Making a difference Toolkit (Summary)

1. What is the Making a difference Toolkit (MADT)?

The MADT is a toolkit developed by Healthwatch England and 18 local Healthwatch including Healthwatch Gateshead (HWG) and Healthwatch Newcastle (HWN) in 2019.

The toolkit was designed using the Theory of Change model which is widely used by the Voluntary sector. A Theory of Change describes how an organisation makes a difference and aims to help us with the following:

- Understand how we make can a difference by being clear about the outcomes or changes we have achieved.
- Measure and communicate the effectiveness of our work.
- Identify what is working, and what is not, so we can adjust your approach and target or resources.
- Demonstrate the credibility of our work, increase public trust and encourage partners to act on our insight and recommendations.
- Evidence the outcomes we achieve to those who fund us.

2. Why use the MADT ?

We are about changing the hearts and minds of others – using the insight we gather from the public to make a case for improvement. However, demonstrating this is not always straight forward.

We're a small fish in a big sea. We have limited resources, but our remit covers all health and social care and those we work with are often large, complex organisations.
We need to stay focused.

3. Who is it designed for?

Healthwatch staff or volunteers who are involved in helping their Healthwatch establish an approach to evidencing and communicating impact.

"I am a Board member who wants to be clear on Healthwatch's priorities and to be able to be satisfied that we are making a difference and using our resources effectively for maximum benefit" (HWE)

4. How will the toolkit help us ?

The toolkit will help us to :

a. Identify goal: What do we want to achieve in the long term?
b. Set priorities: Where do we want to focus and why?
c. Define outcomes: What changes are we seeking to achieve?
d. Set indicators: How will we know if a change has happened?
e. Identify activities: What will we do and with whom to make change happen?
f. Identify inputs: What do we need to carry out our work?
g. Identify assumptions: What assumptions lie behind the approach we are taking?
h. Communicate: Who needs to know how we make a difference?

Here is an example of how we might use one of the tools to shorten our priorities by scoring each priority.

Key questions 1=low 4= high	Access to 111 (Example)		
Do stakeholders want us to do this?			
Does this fit in our stated role?			
Does this fit with our strategy?			
Do we have the skills to make an impact?			
Do we or can we get the resources to do this?			
Does this fit with our commitments?			
Can we make a real difference?			
Total Score			

5.Next steps -making a long list!

We need to make a list of all the things that we could do over the next year or so. These might consist of ongoing work; work we are committed to, or projects we would like to do. Here are some of the things we are looking at:

- Local issues or concerns
- Local developments in health and social care
- Issues that we know need further work on e.g. a gap in current provision.
- National priorities and developments that could have a local impact
- Feedback and issues raised through our online feedback centre
- Information from Committee members
- Information from volunteers
- Information and feedback from VCSE organisations
- Information from horizon scanning activities (reports, media, think tanks, local and national data sets etc)
- Information from health and social care providers and commissioners