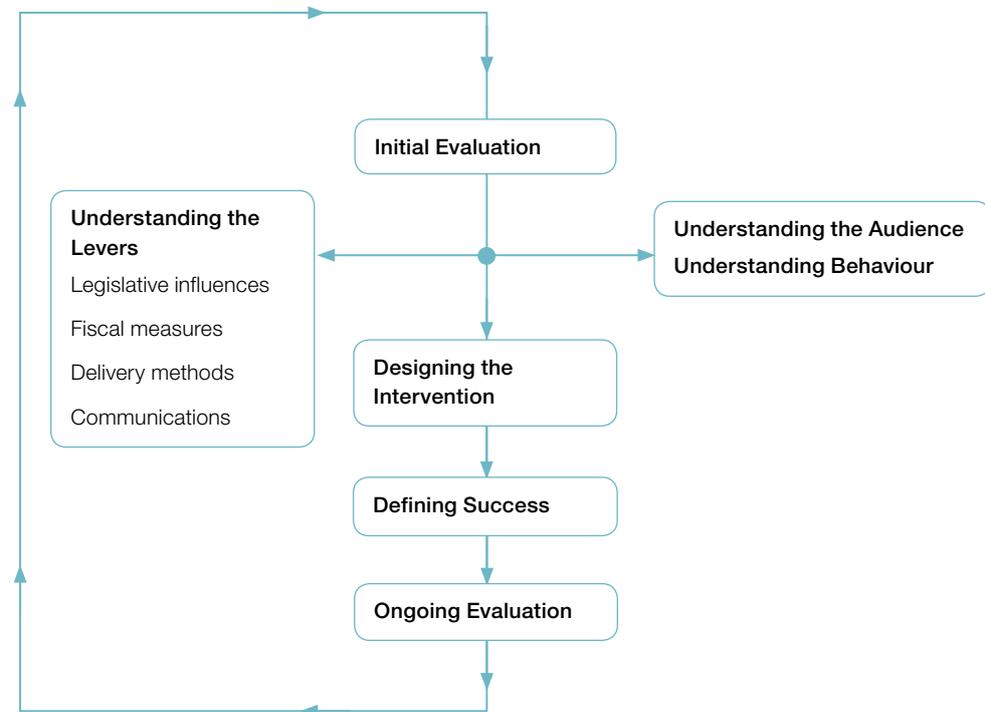
4 The aim of this guide is to highlight some of the issues auditors might consider when scoping the issue of behaviour change in a VFM study. These audit pointers are intended as triggers for further thought and do not constitute an exhaustive list. The complexity of this topic means that there is no one-size-fits-all best-practice guide. We encourage people to seek further guidance where appropriate.

5 Implementing a successful programme to influence behaviour requires departments to take a holistic view of the behaviour they are attempting to influence. Departments should know clearly who the individuals or groups are who they are trying to reach, and develop an evidence-based strategy to understand the drivers of the relevant behaviours and how these behaviours can be influenced. Government must monitor programme outcomes, the relationship of costs incurred to outcomes achieved, and share best practice across departments to ensure that cost-effectiveness is optimised. This cycle of activity is outlined in **Figure 1** overleaf.

6 There are five key areas that auditors may consider when assessing a behaviour change programme. This guide groups these issues into individual sections which follow the logical order illustrated in Figure 1. These sections are outlined in more detail in the remainder of the guide and have the following headings:

- Understanding the Audience
- Understanding Behaviour
- Understanding the Levers
- Designing the Intervention
- Evaluating the Intervention

Figure 1
The behaviour change journey



Source: National Audit Office

7 Each of the five sections provides several audit pointers to indicate some of the higher-level questions that auditors may consider asking when thinking about behaviour change programmes in a value for money context.

8 Each section is arranged in the following structure:

- Audit pointers
- What, why and how
- Examples from NAO reports

9 The final section of this guide provides case studies highlighting some of the issues when auditing a government behaviour change programme. Appendix One provides a collation of audit pointers from the five main sections.

Understanding the Audience

Audit Pointers

Key Question	Audit Questions	Evidence
Does the Department have a good understanding of the target audience?	<ol style="list-style-type: none"> 1 Does the Department understand the key characteristics of their target audience (e.g. social demographic characteristics, potential barriers to change)? 2 Are the Department's assumptions about the above based on current, reliable evidence? 3 Were key experts and relevant stakeholders engaged to ensure a comprehensive understanding of the audience was achieved? 	The programme clearly set out who it was intended to reach, and identified the key characteristics of this audience using up-to-date evidence and advice.
Has the Department determined whether different segments of the audience may respond differently to the programme?	<ol style="list-style-type: none"> 1 Has the Department identified if distinct sub-groups exist within the target audience? 2 Does the Department have an understanding of how any different sub-groups may vary with respect to key behavioural characteristics? 3 Has the Department identified whether the audience includes any vulnerable groups? 	Evidence of research into the target audience, and attempts to 'segment' this audience, where appropriate. Efforts to understand differences between sub-groups which may be relevant to the behavioural outcomes of the programme.

10 What is it? Departments should have a sound understanding of who they intend to influence with a particular behaviour change programme. This includes understanding the audience's demographic characteristics and whether distinct sub-groups of the audience should be targeted in different ways. This may be important if, for example, the information needs or the origin of the targeted behaviour differs across sub-groups.

11 Why should it be done? The audience for a behavior change programme is unlikely to be a homogeneous group. People may engage in similar behaviours, but have different underlying priorities, motivations, behavioural drivers and barriers to change. Understanding the audience is critical to a department's comprehension of who they need to reach, how to reach them effectively, and which lever(s) is likely to be effective in enabling the desired behavioural change.

12 How should it be audited? Departments should have attempted to segment the audience or collect data on the characteristics of sub-groups and their environments. Segmentation will enable better design of the programme – addressing the behaviours of several sub-groups is more effective than assuming the audience to be homogeneous, and simpler than considering each individual alone.

Examples from NAO reports

Dealing with the Tax Obligations of Older People (2008)

The NAO report found that people who pay their tax late do so for a number of reasons, and that tackling this problem requires an understanding of the behavioural characteristics of the different segments of the audience. For example, the report found that it costs Her Majesty's Revenue and Customs (HMRC) twice the average amount to deal with an enquiry from an elderly person because they were not addressing the specific needs and behaviours of this sub-group. HMRC subsequently developed a strategy to enable the different segments of their population to use the channel (post, telephone, online) that meets their needs at the lowest cost to both the individual and the department. The approach was developed on the recognition that sub-groups may have distinct needs at different times.

Understanding Behaviour

Audit Pointers

Key Question	Audit Questions	Evidence
Has the Department developed an understanding of the key behaviours that need to be changed to achieve the intended outcome?	<p>1 Has the Department clearly linked a current pattern of behaviour to the policy problem it seeks to address?</p> <p>2 Has the Department identified the key drivers to this behaviour?</p> <p>3 Has the Department identified the type of behavioural change required to produce the intended outcome, and any barriers to achieving this change?</p> <p>4 Was the understanding of behaviour based on robust evidence and related to current behavioural models?</p> <p>5 Were behavioural experts involved in informing the understanding of behaviour?</p>	<p>A review of the research literature (academic & policy) on the relevant behavioural change, and consultation of experts. The review should address:</p> <ul style="list-style-type: none"> ● Potential models of behavioural change. ● Motivations and barriers to change. ● Any social, cultural, environmental, and psychological factors likely to influence success of changing the behaviour.

13 What is it? Human behaviour is often complex and has multiple determinants. Designing a programme to enable behaviour change requires departments to have a good understanding of what drives people to behave in the way that they do. This involves more than simply segmenting the audience, although different sub-groups may behave differently. What is needed is an understanding of the current behavioural science: what behavioural model(s) best describes the processes underlying the relevant behaviour. Depending on the type of behaviour, it may be that attitudes play an important role; alternatively, the primary influence may be contextual, such that an individual's environment triggers particular behavioural responses.

14 Why should it be done? Examining behavioural drivers will aid departments' understanding of a) how the behaviour to be changed arises, b) what opportunities exist to alter the behaviour (see Understanding the Levers, next section), and c) how changing behaviour may relate to policy goals. Understanding drivers of behaviour is also important for developing key performance indicators and a realistic impact assessment of a behaviour change programme. The failure to understand behaviour in these ways is a key risk to value for money.

15 How should it be audited? Departments should have taken an evidence-based approach to this complex area. Developing an understanding of relevant behaviours is likely to involve both consultation with behavioural experts, segmentation (see Understanding the Audience on page 7) and reference to best practice (what has worked for similar behaviours in similar individuals elsewhere?). Departments should also consider any ethical issues, potential unintended consequences, and whether their programme may conflict/complement the work of other areas of government.

Examples from NAO reports

Protecting consumers? Removing retail price controls (2008)

Deregulation of the energy retail markets was intended to reduce prices through competition. This report looked at the fact that whilst many of us could reduce our electricity bills by changing supplier; a large proportion of us do not. Evidence suggests that the main reasons why people do not switch are a) inertia, b) the high costs associated with searching for and switching to a new supplier, and c) consumers discount the future value of any financial savings associated with changing to a cheaper supplier. The NAO report recommended that suppliers and regulators develop a better understanding of their audience and its behaviours:

- **Begin from the viewpoint of the consumer** – many consumers will not make decisions about energy in isolation from other lifestyle decisions.
- **Research consumer outcomes** – consumer research should include objective outcomes as well as opinions and self-reported behaviours.
- **Expand the range of methodologies used** – including more qualitative and deliberative research to understand consumer attitudes and behaviours.

Understanding the Levers

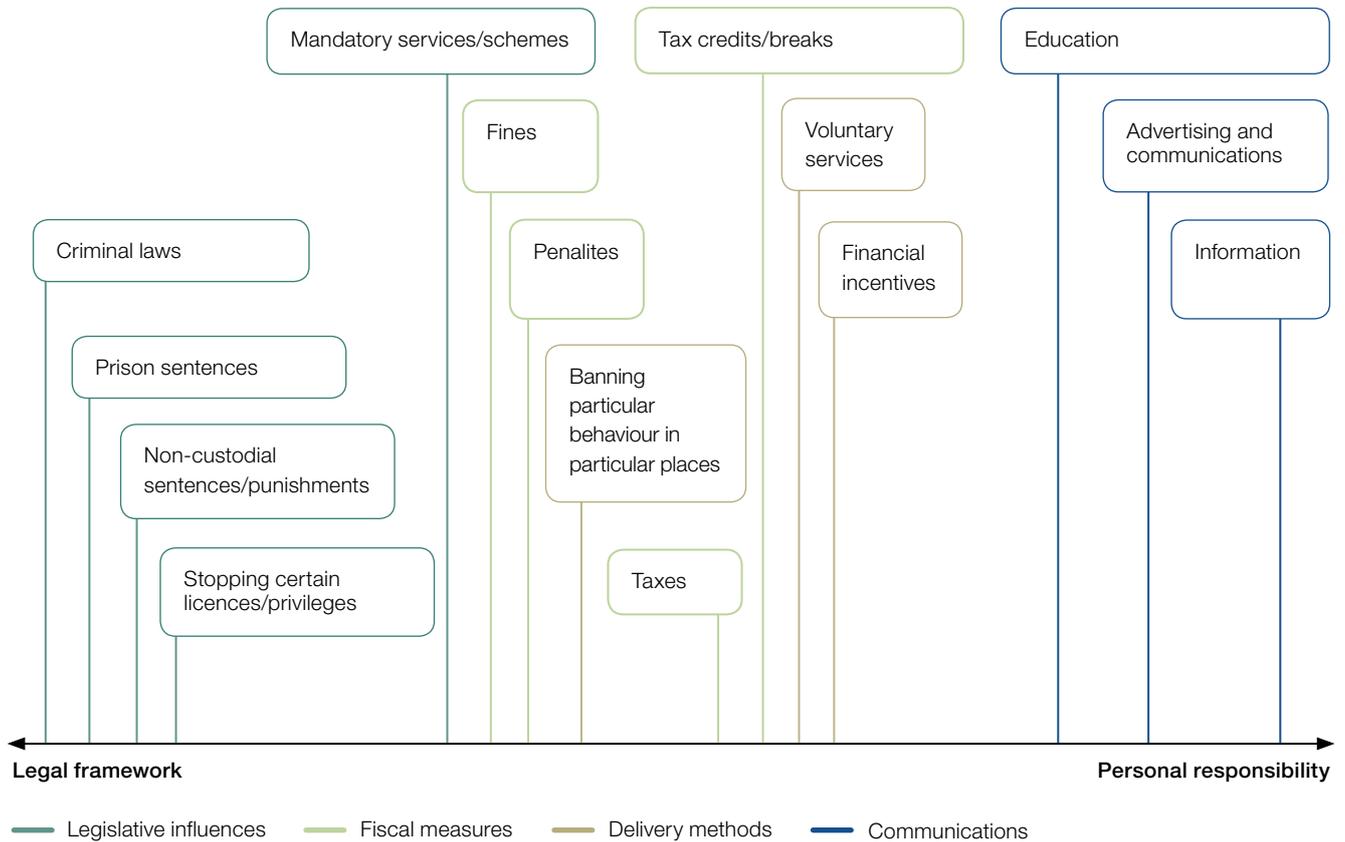
Audit Pointers

Key Question	Audit Questions	Evidence
Has the Department identified the most effective levers to bring about the intended behavioural change?	<ol style="list-style-type: none"> 1 Has the Department used an understanding of their audience and its behaviour to identify appropriate levers? 2 Has due consideration been given to the full range of potential levers? 3 Have potential unintended consequences associated with different levers informed selection? 4 Has the Department's selection of levers been informed by their likely effectiveness and cost-effectiveness in influencing the behaviour? Was a full appraisal of the likely costs and benefits conducted? 5 Is there evidence that the Department engaged with experts and best practice in this process? 	<ul style="list-style-type: none"> ● To identify appropriate levers, the Department should assimilate their understanding of the audience and its behaviour with an assessment of the evidence on the cost-effectiveness of potential levers. ● An impact assessment and an options appraisal should be available.

16 What is it? Departments' understanding of its target audience and their behaviours should inform the selection of appropriate levers of influence. Potential levers may include those illustrated in **Figure 2** overleaf, which we have classified into four groups: Legislative, Fiscal, Delivery and Communications.

17 Why should it be done? The selection of levers is critical to maximising the likelihood of changing behaviour and minimising the costs associated with doing so. Some behaviours may be impervious to certain levers; for example, the evidence suggests that public information campaigns alone may be insufficient to engender significant, sustained health behaviour change among the obese.

Figure 2
Levers available to government



Source: National Audit Office

18 How should it be audited? Departments should have addressed several key questions:

- a** What does behavioural theory and research suggest will work?
- b** What does the evidence from previous interventions suggest will work?
- c** Considering the levers identified in a) and b), how can cost-effectiveness be maximised (e.g. by using one lever in isolation/a mix of approaches)?

19 Departments should inform their choice of lever(s) by reference to academic research and best practice. Departments should consider which levers are likely to produce sustained behaviour change.

Examples of NAO reports

Reducing Alcohol Harm 2007-08

This report evaluates work by the Department of Health and the NHS to address the health effects of alcohol misuse, which costs the NHS £2.7 billion per year. The type of prevention strategy (lever) which was most effective depended on the type of alcohol use:

- For those whose alcohol misuse was rated as 'hazardous' or 'harmful' (for example, teenage binge drinkers) public education was influential.
- For those whose alcohol misuse behavior was rated as 'dependent' or 'severely dependent' (for example, long-term alcoholics) specialist counselling and detoxification was most effective in reducing alcohol consumption, (potentially preventing the need for a liver transplant at a cost of £80,000).

Designing the Intervention

Audit Pointers

Key Question	Audit Questions	Evidence
Having identified the most cost-effective lever, does the programme design facilitate maximum impact?	<ol style="list-style-type: none"> 1 Was the Department clear about its intended behavioural outcome? Was this realistic and in line with the evidence on what impact could be achieved using the selected lever(s)? 2 Were appropriate programme management arrangements in place (e.g. aligning objectives of delivery bodies, coordination with other departments)? 3 Where appropriate, did the Department demonstrate that it had resources available to support sustained behavioural change over the longer term? 4 Was a risk analysis conducted to inform the management of potential risks on implementation? 5 Were interim outcomes identified to enable early assessment of programme impact? 6 Were feedback loops built into the programme roll-out to ensure lessons were learnt from any problems encountered during implementation? 7 Were the requirements of robust evaluation considered at the front-end? 	<ul style="list-style-type: none"> ● Assimilation of evidence to support the contention that the programme would have the intended behavioural impact. ● Analysis to support the programme as the most cost-effective approach to achieve behaviour change. ● A business plan incorporating both of the above, with reference to their understanding of the audience and potential unintended consequences, and contextualised within other programmes of work across government. ● A clear, justified statement of intended outcomes (both interim and long term) should be available. ● Opportunities to learn from the failure to meet interim outcomes should be enabled through a risk analysis and provision of feedback loops. ● A feasible evaluation plan with consideration given to programme design to facilitate robust evaluation.
Was the programme implemented in such a way as to secure maximum impact?	<ol style="list-style-type: none"> 1 Where appropriate, did the Department conduct a pilot or demonstration project and feed the results into the programme design? 2 Were processes in place to ensure that the programme was implemented as intended and the feedback loops were operating to refine the roll-out? 3 Where multiple delivery bodies or stakeholders were involved, were coordination and reporting ongoing, facilitating a 'bottom-up' flow of information to inform programme management? 	<ul style="list-style-type: none"> ● In the absence of existing best practice evidence on likely effectiveness, the Department should conduct a demonstration project to test the feasibility of the programme. ● A clear implementation programme, consistent with principles of good programme management, should be prepared.

20 What is it? To design an effective behaviour change programme, departments must first understand their audience(s), their behaviour and the appropriate levers to change it. Depending on the complexity of the intervention it may be necessary to consult academic experts and/or conduct a pilot programme (e.g. running an advertising campaign to encourage flu vaccinations might be behaviourally simpler to achieve than a long-term financial incentive scheme to facilitate smoking cessation). An understanding of any ethical issues and potential unintended consequences of intervention is also required.

21 Departments should also have an understanding of the costs, including those associated with the audience's baseline behaviour (e.g. health and productivity costs associated with smoking), costs associated with delivering the intervention (e.g. training, resources, monitoring), and the projected savings if the projected behaviour change is achieved. Finally, departments should also have a clear evaluation plan from the outset, as many decisions at the design stage will have an impact on the ease with which behaviour change due to the programme can be quantified.

22 Why is it done? The design of a behaviour change intervention is central to both its success and cost. The issues identified in the previous three sections (Understanding the Audience, Understanding Behaviour, Understanding the Levers) should inform decisions about the design of a programme. Risks to value for money will arise where this is not the case, and also when a clear business case and evaluation plan have not been prepared.

23 How should it be audited? Departments should have a comprehensive business plan, justified with reference to the evidence base (audience, behaviour, levers; best practice etc), costing assumptions, and key performance indicators.

Evaluating the Intervention

Audit Pointers

Key Question	Audit Questions	Evidence
Was an evaluation process built into the programme at the design stage?	<ol style="list-style-type: none"> 1 Was a budget allocated for evaluation? 2 Was the programme designed in such a way as to enable robust evaluation? 3 Did a mechanism exist by which results of interim evaluations could contribute to feedback loops and learning during implementation? 	<ul style="list-style-type: none"> ● An evaluation plan should have been prepared in advance of implementation. ● A proportion of the programme budget should be set aside for evaluation.
Was a robust evaluation of the programme carried out?	<ol style="list-style-type: none"> 1 Did the Department employ reliable, objective outcome measures, where possible? 2 Were subjective outcome measures used to triangulate objective evidence of change, where appropriate? 3 Did the Department seek to demonstrate behaviour change (for example, by comparing behaviour post-implementation to a baseline established prior to roll-out of the programme)? 4 Did the Department seek to ascribe any observed behaviour change to the influence of the programme (i.e. establish cause and effect)? 5 Where the intended behavioural outcomes were not achieved, did the Department have an understanding as to why? 	<p>In general, robust evaluations have several critical features. Departments might be expected to demonstrate that they have:</p> <ul style="list-style-type: none"> ● used objective measures ● obtained a baseline measure and/or identified a control group for comparison ● collected and analysed interim outcome data to generate learnings for feedback into the programme; and ● collected and analysed outcome data to determine if the programme had the intended behavioural effect, and if not, why not.

24 What is it? Evaluation is critical for departments to identify whether a programme has achieved, or is on track to achieve, the desired behaviour change. Evaluations should use objective, reliable measures and be ongoing, in order to feedback performance improvements. Departments should also seek to disaggregate any effects on behaviour due to interventions from other influences.

25 Why is it done? Evaluation is critical to establishing the effectiveness and cost-effectiveness of an intervention, and will enable identification of any potential improvements to the design or unintended consequences. Dissemination of evaluation results is also important to developing best practice in public sector behaviour change interventions.

26 How is it audited? Poor evaluation constitutes a key threat to value for money: if departments are unable to determine whether an intervention has been effective, let alone cost-effective, taxpayer money is at risk. Because behaviour is often viewed as a 'soft' science/outcome, departments may fail to recognise the need for rigorous evaluation. Ideally, evaluation will be built in at the design stage, at which stage the criteria for success should have been clearly defined.

27 The primary outcome measures should, where possible, be objective measures of behaviour; 'softer' measures (e.g. attitudes, self-reported behavioural change, website hits following an advertising campaign) should be used for triangulation. Baseline data should have been obtained in advance of the intervention, to provide a comparison by which to demonstrate behavioural 'change'. Departments might also have attempted to establish whether any observed behaviour change can be attributed to the effect of the intervention; in some cases this can be difficult, but departments should consider best practice techniques. A process evaluation is also necessary to identify whether the programme has been delivered consistently, and as intended: if the desired behaviour change does not occur, this may be partly attributable to poor implementation.

Key Examples

Good Practice: Stroke

Stroke care costs the NHS approximately £2.8 billion a year in direct care and costs and the wider economy some £1.8 billion more in lost productivity and disability. Additionally, annual informal care costs are around £2.4 billion. It is currently estimated that one in four patients die from stroke in the UK, with people from a low Socio-Economic Status (SES) being three times as likely, and Black and Minority Ethnic (BME) groups being twice as likely, to have, or die from, a stroke.

The programme was based on learning

Despite the overall success of the Department's Stroke: ACT FAST campaign, launched in March 2009, the local impact on hard to reach groups was unclear. Evidence from a 2010 follow-up report indicated that one in five respondents who had experienced a stroke were unaware that ethnic origin increased the risk of stroke. To tackle this, the Greater Manchester Public Health Network decided to roll-out a more targeted local campaign. This helped achieve a balance between national and local delivery in the overall programme design.

The programme was based on an evidence-based understanding of the audience

Social research commissioned by the network indicated that low SES groups were less likely to access appropriate preventative services and awareness programmes within the metropolitan area, despite increased levels of high-risk behaviour. This was especially amongst men from lower SES groups.

The programme took a multi-faceted approach

To achieve local impact, based on an understanding of the audience, a comprehensive communications plan was designed and implemented. Radio advertising on three local stations, direct marketing, media engagement (recruiting an actor from Coronation Street) and methods of active engagement (e.g. ad-vans driven within key stroke hotspots) were used as means to raise awareness. The FAST brand was also utilised with a range of promotional material produced and mailed out to all GP surgeries, out-of-hour clinics, pharmacies and residential homes in Greater Manchester.

Evaluation showed success

The programme led to an increased uptake of preventative services. Over a four-week period following the campaign, 2,000 participants had their blood pressure screened; 17 per cent (340) of who were referred on for further clinical investigation.

Bad Practice: Chlamydia

The delivery of the Government's programme to control chlamydia infection in young people was found not to be value for money. The NAO estimated that around £100 million had been spent by 2009-10 but that £17 million could have been saved if the programme was better run.

The development of the programme was not based on lessons learnt

Despite the four-year trial period, the health service failed to learn lessons. Problems found in the piloting were therefore not addressed before the programme was expanded.

The programme was not based on an understanding of the behaviours of the target audience

To target people who were not using sexual health clinics, Health Officials went to bars and clubs to encourage young people to come forward. However, there was little evidence to demonstrate this was an effective method of influencing young people.

The programme lacked a clear message

A key failing was duplication of effort. Forty-five different brands were developed for the programme in different parts of England. Whilst resources were wasted on the development of these, money could have been saved by setting up more centralised purchasing arrangements.

There was no centralised plan or budgeting

Spending varied across Primary Care Trusts (PCTs) because there was little central guidance on costs. Whilst the NAO calculated £33 per test as being achievable in 2008-09, the average cost per test was actually £56 (the highest figure recorded by a trust was £255 per test).

There was no consideration of providing incentives for key actors

As well as the targeted group, the Department did not consider the behaviour of GPs. Without any incentive for participation (GPs were not paid to do the screening under the terms of their contract), NHS chiefs struggled to get GPs fully engaged.

The programme was not designed to fully address the issues

One in ten of those who tested positive did not receive follow-up treatment to treat the infection. Most PCTs were also found not to be reaching the programme's standards for tracing and treating the sexual partners of people who tested positive.

Appendix One

Checklist of Audit Pointers

Key Question	Audit Questions	Evidence
Understanding the Audience		
Does the Department have a good understanding of the target audience?	<ol style="list-style-type: none"> 1 Does the Department understand the key characteristics of their target audience (e.g. social demographic characteristics, potential barriers to change)? 2 Are the Department's assumptions about the above based on current, reliable evidence? 3 Were key experts and relevant stakeholders engaged to ensure a comprehensive understanding of the audience was achieved? 	The programme clearly set out who it was intended to reach, and identified the key characteristics of this audience using up-to-date evidence and advice.
Has the Department determined whether different segments of the audience may respond differently to the programme?	<ol style="list-style-type: none"> 1 Has the Department identified if distinct sub-groups exist within the target audience? 2 Does the Department have an understanding of how any different sub-groups may vary with respect to key behavioural characteristics? 3 Has the Department identified whether the audience includes any vulnerable groups? 	Evidence of research into the target audience, and attempts to 'segment' this audience, where appropriate. Efforts to understand differences between sub-groups which may be relevant to the behavioural outcomes of the programme.
Understanding the Behaviour		
Has the Department developed an understanding of the key behaviours that need to be changed to achieve the intended outcome?	<ol style="list-style-type: none"> 1 Has the Department clearly linked a current pattern of behaviour to the policy problem it seeks to address? 2 Has the Department identified the key drivers to this behaviour? 3 Has the Department identified the type of behavioural change required to produce the intended outcome, and any barriers to achieving this change? 4 Was the understanding of behaviour based on robust evidence and related to current behavioural models? 5 Were behavioural experts involved in informing the understanding of behaviour? 	<p>A review of the research literature (academic and policy) on the relevant behavioural change, and consultation of experts. The review should address:</p> <ul style="list-style-type: none"> ● Potential models of behavioural change ● Motivations and barriers to change. ● Any social, cultural, environmental, and psychological factors likely to influence success of changing the behaviour.

Key Question	Audit Questions	Evidence
Understanding the Levers		
Has the Department identified the most effective levers to bring about the intended behavioural change?	<ol style="list-style-type: none"> 1 Has the Department used an understanding of their audience and its behaviour to identify appropriate levers? 2 Has due consideration been given to the full range of potential levers? 3 Have potential unintended consequences associated with different levers informed selection? 4 Has the Department's selection of levers been informed by their likely effectiveness and cost-effectiveness in influencing the behaviour? Was a full appraisal of the likely costs and benefits conducted? 5 Is there evidence that the Department engaged with experts and best practice in this process? 	<ul style="list-style-type: none"> ● To identify appropriate levers, the Department should assimilate their understanding of the audience and its behaviour with an assessment of the evidence on the cost-effectiveness of potential levers. ● An impact assessment and an options appraisal should be available.
Designing the Intervention		
Having identified the most cost-effective lever, does the programme design facilitate maximum impact?	<ol style="list-style-type: none"> 1 Was the Department clear about its intended behavioural outcome? Was this realistic and in line with the evidence on what impact could be achieved using the selected lever(s)? 2 Were appropriate programme management arrangements in place (e.g. aligning objectives of delivery bodies, coordination with other departments)? 3 Where appropriate, did the Department demonstrate that it had resources available to support sustained behavioural change over the longer term? 4 Was a risk analysis conducted to inform the management of potential risks on implementation? 5 Were interim outcomes identified to enable early assessment of programme impact? 6 Were feedback loops built into the programme roll-out to ensure lessons were learnt from any problems encountered during implementation? 7 Were the requirements of robust evaluation considered at the front-end? 	<ul style="list-style-type: none"> ● Assimilation of evidence to support the contention that the programme would have the intended behavioural impact. ● Analysis to support the programme as the most cost-effective approach to achieve behaviour change. ● A business plan incorporating both of the above, with reference to their understanding of the audience and potential unintended consequences, and contextualised within other programmes of work across government. ● A clear, justified statement of intended outcomes (both interim and long term) should be available. ● Opportunities to learn from the failure to meet interim outcomes should be enabled through a risk analysis and provision of feedback loops. ● A feasible evaluation plan with consideration given to programme design to facilitate robust evaluation.

Key Question	Audit Questions	Evidence
Designing the Intervention <i>continued</i>		
Was the programme implemented in such a way as to secure maximum impact?	<ol style="list-style-type: none"> 1 Where appropriate, did the Department conduct a pilot or demonstration project and feed the results into the programme design? 2 Were processes in place to ensure that the programme was implemented as intended and the feedback loops were operating to refine the roll-out? 3 Where multiple delivery bodies or stakeholders were involved, were coordination and reporting ongoing, facilitating a 'bottom-up' flow of information to inform programme management? 	<ul style="list-style-type: none"> ● In the absence of existing best practice evidence on likely effectiveness, the Departments should conduct a demonstration project to test the feasibility of the programme. ● A clear implementation programme, consistent with principles of good programme management, should be prepared.
Evaluation		
Was an evaluation process built into the programme at the design stage?	<ol style="list-style-type: none"> 1 Was a budget allocated for evaluation? 2 Was the programme designed in such a way as to enable robust evaluation? 3 Did a mechanism exist by which results of interim evaluations could contribute to feedback loops and learning during implementation? 	<ul style="list-style-type: none"> ● An evaluation plan should have been prepared in advance of implementation ● A proportion of the programme budget should be set aside for evaluation.
Was a robust evaluation of the programme carried out?	<ol style="list-style-type: none"> 1 Did the Department employ reliable, objective outcome measures, where possible? 2 Were subjective outcome measures used to triangulate objective evidence of change, where appropriate? 3 Did the Department seek to demonstrate behavioural change (for example, by comparing behaviour post-implementation to a baseline established prior to roll-out of the programme)? 4 Did the Department seek to ascribe any observed behaviour change to the influence of the programme (i.e. establish cause and effect)? 5 Where the intended behavioural outcomes were not achieved, did the Department have an understanding as to why? 	<p>In general, robust evaluations have several critical features. Departments might be expected to demonstrate that they have:</p> <ul style="list-style-type: none"> ● used objective measures ● obtained a baseline measure and/or identified a control group for comparison ● collected and analysed interim outcome data to generate learnings for feedback into the programme; and ● collected and analysed outcome data to determine if the programme had the intended behavioural effect, and if not, why not.

Where to find out more

The National Audit Office website is
www.nao.org.uk

If you would like to know more about
the NAO's work on Behaviour Change,
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