

The What Works Network

Five Years On

January 2018



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Message of Support

The What Works Network was launched five years ago to embed robust evidence at the heart of policy-making and service delivery. It is now taken for granted that trialling and testing inform medical practice. The What Works Centres that sit at the heart of the Network have begun to bring that same transformative approach to other public sector professions. This initiative remains of the upmost importance as we strive to improve the effectiveness of public services while reducing the deficit.

The findings set out in this report show that significant progress has been made. Services delivered by schools, hospitals, GP practices, residential care homes, and police forces have all been influenced by the findings of the What Works Centres. The UK is now seen as a world leader in the application of evidence in policy and practice and that is largely due to the increasing profile of the What Works Centres.

As this report makes clear, the What Works Centres are the most visible but by no means the only part of the 'What Works' initiative. The Cabinet Office and HM Treasury have championed a programme of activity across government to ensure that knowledge about what works informs key decisions. As a result, the initiative, and the robust empirical methods on which it is based, is now more firmly embedded in the training and development of the policy profession – the backbone of the civil service – than ever before.

But we can go further – and we need to. There are areas of public spending and practice where the evidence base remains weak. We need to empower the public sector to innovate while also ensuring that we undertake robust evaluations so that we know whether changes in practice are delivering results. We have hugely talented public sector leaders, but we can still do more to make the best evidence available to them, and to ensure that the time and money invested in our public services are used to the best possible effect.

Rt Hon David Lidington MP

Minister for the Cabinet Office and Chancellor of the Duchy of Lancaster

Rt Hon Elizabeth Truss MP

Chief Secretary to the Treasury

Foreword

When Archie Cochrane first agitated for the wider use of experiments in medicine, many in the profession argued strongly against him. They saw it as unethical and empirically misguided. Yet Cochrane argued passionately that many widespread practices had never been properly tested, such that clinicians couldn't really know whether they were actually helping or harming their patients.

Even today, the 'parachute' example is sometimes used to argue that it would be wrong to run a test – half the passengers jumping out of the plane with a parachute, and half without, to establish if parachutes are effective.¹ Clearly such a trial would be unethical, and almost certainly uninformative. However, the parachute defence is widely over-used. Policymakers and professionals are far too ready to conclude that existing practice is effective – that they already know 'what works'. In this sense, the first step to more effective policy and practice is not fancy methods, but simple humility. There might be a better way to help this patient to heal, this child to learn, or this business to grow.

It is this humility that lies at the heart of the What Works 'movement', and the institutions and activities that make up the What Works Network. At the request of the Cabinet Secretary and Prime Minister, it has been a great honour to champion this agenda these last five years. Though we still have a long way to go, the What Works approach, and the more robust methods on which it is founded – such as the use of randomised controlled trials (RCTs) and the more systematic analysis of what is working where, and why – is rapidly becoming the new normal. Most gratifyingly, the empiricism that Cochrane fought for so hard in medicine, and that we now take for granted, is now at last spreading to other areas of professional practice. Education is perhaps the most dramatic. Within the space of five years, more than 10,000 studies have been compiled, and more than a hundred large-scale RCTs have been conducted, involving nearly a million children. In so doing, debates that were once dominated by dogma are now driven by evidence. It is a game-changer.

I particularly wish to thank the hard work of the heads of the What Works Centres; the funding bodies, particularly the Economic and Social Research Council, for championing this initiative; the many passionate professionals that have made this agenda their own; the Ministers – especially in the Cabinet Office and Treasury – who have backed it; and the small but dedicated What Works Team in the Cabinet Office that have worked so hard behind the scenes. Special thanks should go to Sir Chris Wormald, Head of the Civil Service Policy Profession and the departmental Policy Profession leads; departmental Heads and Directors of Analysis; and perhaps most excitingly of all, the talented people across the public sector who are changing how they learn and what they do.

'What works?' is a disarmingly simple question. Answering it is improving services and the lives of millions day in, day out.

Dr David Halpern
What Works National Adviser

¹ Smith, G.C.S. and Pell, J.P. (2003) "Parachute use to prevent death and major trauma related to gravitational challenge: systematic review of randomised controlled trials", *BMJ*, 327(7429): 1459-1461

1. Introduction

The What Works Network was launched in 2013 with one simple aim: to ensure that spending and practice in public services is informed by the best available evidence.

The Network now consists of 10 independent What Works Centres. These centres have pioneered new ways of increasing the supply of evidence in areas such as policing, education, local economic growth, and health and social care. Collectively, they have helped transform our understanding of the effectiveness of widely used but until now poorly evidenced practices. For instance, we now know that reducing class sizes can improve pupil attainment – but only when numbers tend to drop below around 20. And we now know that most ear infections and cases of sinusitis are best treated with pain relief, despite antibiotics being routinely prescribed.

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independent What Works Centres

This report shares a selection of key findings from the What Works Network, as well as examples of the impact that the centres have had on public services over the past five years. It also brings together – for the first time – some of the activities carried out by the What Works National Adviser and

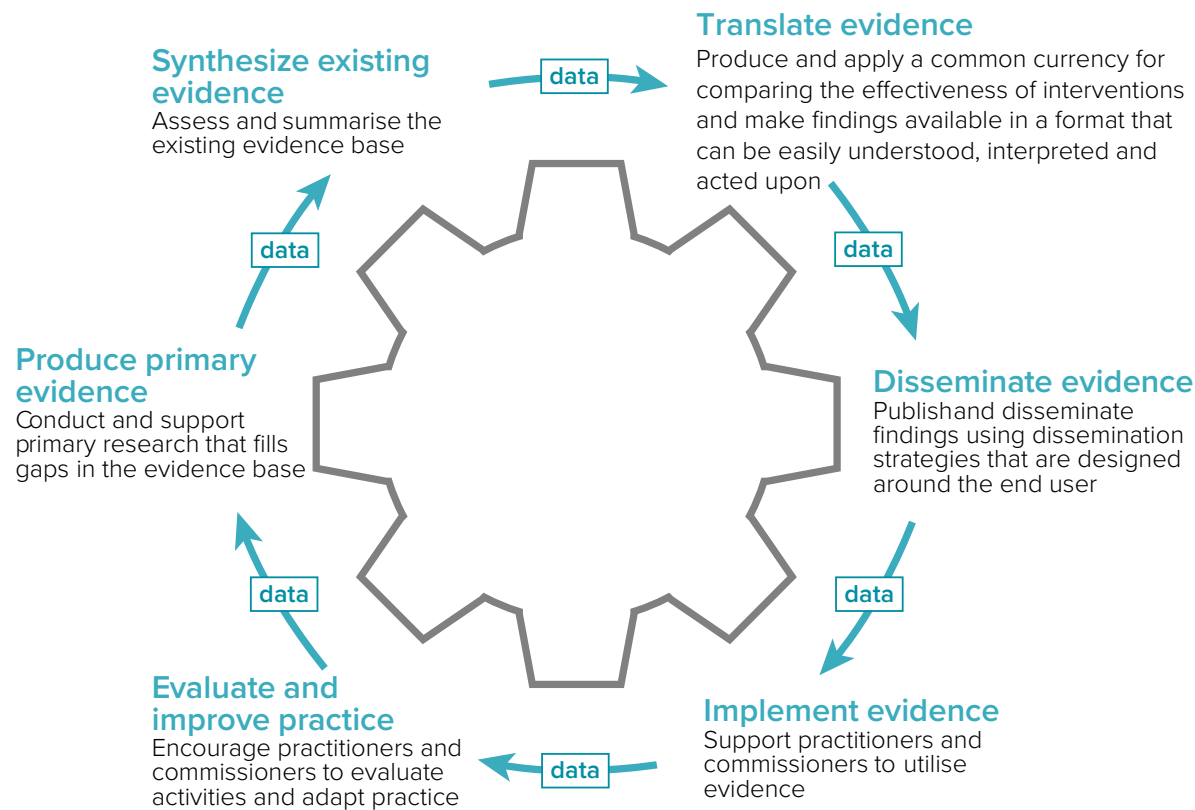
What Works Team in the Cabinet Office, who support the Network and champion the use of evidence in policymaking.

It is our hope that policy professionals, practitioners, and commissioners will increasingly draw on outputs from the centres. And it is our hope, too, that by robustly evaluating the impact of their own policies and practices these decision-makers will further enrich the evidence base on what works.

How the What Works Centres operate

Each What Works Centre operates in its own distinct way, with different areas of focus and levels of funding, but each is committed to generating evidence, translating that evidence into relevant and actionable guidance, and helping decision-makers act on that guidance (see Figure 1.1).

Figure 1.1: What Works Centres' areas of activity



Filling gaps in the evidence base

Public service professionals and decision makers now have greater access than ever before to information on what works. Collectively, the centres have produced more than 280 evidence reviews in the last five years and commissioned or supported over 160 trials.

288
evidence reviews produced or commissioned by the Centres

This information is already transforming public services. For example:

- Over 22,000 frontline police officers across London are being issued with body-worn cameras after a trial led by the College of Policing showed cameras reduced allegations against the police by 33% and resulted in an increase in the amount of video evidence available to prosecute violent crime.
- Local authorities such as Barnet and Devon and Cornwall have reconsidered

Note: Adapted from The Digital and Trustworthy Evidence Ecosystem produced by MAGIC, 2016

their approach to business support after the What Works Centre for Local Economic Growth showed the efficacy of more hands-on programmes for some types of firms.

- Schools are unlocking the potential of their teaching assistants (TAs) – a workforce of some 380,000 people – after Education Endowment Foundation (EEF) trials demonstrated that TAs have a far greater impact on student attainment when they are trained to deliver structured small-group interventions in subjects such as English and maths. These interventions are now being rolled out in over 900 schools, with many more receiving guidance and training.

Greater reach

The What Works Centres have developed new approaches to translating evidence into user-friendly formats and disseminating their findings to diverse audiences. Innovative evidence comparison toolkits allow decision makers to compare interventions and programmes on the basis of impact, cost,

and strength of evidence. Almost two-thirds of school leaders now use the EEF's toolkit to guide how they spend the Pupil Premium supplements they receive to support disadvantaged children.

Practical guidance, which breaks down key information into easy, actionable steps, has been rolled out to specific workforces. The Early Intervention Foundation (EIF), for example, has produced guidance on 23 parenting interventions that have been shown to work for vulnerable families with complex needs. The Ministry of Housing, Communities and Local Government is now distributing this guidance to the 141 local commissioners around the country delivering the Government's Troubled Families Programme.

Social media platforms are also allowing the What Works Centres to reach new target audiences. Guidance aimed at the public, such as recent findings from the National

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local authority
Troubled Families
teams receiving EIF
guidance

Institute for Health and Care Excellence (NICE) on combating antimicrobial resistance and the spread of infections, has been shared with thousands of teenagers and young people through interactive campaigns on Snapchat and Instagram.

An expanding Network

The initiative continues to expand into new policy areas. Most recently the What Works Centre for Children's Social Care was launched, which will help social workers make evidence-informed decisions on how to improve the life chances of children in the care system.

Likewise since 2012, NICE's scope has broadened to include not just healthcare but also social care. It has already become a trusted source of advice, with some local authorities incorporating emerging NICE guidance into contract specifications for adult residential and domiciliary care.

Increasing traction in the Civil Service

The What Works initiative has gained increasing traction in the Civil Service. The Cabinet Office's What Works Team operates across government to share findings from the What Works Centres and support civil servants in using high-quality methods to test whether programmes and services are delivering results. The use of randomised controlled trials (RCTs) and related methods are now being taught to civil servants through the Future Leaders Scheme, graduate Fast Stream inductions, and Policy Profession courses. Two years ago the What Works Team set up the Trial Advice Panel to offer policy teams guidance and technical support. Eighteen departments and agencies have now made use of the Panel.

The EEF has funded over **10%** of all robust education trials in the world

International attention

The What Works initiative is attracting increasing international attention. Other countries have long used NICE's insights to guide practice within their own healthcare systems. But the profile of other centres is rising rapidly too. The EEF, though only established in 2011, is already estimated to be responsible for more than 10 per cent of all education RCTs in the world to date. The EEF is now working with partners across Australia, Europe, Latin America, and South-east Asia to inform decisions on classroom practices.

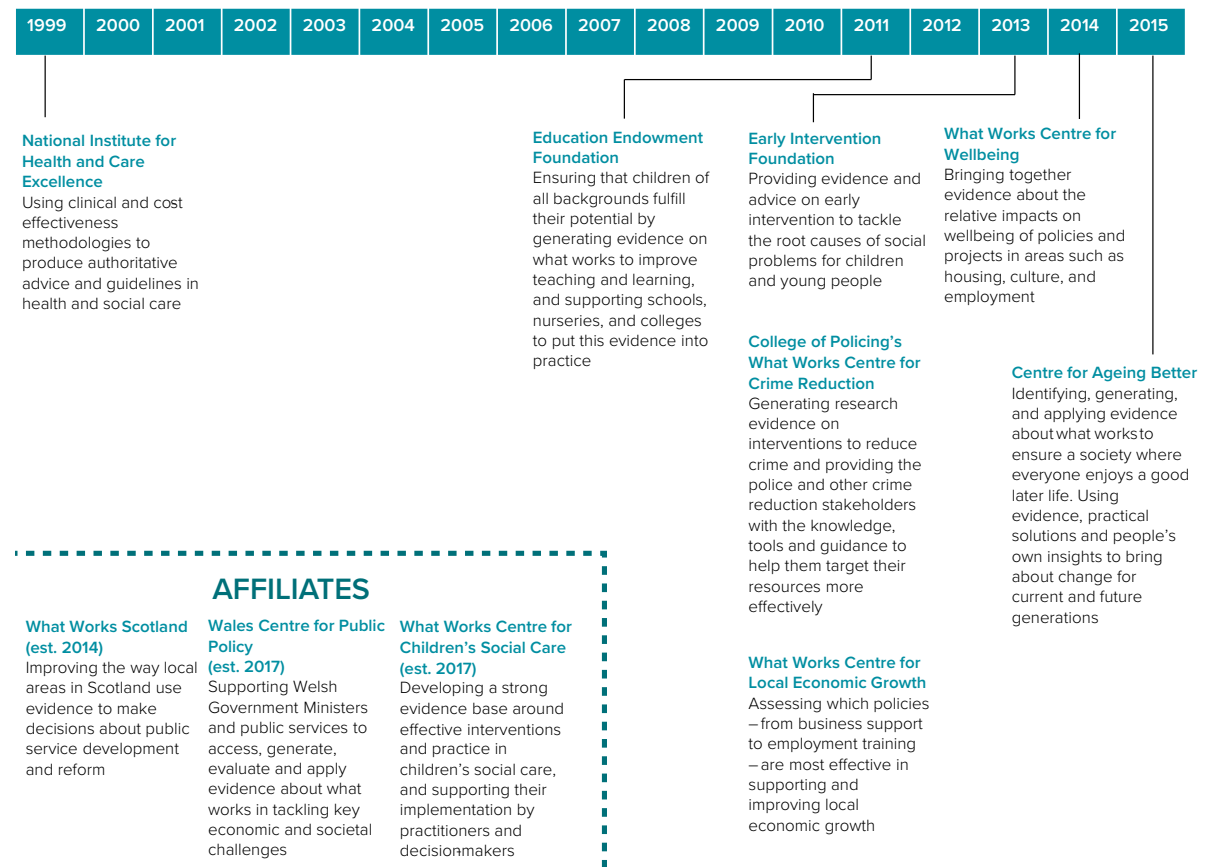
The EEF's International Partnerships Programme is also supporting large-scale trials overseas and helping other countries develop versions of the EEF Teaching and Learning Toolkit that include research from their own localities. This work is accelerating the generation of new knowledge for the benefit of UK schools, and indeed children across the world.



2. The What Works Network

The What Works Network is made up of 10 independent What Works Centres – seven full members and three affiliates (see Figure 2.1). Loosely based on the model of the National Institute for Health and Care Excellence, founded in 1999, the What Works Centres are dedicated to helping put robust evidence at the heart of local and national spending decisions.

Figure 2.1: The growth of the What Works Network



AFFILIATES

What Works Scotland (est. 2014)
Improving the way local areas in Scotland use evidence to make decisions about public service development and reform

Wales Centre for Public Policy (est. 2017)
Supporting Welsh Government Ministers and public services to access, generate, evaluate and apply evidence about what works in tackling key economic and societal challenges

What Works Centre for Children's Social Care (est. 2017)
Developing a strong evidence base around effective interventions and practice in children's social care, and supporting their implementation by practitioners and decisionmakers

What Works Centre for Local Economic Growth
Assessing which policies – from business support to employment training – are most effective in supporting and improving local economic growth

3. Generating Evidence

The generation and collation of evidence sit at the heart of the What Works initiative. The What Works Centres systematically assess and synthesise the evidence base in their field of expertise and issue guidance to decision makers – be they ministers, policy teams, or frontline workers. Where evidence is weak or unavailable, they seek to fill such gaps by commissioning new research or encouraging other organisations to do so.

This work is complemented by the programme of activity led by the What Works Team in the Cabinet Office, which encourages departments to use high quality methods to test whether programmes and services are delivering results. Key partners in this programme of work include HM Treasury, the Government Office of Science, and the Cabinet Office's Implementation Unit and Economic and Domestic Affairs Secretariat.

Assessing the existing evidence base

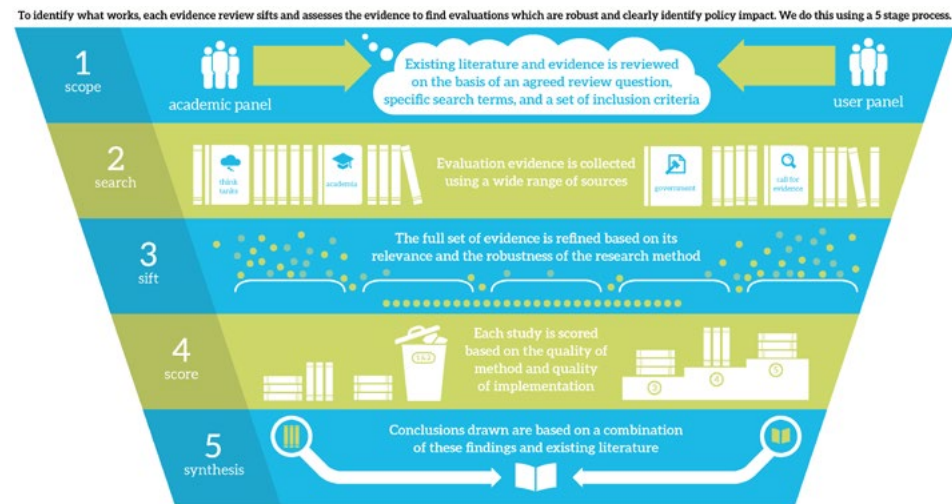
Practitioners and policymakers are often inundated with information about interventions and programmes that are claimed to work. One of the core functions of the What Works Centres is to help practitioners reach judgements by producing assessments of the existing evidence in their field of expertise. The centres produce both rapid evidence reviews and comprehensive systematic reviews of the global evidence base on particular programmes and interventions (see Box 3.1).



BOX 3.1: Systematic reviews of the evidence base

The What Works Centres have developed their own methodologies for conducting systematic reviews but all broadly follow the five-stage process set out in Figure 3.1. The reviews are conducted using a set of evidence standards. These privilege evaluations that are methodologically more robust.

Figure 3.1: Evidence review process



Source: What Works Centre for Local Economic Growth, 2014, http://www.whatworksgrowth.org/public/files/Methodology/14-03-20_About_our_Reviews.pdf

The process itself sheds light on the strength of the existing evidence base. For example, a review of asset-focused approaches to tackling organised crime commissioned by the College of Policing found none of the 310 studies on the topic involved even the most basic impact evaluation. Similarly, of the 3,643 studies on adult learning identified by the What Works Centre for Wellbeing, only 25 met the required standards for inclusion in the final assessment.

Between them the centres have commissioned or produced 288 evidence reviews in the past five years, 48 of them systematic reviews.

The centres' findings show that assessments about what works are not always clear-cut. Interventions will sometimes work for some groups of recipients and not others. They might also work better in some places than others. Many interventions will also generate unintended consequences. But by putting a balanced overview of the evidence base in the hands of policy professionals and practitioners, these syntheses are a valuable resource in decision-making (see Table 3.1).

48
systematic reviews
produced or
commissioned by
the What Works
Centres

Table 3.1: Key findings from systematic evidence reviews

CRIME REDUCTION	<ul style="list-style-type: none"> • Universal screening for domestic violence and abuse in healthcare settings has been shown to be effective in identifying domestic violence and abuse victims. Women who are screened are found to be almost three times as likely to mention their experience of domestic violence or abuse compared to those who are not screened. • Alley gates – lockable gates installed to prevent access by offenders to alleyways – reduce burglary rates without crime being displaced to surrounding areas.
EARLY YEARS	<ul style="list-style-type: none"> • The quality of a child’s home learning environment – including the amount of verbal stimulation they receive and their exposure to activities such as parent-child reading – is a key factor in the development of crucial early language skills. • Problematic child behaviours can be identified from the age of three. There are a variety of low-cost and effective parenting programmes, which can make a significant difference. The Incredible Years programme, for example, encourages positive child-parent interactions by setting goals, problem-solving exercises, and group discussions of mediated video vignettes. The programme has long-term positive effects on children’s mental wellbeing, social interactions and reading skills. • Starting early years education at a younger age has a positive impact on learning outcomes. Children who are enrolled in nursery, pre-school or similar settings before the age of three enter primary school having made more progress in areas such as reading compared to those who start a year later. • Improvements to the built environment in nursery and pre-school settings do not appear to have any effect on learning, providing basic building standards are met.

Table 3.1: Key findings from systematic evidence reviews

EDUCATION	<ul style="list-style-type: none"> • Smaller class sizes can improve attainment (equivalent to around 3 months of progress over the course of a year) but only if the reduction is large enough to result in a change in teacher practice, which appears to occur when pupil numbers drop below around 20. • The use of phonics – an approach to teaching reading that helps children connect sound patterns to written spelling patterns – is highly effective with younger children, resulting in an average of four additional months’ progress. Older children who are still struggling to read are more likely to benefit from other approaches such as reading comprehension strategies. • Setting or streaming pupils on the basis of ability for specific subjects is detrimental to the learning of low attaining pupils. On average, they make 1-2 months less progress per year than similar students in mixed-ability groups. • In the majority of cases, repeating a school year is harmful to a child’s chances of academic success, with students on average making four months less progress than pupils who move on. Students are unlikely to catch up with their peers, even after an additional year of schooling. The negative effects are greater for students from disadvantaged backgrounds, suggesting the practice exacerbates inequality.
HEALTH, AGEING, AND WELLBEING	<ul style="list-style-type: none"> • Antibiotics should not be prescribed routinely for acute sinusitis, which is usually viral. Less than 2.5% of acute viral sinusitis becomes complicated by a bacterial infection. However, 91 per cent of patients visiting GPs with symptoms of sinusitis are prescribed antibiotics. • Prompt treatment for adults with a first episode of psychosis reduces rates of hospital admission and relapse. • Minor home adaptations, such as installing handrails, are effective at preventing falls and injuries and supporting independent living. These measures are even more effective when combined with necessary repairs and home improvements, such as better lighting and removing trip and fall hazards. • Wellbeing is higher for people who gradually transition into retirement through reduced hours or by taking a part-time or ‘bridging’ job. • National Health Service Trusts that make the most extensive use of good people management practices are over three times more likely to have the lowest rates of staff sickness absence, over twice as likely to have the highest levels of job satisfaction, and at least four times more likely to have the most satisfied patients when compared to Trusts that make the least use of these practices.
LOCAL ECONOMIC GROWTH	<ul style="list-style-type: none"> • When a single area is faced with major job losses, re-training post employment appears to have a more positive effect on employment rates and earnings than traditional outplacement services provided before the workers leave their existing jobs (these services might include counselling, education and training, and re-employment support). • Increases in trade and tourism from hosting sporting events tend to be very short lived. However, there generally is a positive effect on house prices close to new facilities as well as a small impact on wages in the immediate locality. • Extending broadband to an area can positively affect local productivity and wages, but the effects are bigger for urban areas and may depend on complementary investment by firms.

Filling gaps in the evidence base

In areas where the evidence base is weak, the What Works Network has taken action both by bringing these gaps to the attention of research funding bodies and by directly commissioning and supporting research.

a. Publicising gaps in the evidence base

Some What Works Centres have developed indirect models of evidence generation. NICE, for example, publishes 'Research Recommendations' as part of its evidence review process. This is intended to help funding bodies identify gaps in the evidence base that would benefit most from additional research. Organisations such as the National Institute for Health Research routinely issue themed calls for research proposals in response to NICE's recommendations. In the area of medical technologies, NICE has a specific programme to facilitate to the production of new research (see Box 3.2). The What Works Centre for Wellbeing similarly issues notifications on research gaps.

BOX 3.2: The impact of NICE Research Recommendations

NICE run a Medical Technologies Evaluation Programme that encourages the generation of evidence on the health benefits and costs of promising medical technologies. When Research Recommendations about medical technologies are made, NICE will ask independent external assessment centres to examine the feasibility of new research. If feasible, the centres can generate protocols for testing and facilitate primary clinical research with the potential to input into future NICE guidance. Companies are strongly encouraged to collaborate with the external assessment centres, and support the trials financially or in kind.

This model has led to **27 research studies in the last 6 years**, including trials on:

- ReCell: a treatment to facilitate healing from burns that involves collecting and spraying a patient's own healthy skin cells on to an area of damaged skin.
- MIST Therapy: a system for promoting healing in acute, "hard to heal" wounds by delivering low-energy, low-intensity ultrasound to the wound via a continuous saline mist.
- Parafricta: a range of low-friction medical garments to reduce the risk of pressure ulcers.

Similarly the What Works Team in the Cabinet Office has supported a project led by the Government Office for Science to encourage departments to publish Areas of Research Interest (ARI). These statements set out evidence gaps that are a priority for government departments. They help academics identify where their research can have direct impact on policy, and are now feeding into the investment plans of UK Research Councils.

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departments and public bodies have published ARIs

“‘What Works’ is a quietly radical agenda that is materially increasing the supply of evidence available to decision-makers. I am delighted to see that the public sector is embracing it.”

Sir Jeremy Heywood, Cabinet Secretary and Head of the Civil Service

b. Directly commissioning research

Some of the What Works Centres have invested in primary research to address weaknesses in the existing evidence base.

The Education Endowment Foundation (EEF) has by far the biggest programme. Parents dropping their children off at the school gate can now be assured that there's a much stronger evidence base to support their children's education.

More than one third of all schools in England (a staggering 10,000 in all) have participated in the 158 projects funded by the EEF (132 of them randomised controlled trials). As a result, the EEF has more than doubled the amount of evidence we have from experimental trials in education in this country (see Table 3.2).

Crucially, the EEF, like the other What Works Centres, is committed to publishing the findings of all trials regardless of whether

1 in 3

English schools
have participated
in EEF trials

Table 3.2: Key findings from recent EEF-funded trials

Breakfast clubs that provide primary school children with a free and nutritious meal at the beginning of the day can boost pupils' reading, writing and maths scores by the equivalent of two months' progress over the course of a year.

Texting parents about the dates of upcoming tests and homework deadlines leads to an additional month's progress in maths as well as reduced absenteeism.

Thinking, Doing, Talking Science – a programme that makes primary school science lessons more challenging, practical, and interactive – has resulted in pupils making an average of three additional months of progress. The programme appears to have a particularly positive effect on girls.

Accelerated Reader – an internet-based programme that encourages children to read for pleasure – resulted in an average of three additional months progress in reading age after 22 weeks. The web-based software assesses students' reading abilities and interests, matches them with specific books, and offers follow-up quizzes and points for each book they have read.

they show an intervention to be effective or not.

It is important to understand whether interventions have a positive impact at a small-scale before they are fully rolled out. Equally, finding out that a commonly used practice is ineffective helps decision-makers identify where resources can be saved. Some recent EEF trials that had no impact on academic attainment are listed in Table 3.3.

Table 3.3: EEF-funded trials showing no impact on pupil attainment

Teacher observation: An RCT involving 14,100 pupils in 82 secondary schools showed that asking teachers to undertake more frequent and structured lesson observations – where they observe colleagues and give them feedback – made no difference to pupil attainment.

A **paired reading scheme** – where an older child listens to a younger pupil read and corrects errors, discusses comprehension-based questions, and records feedback – was found to have no overall impact on the reading or comprehension skills of participating students.

The use of **electronic handheld devices** – where pupils can respond instantaneously to a teacher's question or work through problems and receive immediate feedback during lessons – was shown to have no impact on attainment in an RCT involving 6,500 primary school pupils.

Other centres are now investing more in primary research. The College of Policing has undertaken and funded trials on stop-and-search practices, interventions to reduce domestic violence, crime prevention communication strategies, and the use of body-worn video cameras by police officers (see Box 3.3).

“The research that the EEF does helps us make really effective decisions about what to focus on in schools. It is great to have independent, robust research to consider when you are thinking about adopting a new approach.”

Megan Dixon, Aspire Educational Trust

Box 3.3: The impact of police officers using body-worn cameras

The College of Policing led the world's largest RCT of body-worn cameras by police between May 2014 and April 2015. Involving 2,060 police officers working in Emergency Response Teams across ten London boroughs, results showed:

- Body cameras **reduced allegations against police officers by 33%**.
- When allegations against officers were broken down by type, the **greatest difference was found in relation to allegations of oppressive behaviour**, which were 2.5 times higher in the control group.
- **More video evidence available** to support the prosecution of violent crime cases (28% in the treatment group compared to just 0.2% in the control group). The trial's timelines were too short to assess the impact on conviction rates, although this data is being captured and findings will be published in 2018.
- Cameras had **no effect on rates of stop and search or police safety**.

The results informed the decision to issue body cameras to 22,000 frontline officers across London's Metropolitan Police Service.

c. Strengthening research and evaluation capability

The What Works Network is also focused on building the capacity of local and national policymakers, commissioners, and practitioners to generate high quality evidence. Governments are often adapting policy, or trying to find new solutions. Rather than jumping straight to adoption, it is better to run a robust trial first, or to build into operational practice a 'test, learn, adapt' approach.

Since 2015, the Cabinet Office What Works Team has run a Trial Advice Panel (TAP) to help civil servants design and implement high quality trials.

Made up of around 50 trialling experts from across government and academia, it offers technical support and champions the use of experimental and

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departments and public bodies have made use of the Trial Advice Panel

quasi-experimental methods as the best way to find out which policies and interventions work, for whom, and in what context.

In the past two years TAP has supported projects across 18 departments and public bodies.

“The Trial Advice Panel allows the Civil Service to pool its collective expertise while also providing technical support from experienced academic experts. It has proven to be an invaluable resource for my department.”

Stephen Aldridge, Director for Analysis and Data, Ministry of Housing, Communities and Local Government

Box 3.4: Examples of projects supported by the Trial Advice Panel

Tax: A large-scale RCT run by HMRC that tested different versions of email and SMS messages designed to increase on-time filing and payment by self-assessment customers.

End-of-life care: A small-scale RCT commissioned by the Cabinet Office’s Centre for Social Action that looked at the impact of community-based befriending services on the quality of life of people receiving end-of-life care.

Transport: A large-scale RCT run by the Department for Transport to test a range of communication-based behavioural interventions designed to encourage learner drivers to spend more time practising before taking a driving test.

The What Works Team also trains civil servants in the methods available to test whether policies and practices are delivering results. As well as delivering sessions to new graduate Fast Stream recruits and developing online materials for policy professionals, the team has worked with 390 civil servants participating in the Civil Service-wide Future Leaders Scheme (FLS) over the past year. The 2017/18

FLS cohort have been divided into 68 ‘experiment groups’ and given support to design their own trials.

Some of the What Works Centres provide research and evaluation support to national and local policymakers and practitioners. The What Works Centre for Wellbeing runs an annual course for approximately 150 civil servants on how to incorporate wellbeing into policy analysis and has developed a micro-site to help charities evaluate whether their activities affect the wellbeing of the people they support.

The EEF is providing advice and support to the Department for Education on the evaluation of their £75 million Teaching and Leadership Innovation Fund and £280 million Strategic Improvement Fund. As well as advising on the overall evaluation framework, the EEF has run a series of 20 road-shows up and down the country to promote evidence-informed bids. They are now exploring supporting the evaluations of high-value projects funded through these initiatives.

Similarly the College of Policing (CoP) ensured that effective evaluation was one of the criteria used to identify recipients of the Home Office’s £50 million Innovation Fund. This requirement has been carried over to the £175 million Police Transformation Fund.

390

civil servants have designed trials as part of the 2017/18 Future Leaders Scheme

Looking ahead

Over the next 12 months, new evidence reviews will be available on topics such as strength and balance activities for older people (Centre for Ageing Better), housing interventions and the wellbeing of vulnerable adults (What Works Centre for Wellbeing), parental engagement in children's learning (EEF), teaching practices in early years settings (Early Intervention Foundation), red light enforcement cameras for traffic violations (CoP), and career progression support in low paid sectors (Wales Centre for Public Policy).

There will be research trials commencing, continuing, or concluding on interventions such as:

- STEM-related work experience; inquiry-based science; teaching programming in primary schools; optimising the content of PE lessons for brain function; and best practice in both setting and mixed ability teaching (EEF)
- The use of incubators – that is, business support programmes that provide packages of support to help start-ups; and employment support pilots as part of the devolution deals with city regions (What Works Centre for Local Economic Growth)
- A domestic violence risk assessment tool for use by police (CoP)
- Building children's essential life skills – such as self-awareness and self-control – which provide the foundation for a range of longer-term education, wellbeing and employment outcomes (EIF in partnership with the EEF and the Behavioural Insights Team)

Some of the What Works Centres such as Local Economic Growth and NICE are also looking to collaborate with public sector partners and make greater use of administrative data. New data science techniques are enabling insights on what works to be captured from the huge volumes of data gathered by public services.

4. Translation

Generating and collating evidence is of no use if it is inaccessible to the people who need it. This is arguably the central role played by the What Works Centres – as ‘bridge’ institutions between the producers of evidence (often, but not always, in academic institutions), and the consumers of evidence (public service commissioners and professionals).

Over the last five years the What Works Centres have shown that highly technical and complex research findings can be presented to practitioners, commissioners, and policymakers in user-friendly formats.

Evidence comparison toolkits

Five of the What Works Centres have created toolkits that provide easily digestible summaries of the existing evidence base. These pioneering resources allow decision makers and professionals to sort interventions and programmes on the basis of impact, cost, and strength of evidence. The centres use common measures internally to enable comparison between different types of intervention (see Box 4.1).

These toolkits are dynamic resources that reflect the centres’ current understanding of the existing evidence base and are continually updated as new research is published.

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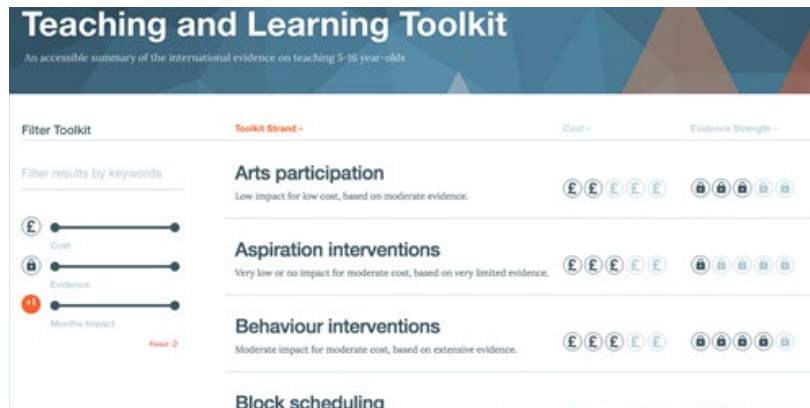
What Works Centres have evidence comparison toolkits



BOX 4.1: Examples of toolkits

In 2011, the Education Endowment Foundation became the first What Works Centre to launch a toolkit in partnership with Durham University and the Sutton Trust. Its Teaching and Learning Toolkit provides a succinct summary of the international evidence on 34 types of teaching interventions – from homework to extending school opening hours. The toolkit is interactive and allows users to access information on how and where interventions work best. The toolkit has received over 170,000 unique visitors in the past year.

Figure 4.1 EEF Teaching and Learning Toolkit



Source: <https://educationendowmentfoundation.org.uk/evidence-summaries/teaching-learning-toolkit/>

Other What Works Centres – the CoP, the Early Intervention Foundation, the What Works Centre for Local Economic Growth, and the What Works Centre for Wellbeing – have developed their own toolkits. For example, the CoP’s Crime Reduction Toolkit, which won a European Public Service Award in 2017, rates 52 types of intervention according to impact and cost. This toolkit is also innovative in that it provides flags to aid the transfer of interventions to different contexts: how and where it works, and how to implement it (see Figure 4.2). Launched in 2015, the online toolkit now receives just over 2,000 visitors a month.

Figure 4.2 College of Policing’s Crime Reduction Toolkit



Source: <http://whatworks.college.police.uk/toolkit/Pages/Toolkit.aspx>

“During our December 2016 drink drive campaign ... I used the Crime Reduction Toolkit to find out about the effectiveness of drink driving interventions such as mass media campaigns and increased patrols to reduce drink driving. The toolkit enabled us to check our deployment of specialist resources and our media campaign to maximise the effect of both education and enforcement.”

Inspector Peter Thomas, Roads Policing Team, Devon and Cornwall Police

Commissioners are beginning to use these resources to make investment decisions. A survey of schools by the National Audit Office, for example, found that close to two-thirds

of school leaders are using the EEF Teaching and Learning Toolkit to inform decisions about Pupil Premium spending.² Meanwhile versions of the toolkit now exist in multiple languages to support school systems in Latin America, Australia, Europe and South-east Asia.

Advice and guidelines

The What Works Centres recognise that commissioners and frontline workers have limited time to engage with evidence reviews and lengthy guidance documents. So they are increasingly translating their assessments on existing evidence into advice and guidelines on best practice.

NICE has a long-established reputation for producing authoritative guidelines on the basis

64%

of school leaders use the EEF Teaching and Learning Toolkit

of clinical studies and evidence reviews. In the last two years alone NICE produced guidelines on over 60 clinical, public health and social care topics including back pain, oral health for adults

in care homes, and identifying and responding to child abuse and neglect. Other centres are now following suit, some with assistance from NICE.

The EEF has produced guidance for teachers on topics such as improving literacy, teaching maths skills, and making the best use of teaching assistants. The What Works Centre for Wellbeing has published guidance for employers on investing in employee wellbeing. Meanwhile the EIF has translated its evidence reviews on topics such as parenting interventions into guidance for social workers and local commissioners delivering the government's Troubled Families Programme.

61

sets of guidelines produced by NICE over the past two years

² National Audit Office (2015) Funding for disadvantaged pupils. London, <https://www.nao.org.uk/wp-content/uploads/2015/06/Funding-for-disadvantaged-pupils.pdf>, p.9

The CoP will shortly be publishing guidance for officers on effective neighbourhood policing and what works to improve the accuracy of initial accounts given by witnesses.

This guidance is increasingly being shared with specific workforces in the form of short, practical manuals that break down key information into easy, actionable steps (see Box 4.2).

Box 4.2: Examples of practical guides

NICE has joined forces with the Social Care Institute for Excellence to produce a series of Quick Guides on social care, for social care practitioners such as care home managers. The production and dissemination of these guides have become a high priority for NICE. A recent NICE survey of social care practitioners found that just over one third struggled with the ‘medical-orientated rather than people-centred language’ of NICE guidelines, while 55% identified Quick Guides as the most useful products to use in conjunction with the guidelines.

Figure 4.3: Extract from NICE’s Quick Guide on oral health for adults in care homes



Source: https://www.nice.org.uk/Media/Default/Oral_health_quick_guide/Oral_health_a_quick_guide_for_care_home_managers.pdf

Digital media

The What Works Network is increasingly taking advantage of digital media to communicate evidence on what works.

Twitter has become the most popular social media platform, with members of the Network having a combined following of over

The What Works Network has a combined Twitter following of over

226,000

226,000. However, different social media platforms are allowing the What Works Centres to reach different target audiences.

For example, when NICE published guidelines in January 2017 aimed at educating the general public on the actions they can take to help combat antimicrobial resistance, the NICE media team ran interactive campaigns on Snapchat (which is popular with teenagers) and Instagram (to reach 25-34 year olds).

Social media also offers an opportunity to actively engage practitioners. The NICE

media team operates on a shift basis so they can swiftly respond to social media enquiries about guidelines from healthcare practitioners. This active engagement strategy, adopted in April 2016, has seen an 18% increase in Twitter followers in 2016/17 compared with the previous year, with interactions up almost three-fold.

The centres also engage with practitioners through a range of other forms of digital media. The What Works Centre for Wellbeing run an

Expert Network of over 400 professionals from a range of sectors that engage with wellbeing research through an online forum. Similarly the CoP has 20,000 members that receive targeted communications through a secure online Members' Hub.

NICE offers healthcare practitioners a monthly 'Update for primary care' bulletin (with over 12,400 subscribers) and an instant

20,000
members of the police community receive What Works updates via the CoP Members' Hub

alert service that sends out notifications when new guidelines are published (over 2,400 subscribers), and helped produce an app that shares prescribing information on the most widely-used medicines in the UK (40,417 users as of October 2017). Data analytics shows that users of these more targeted communications are far more likely to open links to guidance documents than people reaching the NICE website through social media or search engines.

Outreach programmes

Decision-makers and practitioners are unlikely to seek out findings from the centres if they do not know about them. Many centres have developed outreach programmes as a result.

In 2016, for example, the EIF launched a roadshow communicating the evidence from Foundations for Life – an assessment of the effectiveness of 75 early intervention

74%
of top-tier local authorities participated in the EIF's Foundations for Life road show

programmes targeted at improving parent-child interactions. Earlier work by the EIF had shown that many local authorities at the time were not investing in the early years interventions that actually had a track record of improving outcomes.

The EIF's dissemination strategy included a major conference and five regional Evidence Seminars involving nearly 500 commissioners and practitioners from three quarters of the top-tier local authorities. An independent evaluation showed that 4-6 months later, 74% of participants reported having sought out further research and information on parent-child interaction programmes and 65% reported making use of EIF-generated evidence.

Other initiatives include NICE's network of field teams around the country that raise the profile of guidance and support implementation activities, and the EEF's campaign to make better use of teaching assistants, which offered training events, coaching, and consultancy to the 1,049 primary schools in South and West Yorkshire in 2016.

Looking ahead

The What Works Network will continue to develop a range of approaches to translating evidence and sharing findings with key audiences. Over the next 12 months the What Works Centres will undertake more user research and use website analytics to update their publication platforms, adapt content, and develop new products.

The Network will also have a better understanding of the effectiveness of outreach activities as more centres commission impact evaluations of the campaigns and events they run. In late 2018, for example, the EEF will publish the impact evaluation of its teaching assistant campaign in both Yorkshire and Lincolnshire.

5. Adoption

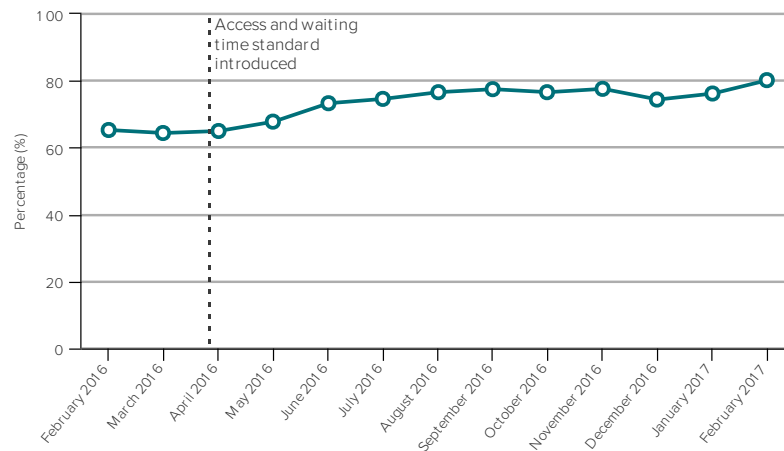
If the What Works initiative is to have lasting impact, the interventions and programmes that are shown to work need to be widely adopted. The Network is committed to helping commissioners and practitioners put evidence into action.

Over the past five years, we have seen plenty of examples of findings and recommendations influencing national policy decisions (see Box 5.1).

Box 5.1: Examples of national policy decisions informed by the What Works Network

- **Family support:** The EIF's review of the impact on children of unresolved conflict between parents is informing a new programme launched by the Department for Work and Pensions. This will see £30 million invested in evidence-based interventions designed to resolve parent conflict in families with the most disadvantaged children.
- **Child care:** The Wales Centre for Public Policy's evidence review on the impact of free child care on maternal employment and poverty reduction informed the development of the Welsh Government's subsidised child care offer and pilots to test accessible and sustainable models in six Welsh local authority areas.
- **Mental health:** In April 2016, NHS England introduced a new access and waiting time standard, which requires that more than half of adults with a first episode of psychosis begin treatment within two weeks of referral. This followed guidance from NICE that early intervention reduces rates of hospital admission and relapse. Within a year, the percentage of people receiving treatment within this timeframe rose from 64% to 80% (see Figure 5.1).

Figure 5.1: The percentage of patients who started treatment for early intervention in psychosis within two weeks of referral, February 2016 to February 2017



Source: <https://www.nice.org.uk/Media/Default/About/what-we-do/Into-practice/measuring-uptake/nice-guidance-and-current-practice-report-mental-health.pdf>

- **Health:** Under new arrangements for the Cancer Drugs Fund introduced in 2016, certain treatments that receive a draft positive NICE recommendation are immediately eligible for funding as agreed by NHS England.
- **Education:** The Department for Education launched a new Opportunity Area programme in 2017 that aims to raise education standards and improve life chances in communities with poor social mobility. The EEF has been brought in to support schools in these areas to make best use of evidence.

But fostering the adoption of evidence is not easy. Public service delivery systems are incredibly complex – many services are devolved to the local level and frontline professionals have considerable discretion over changes to working practices.³

Simply making research findings available is not enough. We know from a recent RCT supported by the EEF that basic communication strategies on their own – such as disseminating practice guides and offering webinars and workshops – do not increase the likelihood of evidence-informed practices being used in the classroom.⁴ The trial helped demonstrate that if we want people to make use of evidence, they need the right opportunities, incentives and skills to do so.⁵ As we set out below, the What Works Network is responding with a range of innovative approaches designed to meet these requirements.

³ The Behavioural Insights Team (2017) Update Report 2016-17, London, <http://www.behaviouralinsights.co.uk/publications/the-behavioural-insights-team-update-report-2016-17/>, p.11

⁴ Sharples, J. (2017) 'Untangling the "Literary Octopus" – three crucial lessons from the latest EEF evaluation', EEF Blog, <https://educationendowmentfoundation.org.uk/news/untangling-the-literary-octopus/>

⁵ Ibid. See also Langer, L., Tripney, J. and Gough, D. (2016) The Science of Using Science. London. University College London, <https://eppi.ioe.ac.uk/cms/Portals/0/PDF%20reviews%20and%20summaries/Science%202016%20Langer%20report.pdf?ver=2016-04-18-142701-867>

Creating opportunities to engage with evidence

a. Funding large-scale trials

Generating strong evidence through small-scale trials will only have a lasting impact if practice changes as a result. The EEF is devoting increasing resources to ensuring that the small-scale trials it has funded which showed positive results are replicated at a much bigger scale.

Twelve trials – that initially involved a total of 430 schools – have been awarded new grants and are now being rolled out to a further 1,890 schools. This is directly extending the reach of effective interventions and programmes across English Schools, with a four-fold increase in the number of children involved in the new larger-scale trials. This initiative also allows the EEF to understand whether good results achieved in an initial trial can be replicated on a larger scale.

b. Strategic partnerships

It can take many years for new evidence on what works to become widely adopted. Many

The EEF are scaling up **12 promising projects** to reach over **100,00 pupils** in nearly **1,900 schools**



That is over **4 times** as many pupils as their original trials

What Works Centres have sought to accelerate this process through sustained engagement with individuals, organisations, or specific local areas that can then champion the better use of evidence and share learning. Some key initiatives are set out in Table 5.1 below.

Table 5.1: Examples of strategic partnerships

Early Intervention Police Academy: Since 2015, the EIF, with support from the CoP, has brought together 24 senior police officers from around the country for a series of expert-led master classes supplemented by participant working groups. The academy is intended to help participants develop practical, evidence-based plans that can be implemented in their force.

Lancashire Constabulary used their participation in the academy to develop a force-wide early action and prevention strategy. This has involved taking a family-based approach to working with young people and seeking to identify and address any issues in their home environment that may be impacting on a young person's behaviour. The force has expanded the size of their Early Intervention Unit (including hiring mental health nurses) and co-located early intervention staff with Troubled Families teams across the county.⁶

Research Schools Network: The EIF have awarded 'Research School' status to 23 schools and academy chains that will act as regional hubs, helping local schools put research into practice. Six are already up and running and early activities include offering training on teaching literacy, developing programmes to make the best use of teaching assistants, and hosting conferences for local schools. Just over half of these Research Schools are in Opportunity Areas that have been designated by the Government as social mobility 'coldspots'.

Partnerships with local authorities: Both the Centre for Ageing Better and What Works Scotland have developed strategic partnerships with individual local authorities as a means of improving the way localities use evidence in decision-making.

The Centre for Ageing Better is working with Greater Manchester Combined Authority and Leeds City Council to capture evidence on what works, jointly develop and test new interventions, and systematically apply learning with respect to ageing and issues such as housing, labour market re-entry, and transport. Similarly, What Works Scotland is using this collaborative approach in areas including Aberdeenshire and Fife to promote the use of evidence in local initiatives around health and social care integration, participatory budgeting, and education, among other areas.

⁶ Early Intervention Foundation (2017) 'Police Academy: How forces are on the front line of early intervention', <http://www.eif.org.uk/police-academy-how-forces-are-on-the-front-line-of-early-intervention/>

“This academy, over a few short sessions, has managed to galvanise a disparate group in a way that I have never experienced in 25 years of policing, despite numerous investments in my training and development. Master classes delivered by some of the best-informed people nationally have energised and motivated the group to fundamentally change local approaches.”

David Houchin, Superintendent, Humberside Police, on the impact of the Early Intervention Academy for Police Leaders, convened by the EIF

Adoption of What Works evidence by regulators

The What Works Centres are indirectly driving the adoption of evidence by influencing the inspectorates and professional bodies that set standards for specific workforces.

Both the EEF and CoP, for instance, have influenced the assessment criteria used by inspectorates in their fields. HM Inspectorate of Constabulary and Fire & Rescue Services (HMICFRS) now assess police forces on their approach to evidence by examining whether they evaluate new interventions and use the CoP's Crime Reduction Toolkit to identify what works. HMICFRS have also adjusted their inspection criteria on neighbourhood policing to take account of the CoP's findings that problem-solving strategies are particularly effective in reducing crime and anti-social behaviour.

Equally, the What Works Centres have a role in encouraging inspectorates to stop using criteria that are based on weak evidence (see Box 5.2).

BOX 5.2: Stopping scrutiny of practices that are not based on strong evidence

In 2016, Ofsted – the body that inspects standards in English schools – changed its guidance on feedback and marking in response to an EEF systematic review of the evidence base.

Feedback is important to pupils' progress and teachers dedicate a huge amount of time to marking. But the EEF's review (April 2016) showed there was a very weak evidence base on written marking. Problems with the quantity and quality of existing research evidence include:

- A lack of robust studies such as randomised controlled trials
- The concentration of higher quality research in related but ultimately very different fields (e.g. higher education and English as a foreign language)
- A focus on short-term impact rather than identifying evidence of the long-term effect on attainment

These findings prompted Ofsted to update their guidance:

'As both the Workload Review group on marking (March 2016) and the Education Endowment Foundation (April 2016) reported, there is remarkably little high quality, relevant research evidence to suggest that detailed or extensive marking has any significant impact on pupils' learning. So until such evidence is available, and regardless of any area for improvement identified at the previous inspection, please do not report on marking practice, or make judgements on it, other than whether it follows the school's assessment policy (November 2016).'⁷

⁷ Ofsted, School inspection update, November 2016, Issue 8, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/595745/School_inspection_update_November_2016__1_.pdf

Building capacity to use evidence

There has been a range of initiatives across the What Works Network to increase the capacity of organisations, senior leaders and high-performing individuals and institutions to put evidence into practice.

a. Evidence audits of government departments

In 2013, the What Works Team in the Cabinet Office launched a series of evidence audits across individual government departments.

Carried out by a joint team made up of members of the What Works Team, the host department, and a volunteer from another department, the audits were intended to identify areas where the use of evidence in policymaking could be strengthened.

The importance of this programme of work lies in its focus on organisational culture and practice. Review teams were less concerned with promoting formal structures

4
evidence audits
of government
departments

BOX 5.3: DFID's evidence review

The Department for International Development (DFID) participated in the evidence audit process in 2014. The review team conducted approximately 30 interviews and considered internal documents, staff survey data, and reports by scrutiny bodies such as the Independent Commission for Aid Impact.

DFID was judged to exemplify good practice in its use of evidence in policymaking, with strong connections to academia, good quality peer review of business cases, open access to existing research and evaluations, and senior leaders setting clear expectations on the use of evidence.

But the review also identified areas for improvement, which DFID has begun to act upon. DFID is using evidence mapping to support policy teams in gaining a better understanding of the existing evidence base as part of the policymaking process. The department has boosted its support to teams working within developing countries through 'research hubs' covering East Africa, South Asia and the Middle East. DFID has also developed a range of new programmes focused on improving the use of evidence post business case. This includes the Global Learning for Adaptive Management Programme, which provides technical support to modify projects and programmes as new evidence emerges or the development context changes.

that regulate the use of evidence – 'tick-box' activities that were unlikely to result in lasting behaviour change. Instead, the audit process focused on ways of embedding

evidence in decision-making through leadership behaviour, professional networks, communication pathways, and working arrangements.

“The What Works initiative is terrific. It encourages us to focus on a challenge that is absolutely critical to effective policy making: how can we incorporate evidence into our decisions in a timely and efficient way. This challenge is particularly acute in international development, where working in fragile and complex environments makes these decisions even more difficult.”

Mark Lowcock, former Permanent Secretary, DFID, now United Nations Under-Secretary-General for Humanitarian Affairs and Emergency Relief Coordinator⁸

⁸ DFID and Cabinet Office (2014) What Works Review of the Use of Evidence in the Department for International Development, <https://www.gov.uk/government/publications/what-works-review-of-the-use-of-evidence-in-the-department-for-international-development--2>

The collaborative spirit of these evidence audits was subsequently incorporated into a wider ‘value mapping’ exercise run jointly by the Treasury, Cabinet Office and senior analysts and finance professionals in departments. The wide-ranging analysis of departmental expenditure involved in this work included estimates not just of efficacy but also of the quality of evidence that underpinned those estimates.

The exercise was deliberately conducted outside the spending review process to encourage an honest and co-owned assessment of the state of knowledge. Crucially, a major focus of this activity, just as in the earlier evidence audits, was to identify strengths and weaknesses in the generation, translation and adoption of evidence – and to encourage departments to foster a stronger What Works culture both internally and in the bodies and professions they support.

This same commitment to measuring how departments turn public money into results for citizens is the focus of Sir Michael Barber’s recent Public Value Review, supported by HM Treasury. The review set out a new Public Value Framework, which HM Treasury will pilot with departments in 2018.

BOX 5.4: Barber Public Value Review

In 2017, Sir Michael Barber led a government-commissioned review into how central government could maximize the value and impact of public spending. His final report recommended implementing a Public Value Framework as a “new basis for dialogue between HM Treasury and departments”, one that is just as focused on the outcomes being delivered as it is on how budgets are allocated and managed.

The framework is a practical tool and process that could be used to build a shared evidence base on the effectiveness of public spending and to identify potential performance improvements. With a strong emphasis on rigorous planning and data collection, engaging citizens, and developing system capacity, the framework offers a means of changing working practices and cultures inside government. The framework also seeks to strengthen ‘stewardship’ within government – nurturing the capabilities of institutions and people to improve. This includes understanding ‘what works’, what does not, and the capacity of the system to determine this.

The government has committed to testing this framework in a series of pilots in 2018. These will be joint enterprises between the Treasury and departments. The What Works Team will support the delivery of these pilots.

b. Training in the use of evidence

It can be challenging for practitioners to make use of evidence if doing so requires a major change in established practices.

The What Works Network has taken significant steps towards building people’s capacity to act on available evidence.

This includes initiatives such as the CoP’s

master classes in research appraisal, which have reached 750 police practitioners this year, and the inclusion of learning on what works in the College’s Strategic Command Course, policing’s most senior leadership development programme. Initiatives also include 20 bespoke workshops delivered by the What Works Centre for Local Economic Growth (WWG) to local authorities and Local Enterprise Partnerships (LEPs) wishing to identify and mobilise evaluation evidence in a particular policy area.

The ongoing training and development programmes across the Civil Service, mentioned earlier, are also as much about the use of evidence as its generation. Similarly, the Policy Profession, under the leadership of Sir Chris Wormald and with the support of the What Works National Adviser and the Policy Profession Support Unit, has codified the competencies required of policy professionals within the Civil Service. These competencies

20
bespoke evaluation workshops delivered to local authorities and LEPs by WWG

explicitly incorporate a range of elements on the use of evidence. Civil Service Learning has commissioned a corollary set of learning and assessment modules, with the assistance of the What Works Team and expert bodies such as the Royal Statistical Society and Institute for Government.

Looking ahead

The What Works Network will devote increasing attention and resources to driving the adoption of evidence over the coming year. The Centre for Ageing Better, for example, is extending its strategic partnership programme to a further local authority. Similarly, the EIF is building on its successful police academy model and creating an Early Years Transformation Academy. This will involve working with local teams responsible for maternity and early years services and helping them apply evidence to commissioning and delivery plans.

Meanwhile the College of Policing is embedding modules on evidence-based policing and research methods in the new Police Constable Degree Apprenticeship, which will be launched in 2018. The use of evidence-based approaches will then be incentivised throughout the system through its explicit incorporation in the policing Competency and Values Framework and in recruitment and promotion processes.

In terms of indirect approaches to driving the adoption of evidence, the Centre for Ageing Better, together with Public Health England, has commissioned a review of the existing advice on strength and balance activity from the Chief Medical Officer's Expert Group. This will inform the Chief Medical Officer's revised guidance to clinicians and the public due out in 2019.

Within the Civil Service, the Policy Profession is developing a formal assessment process, rooted in the set of competencies that have been drawn up. This assessment will enable current and future generations of civil servants to achieve formal accreditation in these competencies and be part of a profession in the deeper sense, with the effective use of evidence at its heart.

Conclusion

When the current Cabinet Secretary, Jeremy Heywood, made his first public speech in 2012, he said that one of his key objectives for the Civil Service and the broader public sector was to become more evidence based, and specifically to see the wider adoption of the ‘What Works’ approach.

A great deal has happened since. A series of What Works institutions, together covering more than £200 billion of public expenditure have matured into increasingly important players in the public sector landscape. They have become the ‘bridge’ institutions between the world of academic research and the public service professions and other communities that they have been built to serve.

The What Works Centres are the most visible part of the What Works movement. But as this report shows, the centres are not the only part. They are complemented by developments within government and in the research and funding communities.

Within the UK government, these developments include: the training of civil servants in the design and application of

RCTs and related methods; the creation of a 50-person Trial Advice Panel to advise and support policy professionals; and the publication of ‘Areas of Research Interest’ by departments to highlight gaps in knowledge that external researchers can help fill.

There are also corollary developments in the funding and research communities: Bloomberg Philanthropies is supporting some of the UK’s city mayors to make greater use of data in spending decisions; the £10 million Police Knowledge Fund, resourced by the Home Office and the Higher Education Funding Council for England (HEFCE) and administered by the CoP, is supporting research collaborations between academia and frontline policing; and policy impact has become an assessment criteria in the HEFCE-administered Research Excellence Framework through which research funding to universities is allocated.

Other countries are also taking significant strides, opening up opportunities for collaborations and learning about what works from across the world. Governments in countries such as Australia, Canada, Finland and the United States have set up teams

that support experimentation and robust evaluation across their workforces.

We should also not be complacent. Even when some practices are found to be more effective than others, adoption is often very slow. There are also areas of government spending where a What Works approach could add enormous value. Such areas could include the environment, employment support, prisons, and courts. There are still many large-scale programmes that could benefit from a greater commitment to a ‘test, learn, and adapt’ approach.

If we can maintain the momentum that has been generated in the past five years we have every reason to be optimistic about the future. Questions about what works – and where and for whom – are disarmingly simple. But answering these questions and sharing the findings has the potential to transform the quality, productivity and effectiveness of our public services for the benefit of all our citizens.

For more information on the What Works Network visit <https://www.gov.uk/guidance/what-works-network> or the websites of the What Works Centres:

- Centre for Ageing Better: www.ageing-better.org.uk
- College of Policing: www.college.police.uk
- Early Intervention Foundation: www.eif.org.uk
- Education Endowment Foundation: www.educationendowmentfoundation.org.uk
- National Institute for Health and Care Excellence: www.nice.org.uk
- Wales Centre for Public Policy: www.wcppp.org.uk
- What Works Centre for Local Economic Growth: www.whatworksgrowth.org
- What Works Centre for Wellbeing: www.whatworkswellbeing.org
- What Works Scotland: www.whatworksscotland.ac.uk

Please note the What Works Centre for Children's Social Care is under development