## **ACTIVITIES**



# **KEY MECHANISMS**



#### **OUTPUTS**



## OUTCOMES - IMPACT



Local delivery models (Demonstrators, Networks, Facilitators, Ask IMPACT) based in the reality of local practice/people's lives

**Embedding local lessons in** national policy and practice

Effective leadership, management and operations, including PMO, communications and engagement

- Practical support to make change on the ground
- **Ensuring participation of seldom heard voices**
- Bringing people together to co-create change

#### **Underpinned by:**

- Inclusive definition of evidence (with transparent and rigorous review)
  - Facilitation/OD skills of delivery staff
  - Building capacity by promoting hybrid roles
  - Co-production/tackling power imbalances
  - Local ToC/evaluation built into all projects
  - Planning for embedding/scaling from the start
  - Depth and breadth of IMPACT's relationships
  - Alignment with current/future policy agendas

**Evidence that connects to** people's value bases

Diverse range of stakeholders engaged with IMPACT, locally and nationally, and excited about what's possible

People feeling that IMPACT is helping with things they find hard/starting to see that evidence can make a difference to their work/people's lives

Research, lived experience and practice knowledge starting to be seen as equally valid

Sustainable and productive relationships between ASC stakeholders to co-create positive change/innovations and improve outcomes for people drawing on care and support/families

Increased capacity and skills in the ASC workforce to work with evidence of different kinds to innovate, improve care and deliver better outcomes

Greater understanding of the factors which help and hinder the implementation of evidence in practice, using this to overcome longstanding barriers to positive change

More widespread use of evidence, leading to better care practices, systems and outcomes for people who draw on care and support, their families and communities

#### **KEY FEATURES OF ASC CONTEXT**

- Fragmented, short-staffed and under-funded
- Financial/service pressures lack of time and space
- Inequalities and power imbalances
- Lack of shared spaces

- Lack of research culture
  - Over-reliance on pilots
    - **Anglo-centric**
  - **Poor relation of NHS**
- Can be overly task-oriented

#### **KEY FEATURES OF IMPACT'S APPROACH**

- **Embedded in realities of local** practice/people's lives
- Inclusive approach to what constitutes valid evidence
- Strong emphasis on learning by doing
- Working locally, regionally, nationally and across the UK

- Co-production and hearing 'seldom heard' voices
- Ambition, level and duration of investment
- Scale, reach, depth and breadth of relationships
- · Focusing on ASC in its own right but also on boundaries with other sectors





