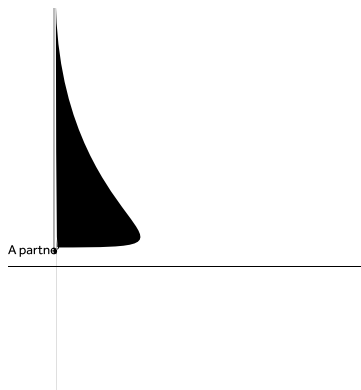


# Learning and insights from a real-world implementation context



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**We identified nine themes that described programme implementors' areas of interest with regard to economic evaluation, and their perceptions of barriers and facilitators to the collection and use of cost data.**

1. Perceived importance of economic evaluation
2. Different types of analysis
3. Challenges inherent to HeadStart
4. Contextual constraints
5. Missing data
6. Perceived limitations of economic evaluation tool
7. Effective communication
8. Relationships and collaboration
9. Drawing on existing tools

By the fourth year of the programme, the HeadStart partnerships varied, in terms of how much cost data they had already collected, the extent to which they had begun planning or implementing local cost data analysis, and the degree to which they ascribed importance to cost data analysis as compared to impact data analysis.

The relative importance of cost data collection, analysis, and presentation may be driven in part by programme implementors' perceptions of audience priorities (such as those of schools, the community, or commissioners).

Barriers to collecting and using cost data included implementors' perceptions of the difficulties of costing a programme consisting of multiple layers of school- and community-based support and interventions for young people and families, delivered at targeted, universal, whole-school, and whole-system levels. Implementers also commented on the limitations of the tool that they had been provided with to economically evaluate their programmes at a local level. The difficulty of quantifying the potential long-term cost savings of the programme given the limits of its delivery period was also raised by implementers as a challenge.

**Our findings speak to the difficulties of imposing a systematic and standardised method for cost data analysis in the context of real-world implementation of a complex, multi-area-level, prevention and early intervention programme.**

This reflects learning from implementation science research, which highlights the importance of employing approaches to economic evaluation in real-world implementation settings that are both rigorous and pragmatic (Eisman, Kilbourne, Dopp, Saldana, & Eisenberg, 2020).

**Our findings have implications for the future development of economic evaluation tools intended for implementers to use in a real-world programme delivery setting.**

Economic evaluation tools should not be too time-consuming, complex, or burdensome for programme staff to use, and need to be compatible with the structure of the programme. Involving programme implementers in designing and interpreting economic evaluations can help to

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The total cost of mental illness to the UK economy is estimated at £70-100 billion each year (Davies, 2014). Statistics show that the prevalence of mental disorders among children and adolescents in the UK is rising, with 1 in 6 young people aged 6-16 years old experiencing a mental disorder in 2021, compared to 1 in 9 in 2017 (NHS Digital, 2021). The Early Intervention Foundation (EIF) have calculated that nearly £17 billion is spent each year in England and Wales on 'late intervention' services that are required when young people experience significant difficulties in life, such as mental disorders, child abuse, and involvement in crime (Chowdry & Fitzsimons, 2016). Thus, there is a clear need for effective prevention and early intervention programmes that seek to mitigate risk factors at an early stage in life and promote positive mental health and wellbeing, in order to prevent escalation of difficulties and future struggles (Chowdry & Fitzsimons, 2016; Clarke & Lovewell, 2021).

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At the same time, there is increasing impetus from the public and decisionmakers for public resources to be spent on delivering cost-effective interventions, where their costs are outweighed by their benefits (Crowley et al., 2018). Policymakers are increasingly requiring their funding decisions to be underpinned by information on economic costs and benefits (Crowley et al., 2018). The National Institute for Health and Care Excellence (NICE) in the UK, for example, requires formal evidence of cost-effectiveness to inform intervention funding decisions (Mihalopoulos & Chatterton, 2015). Systematic reviews of economic evaluations have concluded that there is economic merit in funding mental health and wellbeing prevention and early intervention programmes for young people (e.g., Feldman, Gebreslassie, Sampaio, Nystrand, & Ssegona, 2021; Le et al., 2021). However, their conclusions are limited by the relatively small number of economic evaluations that have been conducted, and the varying quality and diversity of evaluation methodologies (e.g., Le et al., 2020; Schmidt et al., 2020).

Economic evaluations often take place within the context of randomised controlled trials (RCT)





The national qualitative evaluation of HeadStart has received approval from the UCL Research Ethics





to facilitate programme implementers in conducting local economic evaluation must be compatible with the structure of the programme. The tool also needs to balance facilitating robust cost data collection and enabling sites to make the case for future investment, with not being too time-consuming or burdensome for staff to use. The time-consuming nature of economic evaluation, and the resources and commitment needed by programme implementers (on top of their existing responsibilities) to be able to engage in such activities, were issues similarly cited by programme staff in a study of the process of conducting an economic evaluation of a child neglect prevention programme in the USA (Brodowski & Filene, 2009).

The difficulty of quantifying the potential long-term cost savings of the programme given the limits of its delivery period was also raised by implementers as a challenge to meaningful economic evaluation. Indeed, most existing economic evaluations of prevention and early intervention programmes do not account for long-term benefits (e.g., Le et al., 2021; Schmidt et al., 2020). Previous evaluations of another area-level, UK-based, early intervention programme for children and families – Sure Start - have demonstrated cost avoidance and savings well after the initial delivery period (e.g., Cattan, Conti, Farquharson, & Ginja, 2019; Cattan, Conti, Farquharson, Ginja, & Pecher, 2021). For example, Cattan et al. (2021) found that Sure Start reduced hospitalisations in childhood and adolescence, which offset approximately 31% of the original cost of providing Sure Start for children under the age of five. The multiple economic evaluations of Sure Start illustrate that complex programmes like this often require a number of different approaches to economic evaluation, including estimating potential cost savings or benefits based on robust existing research in the absence of actual cost data (particularly those in the long-term), and making comparisons to existing national datasets in the absence of comparison groups (e.g., Cattan et al., 2019, 2021; Meadows et al., 2011).

The findings presented here provide a snapshot of perspectives on and experiences of cost data collection and usage by staff at the HeadStart partnerships in the fourth year of the six-year HeadStart programme. The degree to which the findings reflect the views of other HeadStart staff members who did not take part in the discussions, or the views of wider stakeholders within the HeadStart local areas, cannot be ascertained here. Likewise, the partnerships' progress around cost data collection and usage since these discussions took place is not captured here.

The discussions with each partnership were not audio recorded. Instead, detailed notes were taken by the national evaluation team during the discussions and then shared with each partnership for their own

The findings from this study speak to the difficulties of imposing a systematic and standardised method for cost data analysis in the context of real-world implementation of a complex, multi-area-level, prevention and early intervention programme like HeadStart. Our findings reflect learning from implementation science research, which highlights the importance of employing approaches to economic evaluation in real-world implementation settings that are both rigorous and pragmatic (Eisman, Kilbourne, Dopp, Saldana, & Eisenberg, 2020). Drawing on the learning presented here, we propose the following key insights for policy and practice:

- To aid decision-making about economic evaluation methodology and scope, it is important to consider the intended audience and use of the evaluation for programme delivery staff, commissioners and policymakers, and evaluators.
- Economic evaluation tools should not be too time-consuming, complex, or burdensome for programme staff to use, and need to be compatible with the structure of the programme.
- Given the strains on capacity that cost data collection and usage can present for programme implementers, additional staff or hours could be costed into local programme budgets from the outset, specifically to facilitate economic evaluation.
- Involving programme implementers in designing and interpreting economic evaluations can help to maximise buy-in, feasibility, understanding, and relevance.
- Economic evaluations of prevention and early intervention programmes need to be able to account for both short- and long-term impact, as programme effects may not become apparent until after the programme delivery period.
- Cost data estimates for outcomes based on robust existing research, and comparisons with existing national datasets, can be used to facilitate cost data analysis in the event of missing or minimal data.





