RAPID-CYCLE DESIGN AND TESTING

Lessons from the Design, Implementation and Improvement of the My Future Mentoring Programme

Executive Summary

ABOUT DARTINGTON

Dartington Service Design Lab (Dartington) is a research and design charity focused on using evidence and design in innovative ways to help those working with children and young people have a greater impact. Our team of researchers and specialists are skilled in service design and improvement methods, systems thinking approaches, and data visualisation and communications. As an organisation, we have more than 50 years of experience working across the public and voluntary sectors.

dartington.org.uk

info@dartington.org

@DartingtonSDL

@servicedesignlab

AUTHORS

Dr Deon Simpson, Service Improvement Specialist

Deon was the Research and Evaluation Lead for this Evaluation and Learning Partnership project. Her work at Dartington combines traditional and alternative evaluation approaches to help services manage their own programme development, learning and improvement in a way that fits their needs and real-world context. Deon joined Dartington in 2018 with a PhD in Population Health and considerable knowledge and skills in the development, management and evaluation of programmes addressing the health and wellbeing of women and children.

Jenny North, Deputy Chief Executive Officer

Jenny joined Dartington in 2017 from Impetus where she was the Director of Policy and Strategy for five years. Jenny has written and spoken extensively on how organisations can improve outcomes for those they serve through better service design and data-driven management. She is particularly interested in how organisational and system leadership can empower frontline workers to adapt delivery and continuously improve services. Jenny is a Non-Executive Director and Trustee of the Social Investment Business and Youth Futures Foundation.

1. INTRODUCTION

The two-year Evaluation and Learning Partnership between Dartington Service Design Lab (Dartington) and the Chance UK Mentoring Service began in 2018 from a mutual interest in taking a more pragmatic, learning-focused approach to the evaluation of services for children and young people (CYP).

More children and young people (CYP) in England are experiencing emotional and behavioural difficulties[1] which, if left untreated, can lead to poorer immediate and long-term life outcomes.[2,3] Evidence from global randomised controlled trials (RCTs) and quasi-experimental studies of youth mentoring programmes show that mentoring provides modest benefits to CYP's emotional and behavioural wellbeing and educational attainment.[4] As such, youth mentoring is becoming commonplace in various settings in the UK as an intervention for addressing emotional and behavioural difficulties.[5,6]

However, most of the existing evidence for youth mentoring stem from evaluations of US-based programmes [4,7] while robust evaluations of mentoring programmes in the UK are limited.[8] Moreover, such evaluations used traditional experimental designs which are more useful for addressing whether programmes work effectively, but less useful for learning about the underlying processes of implementation and mechanisms of action of mentoring, and how these are affected by contextual factors including participants' and staff characteristics, mentee-mentor relationship quality, wider family and community context, and the design and features of the mentoring programme itself.[7,9,10]

This learning is increasingly more relevant to service providers who constantly need to make decisions about how to change their programme in response to real-world situations in order to maintain impact, and remain relevant, acceptable and valuable to participants, staff, funders and other stakeholders.[11] There is a growing need for more service providers and other stakeholders to manage their own continuous self-evaluation and learning in order to adapt and improve sensibly, using methods that fit their specific needs, capacity and context.

Since launching in 2017, Dartington has focused on bringing such flexible and accessible design and evaluation methods to services that support CYP. One such method is rapid-cycle design testing: a five-step, fast-paced, iterative, quality improvement-focused method. Details of this method can be read in Dartington's recent publication.[12]

Dartington and Chance UK established the Evaluation and Learning Partnership to test the use of rapid-cycle design and testing to answer common evaluation questions in real-time about the processes, implementation and outcomes of Chance UK's new London-based youth mentoring programme called My Future. The priority was to work collaboratively to carry out a pragmatic, adaptive, learning-focused approach that can be embedded within Chance UK's routine practice.

2. ABOUT THE EVALUATION & LEARNING PARTNERSHIP

The Evaluation and Learning Partnership between Chance UK and Dartington ran from October 2018 to November 2020, with funded provided by the National Lottery Community Fund. The specific objectives were to use rapid-cycle design and testing to:

1. Draw on evidence and previous learning about Chance UK's mentoring programmes to rapidly design My Future's programme theory of change, curriculum and delivery resources (including mentoring manual, activity materials, mentor training, and supervision plan).

2. Evaluate whether My Future can be implemented as theorised in the theory of change, including:
   a. Whether one-to-one mentoring can be implemented as expected;
   b. Whether group mentoring can be implemented as expected; and
   c. What factors influence implementation.

3. Use the learning about implementation to continuously inform decisions and adaptations to the programme design and delivery.

4. Assess whether My Future mentees experienced changes in emotional and behavioural difficulties over the 9 months of mentoring.

These objectives were undertaken in three cycles of design, implementation, measurement, learning and refinement.

Learning Cycle 1 ran from April 2019 to August 2019.

Learning Cycle 2 ran from September 2019 to mid-December 2019.

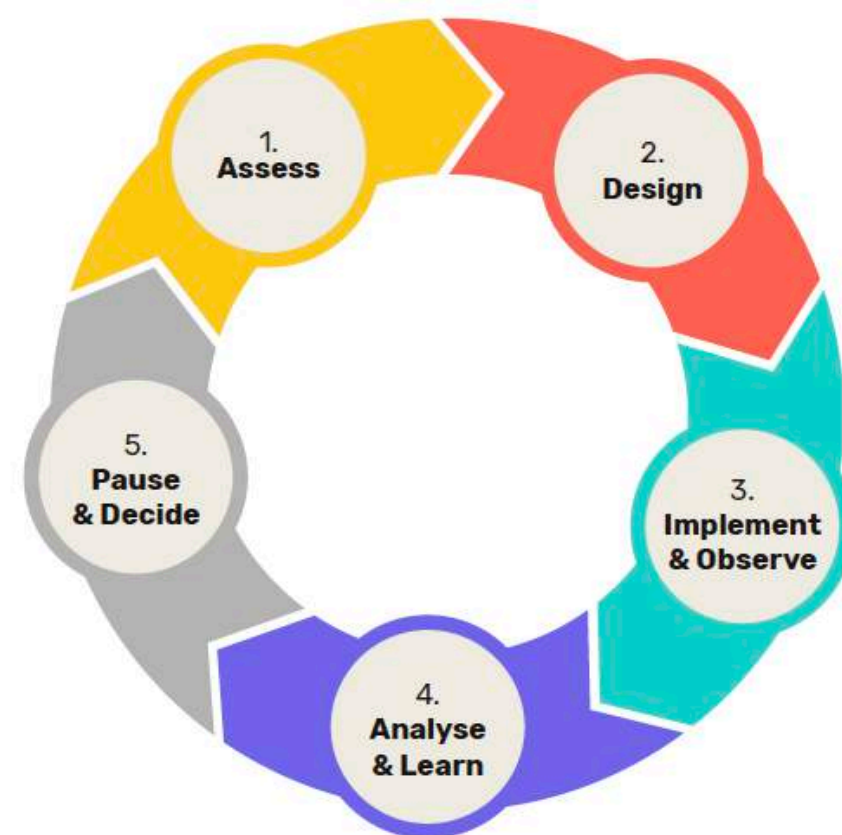**Learning Cycle 3 ran from late December 2019 to September 2020.**

Figure 1. Rapid-cycle design and testing model

3. SUMMARY OF THE EVALUATION METHOD & ACTIVITIES

Initial Assessment and Design

- Dartington facilitated a series of workshops in October 2018 to consider the results of previous Chance UK evaluations and performance data routinely collected by Chance UK, alongside evidence from literature reviews and interviews of leading experts in mentoring research and practice.

- The products of these workshops, which involved Chance UK senior managers, programme managers and mentors, included clarity about the target population, strategies, mechanisms and outcomes of My Future, and new theory of change narrative and diagram (Figure 1).

- The theory of change was translated into a structured curriculum of 31 one-to-one mentoring sessions and 5 facilitator-led group sessions over 9 months. Implementation of the curriculum is supported by a new mentoring manual.

- Plans were also developed to (a) engage with parents and carers so that they can encourage their child's participation and reinforce their progress at home; (b) train mentors to use the new curriculum; and (c) support mentors with implementation and protecting their wellbeing.

- 50 mentees (29 from Camden and 21 from Southwark) were recruited into in the pioneer cohort of My Future. They were referred to My Future by their school, a social care service, or their parent or main carer using the Chance UK referral form which includes parent- and teacher-rated SDQ Total Difficulties scores. Forty-six of the 50 mentees were eventually matched with an adult mentor from their London borough.

Implementation, measurement, learning and refinement

- Implementation of the new My Future theory-based curriculum began in early April 2019, marking the beginning of Learning Cycle 1.

- Technical support from Dartington included guidance on developing, implementing and adapting data collection tools; advising Chance UK on data management; facilitating decision-making meetings; and eliciting feedback and change stories from mentees, mentors and parents/carers.

- Main sources of data and feedback were performance data and qualitative accounts of mentoring reported by mentors in Mentor Sessions Report, feedback on supervision reported in Supervision Reports, group discussions and interviews with Chance UK staff, and participant feedback and stories shared through mid-term and end-of-evaluation feedback questionnaires.

- Data was analysed using basic summary statistics, and learning was regularly reviewed and acted upon during joint end-of-cycle meetings between Dartington and Chance UK.

3. SUMMARY OF THE EVALUATION METHOD & ACTIVITIES

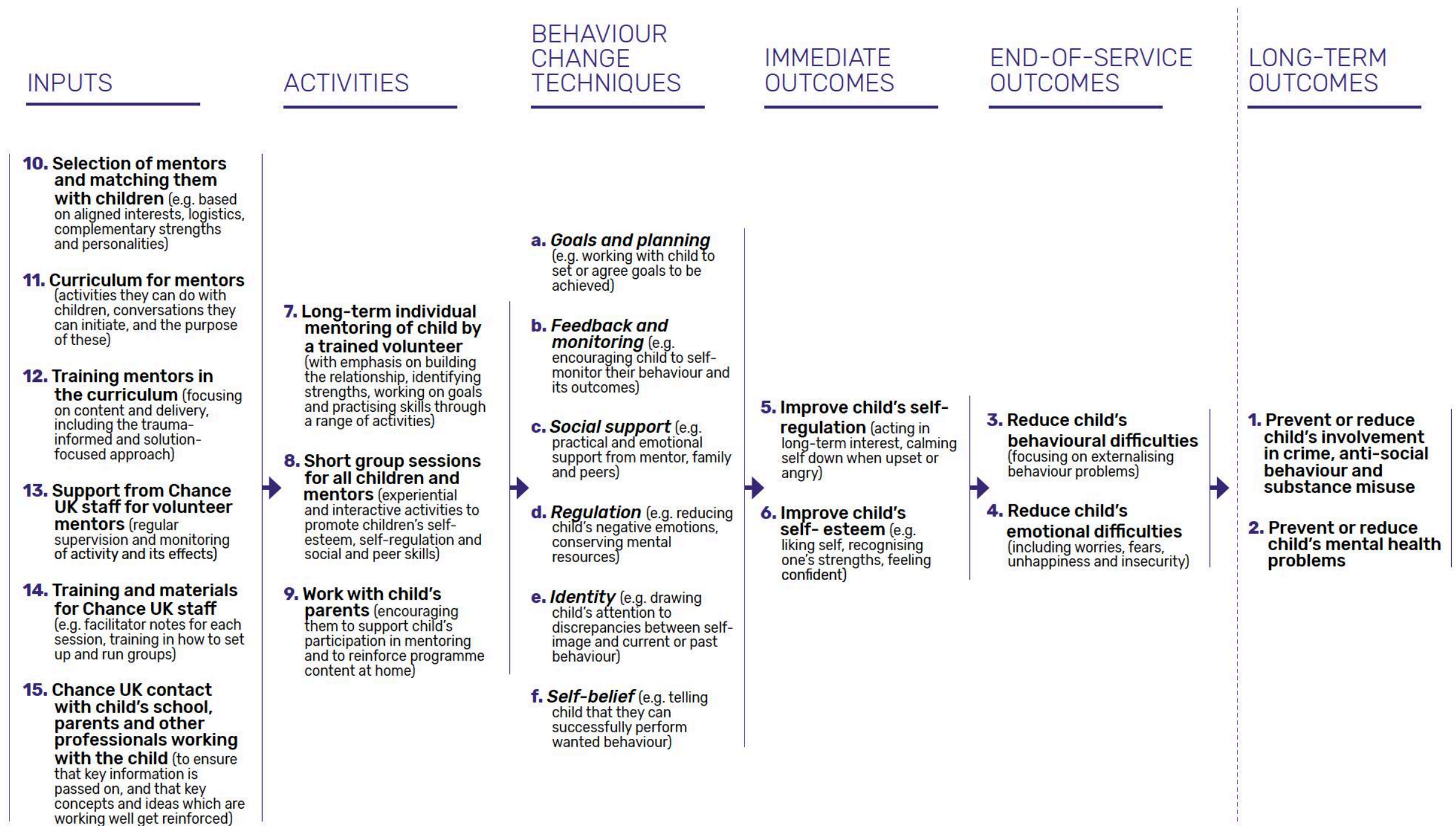| INPUTS	ACTIVITIES	BEHAVIOUR CHANGE TECHNIQUES	IMMEDIATE OUTCOMES	END-OF-SERVICE OUTCOMES	LONG-TERM OUTCOMES
10. Selection of mentors and matching them with children (e.g. based on aligned interests, logistics, complementary strengths and personalities)		**a. Goals and planning** (e.g. working with child to set or agree goals to be achieved)			
11. Curriculum for mentors (activities they can do with children, conversations they can initiate, and the purpose of these)	**7. Long-term individual mentoring of child by a trained volunteer** (with emphasis on building the relationship, identifying strengths, working on goals and practising skills through a range of activities)	**b. Feedback and monitoring** (e.g. encouraging child to self-monitor their behaviour and its outcomes)			
12. Training mentors in the curriculum (focusing on content and delivery, including the trauma-informed and solution-focused approach)		**c. Social support** (e.g. practical and emotional support from mentor, family and peers)	**5. Improve child's self-regulation** (acting in long-term interest, calming self down when upset or angry)	**3. Reduce child's behavioural difficulties** (focusing on externalising behaviour problems)	**1. Prevent or reduce child's involvement in crime, anti-social behaviour and substance misuse**
13. Support from Chance UK staff for volunteer mentors (regular supervision and monitoring of activity and its effects)	**8. Short group sessions for all children and mentors** (experiential and interactive activities to promote children's self-esteem, self-regulation and social and peer skills)	**d. Regulation** (e.g. reducing child's negative emotions, conserving mental resources)	**6. Improve child's self-esteem** (e.g. liking self, recognising one's strengths, feeling confident)	**4. Reduce child's emotional difficulties** (including worries, fears, unhappiness and insecurity)	**2. Prevent or reduce child's mental health problems**
14. Training and materials for Chance UK staff (e.g. facilitator notes for each session, training in how to set up and run groups)	**9. Work with child's parents** (encouraging them to support child's participation in mentoring and to reinforce programme content at home)	**e. Identity** (e.g. drawing child's attention to discrepancies between self-image and current or past behaviour)			
15. Chance UK contact with child's school, parents and other professionals working with the child (to ensure that key information is passed on, and that key concepts and ideas which are working well get reinforced)		**f. Self-belief** (e.g. telling child that they can successfully perform wanted behaviour)			

Figure 2. My Future's theory of change

4.1. ONE-TO-ONE MENTORING: KEY LEARNING QUESTIONS

As part of objective 2, the evaluation examined how one-to-one sessions were implemented, especially whether implementation adhered to expectations and what factors contributed to any unexpected results. Expectations for implementation included the following:

Dosage

- All pairs consistently plan and hold one-to-one sessions over the period of mentoring.
- All pairs hold one-to-one sessions such that at least 67% of pairs achieve a minimum dosage of 24 out of 31 one-to-one sessions.

Adherence

- Mentors adhere to the programme's structured design in the curriculum when planning and delivering mentoring.
- Mentors use the programme curriculum to inform the focus and content of one-to-one sessions, including the objectives chosen, techniques used and skills targeted.

Parent/Carer Involvement

- Mentors regularly engage with their mentee's parent/carer to encourage consistent participation and help maintain the mentee's progress between sessions.

The examination included consideration about the potential influence of unexpected and unpredictable contextual factors. The main sources of data were one-to-one mentoring session reports completed by mentors, supervision reports completed by programme managers, and interviews and group discussions with programme managers during the Implement and Observe and Pause and Decide steps of each learning cycle.

At the end of each cycle, Chance UK and Dartington reflected on the learning about these aspects of implementation and whether assumptions about their feasibility were met. Learning informed adaptations to the programme design and delivery plans, which were then implemented and measured in the following cycle. Findings did not indicate a need to refine the programme's theory during the evaluation.

4.2. ONE-TO-ONE MENTORING: KEY FINDINGS ABOUT DOSAGE

- Most one-to-one sessions were held as scheduled (76%).

- Fewer pairs than expected achieved the minimum dosage of 24 out of 31 one-to-one sessions (43% instead of 67%).

- Learning at the end of Cycle 1 in August 2019 revealed that, in contrast to programme managers' assumptions, most of the reasons for not holding one-to-one sessions as planned were preventable (48%), especially last-minute cancellations by parents/carers, holidays and social events in the lives of mentees and mentors. At the start of Cycle 2, Chance UK immediately reassessed initial strategies for communicating with and involving parents/carers, identified new strategies for more involvement, and redesigned the parent/carer involvement component to include adaptations.

- These improvements coincided with a reduction in the frequency of last-minute cancellations (from 21% to 7%) and a considerable increase in the frequency of mentors' engagement with parents/carers (from 36% to 64%).

- Other (less direct) strategies were used to accommodate disruptions to mentoring due to seasonal holidays which recurred more frequently during mentoring periods that overlapped with school holidays.

- Findings also suggest that remote delivery contributed to shorter, more frequent contact between pairs and reduced the number of missed one-to-one sessions.

- Learning over 3 cycles showed the promising influence of strong parent/carer interest and involvement on delivery. For Chance UK, it also highlighted the need for more anticipatory approaches when starting mentoring and planning one-to-one sessions. These might include:

  o Ensuring parents/carers understand and are committed to supporting mentoring when they agree to participate in My Future.
  o Helping mentors early in the programme to gain the skills and confidence to engage with parents/carers.
  o Collaborating with teachers who can use their relationship and frequent contact with parents/carers to encourage them to continue supporting mentoring.
  o Considering when in the calendar/academic year pairs join My Future so they can factor seasonal holidays into their mentoring timeline.
  o Planning alternatives to face-to-face activities (such as telephone, online and self-guided activities). These should still help to build and maintain the positive interpersonal relationship between mentoring pairs.

4.3. ONE-TO-ONE MENTORING: KEY FINDINGS ABOUT ADHERENCE

- **Overall, mentors adhered to the programme design,** choosing objectives in each month in close alignment with the expected curriculum timeline.

- **Mentors used the 6 mentoring techniques in sessions and spent most of the mentoring time targeting the 5 social-emotional skills**. They maintained this focus even when sessions were adapted to remote delivery due to COVID-19.

- **Mentors mentioned some techniques and skills more than others in their session reports.** The differences in mentions might indicate some mentors' misunderstanding of how to complete the report form, or uncertainty about using some skills and techniques, or differences in practices and competencies. Chance UK can use this learning to set more expectations for what 'good adherence' looks like, and develop additional support to improve mentors' understanding.

- **Most pairs felt positively about their mentoring experience in My Future, which might have positively influenced the quality of delivery, including pairs' mentoring decisions and practices.** Possible positive contributors include mentors' high motivation for volunteering and their belief that mentoring benefits children. Feeling compatible with their mentee might have aided mentors in building a relationship to then deliver mentoring. The clear and detailed curriculum was among the main strengths of the new programme. Training and supervision were also helpful for most mentors.

- Potential negative contributors include the frequency of mentoring – weekly was too burdensome for some mentors; data collection challenges, including data system malfunctions and frequent and multiple assessments; and feeling unprepared for challenging child behaviours, lack of co-operation from parents/carers, and mentoring remotely during COVID-19.

- **The findings about close adherence are encouraging, especially the potential role of the new more structured curriculum**. Chance UK can further improve and tailor training and supervision to enhance mentors' skills to adapt to challenging and changing situations, including flexing their communication and behaviour to suit remote relationship-building and delivery.

- **Staff and participants experienced data collection challenges, including burden and technological difficulties.** However, these challenges are likely to lessen with each cohort of My Future as Chance UK continue to refine the data collection system, enhance training and support for mentors, and find more acceptable ('child-friendly' and less disruptive) ways to monitor mentees' progress.

5.1. GROUP MENTORING: KEY LEARNING QUESTIONS

My Future is Chance UK's first mentoring programme to include structured facilitator-led group sessions. Therefore, Chance UK wanted to understand the general achievability and acceptability (among pairs) of introducing a small number of group sessions into the one-to-one mentoring curriculum. Several factors specific to group mentoring can potentially influence achievability and acceptability.[13]

- Group sessions are more logistically challenging to organise, requiring Chance UK to schedule sufficient dates for each of the 5 group sessions to provide ample opportunities for pairs to attend.

- Unlike one-to-one sessions which take place within close proximity to the mentoring pair's local neighbourhood, group sessions require a 'central' location that is accessible to most pairs; in the case of this pioneer cohort, the Chance UK office.

- Group session content and focus are fixed and cater to the needs of most participants, although the timing of each group session fits within the overall timeline and focus of the mentoring curriculum. Group facilitators need to be sufficiently skilled to deliver sessions as designed but also recognise when some pairs have different or additional needs and tailor delivery (while maintaining the designed function).

- The success of group mentoring relies on the engagement of pairs in activities and the interactions between pairs. Factors such as differences in mentee age, development stage, attitudes, and support needs might influence whether they identify with each other and their group, which in turn can influence interest levels, participation, and practise of what they learn.[13] It can be logistically challenging to schedule group sessions so that pairs with similar characteristics attend the same group session, and continue to attend subsequent sessions as a 'sub-group'.
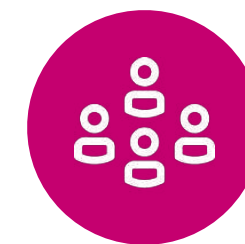
As with one-to-one sessions, an expectation was established for pairs to attend group sessions: all pairs should attend group sessions such that at least 67% of pairs achieve a minimum dosage of 4 out of the 5 group sessions. The main sources of data were group session reports completed by facilitators and the final Debrief Survey completed by 17 mentors.

5.2. GROUP MENTORING: KEY FINDINGS

Learning over 3 cycles revealed the following:

- Most of the group sessions organised by the My Future programme staff (71%) were held as planned.

- However, fewer pairs than expected attended the minimum number of 4 out of 5 group sessions (50% instead of the expected minimum of 67%).

- The main barriers to attending group sessions included the burden of travelling to meeting locations far from mentees' local neighbour, the less personalised nature of groups which didn't suit some mentees' needs and preferences, and the wide differences in mentee age and development stage which affected bonding in some groups.

- Facilitators and mentors used their training to recognise and adapt to these needs and differences which helped to encourage participation and minimise disengagement.

- Chance UK also found that delivering group sessions online during COVID-19 restrictions eliminated the burden of travelling for pairs, simplified the process of scheduling sessions and reduced the number of session options needed, and allowed for a wider range of guided and 'break out' activities.

- The findings give Chance UK considerable understanding about including a facilitator-guided structured group component in a one-to-one curriculum, and what immediate actions can enhance the design and improve implementation to the expected level.

6. ADAPTING MENTORING DURING THE COVID-19 PANDEMIC: KEY FINDINGS

Like most face-to-face services supporting CYP, My Future was disrupted by the COVID-19 pandemic. To maintain support to mentoring pairs, Chance UK made several changes to both one-to-one and group mentoring following the introduction of national stay-at-home restrictions in England on 23 March 2020.

One-to-one mentoring changed to remote delivery. All one-to-one sessions were delivered remotely with contact between mentees and mentors by phone or video meeting. Remote one-to-one sessions were shorter and more frequent than the usual mentoring, often occurring twice per week instead of once and lasting 30 minutes instead of 2-4 hours.

The findings in Table 1 suggest that mentoring pairs were less likely to miss planned one-to-one sessions if they were held remotely (that is 50/305 or 16% versus 101/380 or 27%), possibly because these sessions were easier to schedule for times when mentors, and mentees and their parents/carers were most available. The shorter duration, although held twice weekly, might have also reduced mental burden and opportunity costs for some pairs, especially mentors, who reported that the weekly face-to-face 2-4-hour sessions were burdensome.

Chance UK also offered mentors suggestions for adapting their skills and managing challenges, and they created a new weekly bulletin for mentors, *Mentoring From Home,* that includes modifications and new activities to try remotely and tips for maintaining wellbeing. Most sessions still adhered to the curriculum, with more sessions including social support to help mentees build resilience, remain positive and continue practising social-emotional skills.

One-to-one sessions	Held as planned	Not held as planned	Total planned
Face to Face before COVID-19 restrictions	279	101	380
Remote during and since COVID-19 restrictions	255	50	305
Total	534	151	685

Table 1: Planned one-to-one sessions that were held and missed during Learning Cycle 3 (from Dec 2019 to July 2020)

6. ADAPTING MENTORING DURING THE COVID-19 PANDEMIC: KEY FINDINGS

Group mentoring was also adapted for online delivery, with Chance UK taking advantage of the features of the chosen virtual platform to maintain core elements of the group mentoring design such as personalised support to pairs, peer interactions between mentees, and novel activities to keep mentees engaged.

Delivering groups online helped to reduce the main barriers to the uptake of face-to-face groups: it reduced scheduling challenges, eliminated the need for pairs to travel to a central location, and made it easier to plan sessions and break out groups of mentees with similar characteristics and needs.

At the end of Learning Cycle 3, Chance UK shared that they had to adapt My Future rapidly to the COVID-19 context and focused more on modifying one-to-one mentoring than group mentoring given that the former makes up more of My Future. An important implication of this, and indeed any rapid adaptation of a face-to-face support intervention to online, is whether the core mechanisms of action were successfully maintained - in this case the chance for mentees to learn and engage in conforming social-emotional behaviours with each other, practise new skills, gain positive reinforcement from peers, and develop social cohesion. This could not be examined during the evaluation due to disruptions to group data collection during the period of remote delivery. Chance UK can use self-evaluation to answer this question themselves once they have spent more time refining remote delivery.

Graduation ceremonies were also held online. Of the 36 pairs who graduated from My Future, 3 graduated before COVID-19 restrictions were in place. All other pairs graduated via video conferencing, with the mentee, their family, the mentor and the supervisor in attendance, instead of the usual group ceremony where several pairs who completed mentoring at the same time celebrated in person.

Some pairs had mixed feelings about ending virtually, and Chance UK acknowledged that there were some losses from not being able to end face-to-face. However, for some pairs, online graduation allowed a more personalised experience and more involvement from parents/carers. Some pairs also used their creativity, making virtual scrapbooks and videos of their mentoring journey, or making mortarboards, medals and crowns to wear during the video ceremony. Chance UK also elicited the help of local mayors, celebrity supporters and Chance UK senior staff to create videos personally congratulating mentees.

6. ADAPTING MENTORING DURING THE COVID-19 PANDEMIC: KEY FINDINGS

Reinforcement and new strategies helped to maintain engagement and retain most pairs until completion. As mentioned above, 72% of mentees (36/50) completed My Future. The 14 mentees who discontinued mentoring before graduating did so within their first 3 months: 12 discontinued before 23 March 2020 for various personal reasons and 2 ended early in May 2020 as a result of difficulties maintaining mentoring during restrictions. Chance UK used several strategies to retain pairs and keep them engaged in mentoring.

- Creation and dissemination of a new weekly *Mentoring From Home* bulletin for mentors offering practical support to adapt mentoring remotely and advise for protecting their emotional and wellbeing.

- Increased efforts to engage with parents/carers and additional emotional support to families via regular phone calls.

- Practical support to families in the form of vouchers for food banks and technological devices to access remote mentoring sessions.

- Collaboration with school staff and social workers to use their relationship and contact with parents/carers to encourage families to continue with mentoring.

- Encouragement for mentors to worry less that remote sessions might not be "exciting" and focus more on how they can maintain contact and provide their mentee with positive social support.

Chance UK are considering retaining many of the adaptations they made to mentoring even as they look forward to returning to face-to-face delivery. These include remote one-to-one and online group sessions especially to overcome scheduling and logistical issues, mentor and pair-led personalisation to supervisions, and the dissemination of the weekly *Mentoring From Home* bulletin.

7.1. CHANGES IN MENTEES' EMOTIONS AND BEHAVIOUR:
KEY LEARNING QUESTIONS

Chance UK wanted to learn whether mentees showed improvement in the end-of-service outcome, emotional and behavioural difficulties, by the time they completed My Future. Monitoring whether mentees experienced positive rather than negative changes over the 9 months of mentoring was seen as an important part of the fundamental purpose of the evaluation and learning – to design, develop and improve My Future.

For each mentee, change in emotional and behavioural difficulties was examined by subtracting their baseline (referral) parent and teacher SDQ Total Difficulties scores from their end-of-mentoring parent and teacher SDQ Total Difficulties scores. Positive change, or improvement in difficulties, was indicated by a negative difference between baseline and end scores. This examination included only mentees who graduated and who had both baseline and end-of-mentoring parent and teacher scores; these were 36 mentees and 31 mentees, respectively.

As My Future is a new programme, and the emphasis was on learning and improvement, the examination question was simply whether mentees showed a positive change in emotional and behavioural difficulties by the end of mentoring. The focus was not on whether My Future is more effective than other support services or no intervention, or proving that My Future caused the end-of-mentoring changes (causal attribution). Therefore, the outcome examination was a before-after comparison using the My Future graduates only and did not include a control group or use statistical techniques to simulate counterfactuals.

7.2. CHANGES IN MENTEES' EMOTIONS AND BEHAVIOUR:
KEY FINDINGS

- Most mentees had very high parent- and teacher-rated SDQ Total Difficulties scores at the start of mentoring (Table 2).

- By the end of mentoring, most mentees showed a significant improvement in their Total Difficulties scores: mean difference in parent and teacher SDQ Total Difficulties scores equalled -7.5 (standard deviation: 7) and -9.0 (standard deviation: 7.9), respectively (Table 3).

- Many mentees (42% and 54%) improved so that the their end-of-mentoring parent and teacher Total Difficulties scores fell below the threshold for being eligible for mentoring support in My Future.

- Qualitative feedback and stories from mentees themselves, mentors, parents/carers, teachers, programme managers and others provided further evidence of the improvement in outcomes experienced by mentees by the end of mentoring.

- The results are encouraging learning that it is possible for participants to experience desirable changes during a mentoring programme that uses continuous learning and refinement for evaluation and improvement.

- Once Chance UK gains more confidence about the implementation of My Future, they can use appropriate research methods to learn which combination of factors contribute most to improving outcomes in mentees.

Total difficulties score	Parent/Carer (N = 50)	Teacher (N = 50)
Mean score	22.2	22.6
Standard deviation	5.4	5.1
Lowest score	11	15
Highest score	31	32

Table 2: Summary of parent and teacher Total Difficulties scores at the start of mentoring in My Future

Total difficulties score	Parent/Carer (N = 36)	Teacher (N = 31)
Mean score	14.8	13.6
Standard deviation	7	5.9
Lowest score	4	3
Highest score	29	25
Difference between baseline and end means (SD)	-7.5 (SD: 7.0)	-9.0 (SD: 7.9)

Table 3: Summary of parent and teacher Total Difficulties scores at the end of mentoring and mean difference between baseline and end

8. CONCLUSIONS & RECOMMENDATIONS

1. ACHIEVING A MORE STRUCTURED MENTORING PROGRAMME

Chance UK were successful in designing a more structured programme with My Future. This includes creating a more evidence-aligned curriculum, and producing a manual with a detailed timeline and guidance for mentors to use the core strategies, techniques and skills to address outcomes and sensibly tailor activities to their mentee's needs when necessary. Feedback from My Future mentors shows that most of them found the new curriculum clear and the new manual helpful for planning and delivering mentoring sessions consistently. These features may have contributed in part to the close alignment between the curriculum and the objectives, skills and techniques generally used by mentors over the 9 months of mentoring. Mentors also maintained good adherence while mentoring remotely during COVID-19 restrictions, and any modifications to delivery were in line with curriculum guidance.

For Chance UK, this learning is encouraging proof of their ability to use evidence and experience to develop and continue refining their programmes' designs. The learning can also inform improvements to training and supervision to support mentors better as they translate their understanding from training and the curriculum manual into practice during mentoring. The learning about mentors' use of techniques and skills can help to set expectations for use and monitor future implementation more precisely.

For Dartington, this is compelling evidence of the potential of rapid-cycle design and testing to quickly support services through the often complicated but necessary early stages of distilling the evidence base, complementing science with local experience, conceptualising evidence as practical programme components in a theory of change, and translating theories into clear and deliverable intervention designs.

2. RESPONDING TO DISRUPTIONS IN ONE-TO-ONE MENTORING

Overall, fewer pairs than predicted held the minimum recommended 24 out of 31 one-to-one mentoring sessions. Most sessions were missed for seemingly foreseeable reasons like parent/carer last-minute cancellations and life events. Other potential barriers to one-to-one delivery include the weekly frequency of sessions and the lack of co-operation from parents/carers. The process of routinely reviewing learning in cycles helped Chance UK to immediately identify and respond to the more controllable disruptions, ultimately reducing their recurrence during the evaluation. Other foreseeable factors like seasonal holidays were less controllable and continued to reoccur alongside a high prevalence of unavoidable illnesses and emergencies.

8. CONCLUSIONS & RECOMMENDATIONS

Chance UK gained ample learning that can inform more anticipatory responses to these disruptions including ensuring strong parent/carer commitment at the outset, maintaining high parent/carer engagement throughout mentoring, factoring seasonal holidays in mentoring schedules, and using alternatives like online delivery which the evaluation shows can reduce logistical challenges and increase the frequency of pair interactions.

This aspect of the evaluation clearly demonstrates the immense potential of rapid-cycle design and testing to continuously generate feedback and facilitate timely decision making and change to avert problems. Other services and evaluators might find similar benefits especially when undertaking improvement-focused process or formative evaluations.

3. BUILDING A FOUNDATION FOR GROUP MENTORING

As with one-to-one sessions, fewer pairs than expected attended the recommended minimum of 4 out of 5 group mentoring sessions. At the same time, My Future programme managers and facilitators delivered most of the 41 group sessions they originally planned, and by delivering in the context of COVID-19, demonstrated their ability to rapidly adapt online while maintaining some core design features such as personalised facilitator support and small-group peer activities.

Chance UK now have first-hand understanding of the general promoters of and barriers to offering a structured facilitator-led group component.

The evaluation findings provide a foundation on which to develop other evidence-aligned strategies to overcome the main barriers to attendance highlighted by pairs, such as inconvenient meeting times and locations, and differences in mentees' development stage, support needs and level of engagement. Chance UK are already considering a blended approach as a long-term response, given the promise shown (by the few virtual sessions they implemented) for reducing scheduling challenges, eliminating travel burdens, and simplifying the 'grouping' of mentees with similar characteristics.

4. MAINTAINING POSITIVE SUPPORT TO MENTEES

The evaluation shows that, amid changing strategies, most mentees experienced significant improvement in their emotions and behaviour by the end of mentoring. Most mentors also felt positively about their mentoring experience and compatible with their mentee, while most mentees rated their relationship with their mentor favourably. These findings suggest that methods such as rapid-cycle design and testing can 'positively disrupt' routine practices, facilitating improvement in processes while not impacting negatively on the experience of participants and staff. In fact, the method helped to produce evidence that the use of some outcomes assessments were potentially burdensome to younger mentees and some parents/carers and teachers. Pause and Decide meetings created the medium urgently needed by Chance UK to reflect on such evidence and decide to adapt some assessments and discontinue another.

8. CONCLUSIONS & RECOMMENDATIONS

5. BALANCING RESEARCH AMBITION WITH REALISM

Recognising that the use of some assessments might be more harmful than helpful is one way in which Dartington and Chance UK learned to temper the need for research rigour with the practicality of a real-world programme delivered to young children. Responses from mentors and teachers to the number of data collection forms and timepoints also suggest that, at times, the evaluation might have be doing too much. The My Future programme managers reflected that they sometimes felt challenged by the novelty of continuously collecting, inspecting, collating and sharing data. Dartington's efforts to limit data collation and sharing to new data from subsequent cycles helped to alleviate some burden. They also increased the practical support to programme managers by providing guidance and a checklist for data management.

Going forward, some of these challenges will lessen for Chance UK as they deliver and refine more cohorts. They have also committed to working collaboratively with mentees and mentors to find valid assessments and create customised tools that are more contextually appropriate for My Future.

Dartington is also reflecting on how they can support services with identifying or developing such tools by drawing on their experience in user-centred design and their work on other projects focused on youth involvement and empowerment.

Addressing the sheer volume of data will be more challenging as rapid-cycle design and testing already aims to facilitate data collection that is proportionate to the nature and needs of the programme being tested. A possible workaround is to include more detailed considerations about data collection in the early Assess step where Dartington can present a range of options from minimum to aspirational to aid stakeholders in arriving at an achievable medium.

6. LEAVING A LEGACY OF TOOLS AND BEST PRACTICES

While there were some unexpected findings, overall, the evaluation approach has contributed to new understanding, skills and products that Chance UK can continue to use and build on with My Future and their other programmes. Meanwhile, similar services, and evaluators interested in learning and improvement, might be inspired by the fruits of Chance UK's labour, some of which are summarised in Table 4 on the next page.

8. CONCLUSIONS & RECOMMENDATIONS

Understanding

- Promoting an organisational culture of learning and self-evaluation
- Using evidence and experience to inform theory-based designs and refinements
- Tailoring activities, tools, training and supervision to the different stages and needs of participants

Skills

- Rapid designing, adapting and quality improvement
- Data collection and quality management
- Basic data analysis, insight generation and interpretation
- Involving cross-functional teams in regular (cyclic) data-driven decision making
- Supporting uptake, integration and diffusion of innovations

Products

- Theory of change
- Mentor manual and structured 9-month curriculum
- Face-to-face and virtual models of one-to-one and group mentoring
- Parent/carer engagement pack and code of conduct
- Data quality checklists
- Decisions and adaptations record

Plans for embedding

- "Rapid-cycle design and testing offers a structured framework to test, learn and adapt quickly and flexibly. It is empowering to have been able to see innovations brought to life and to change a longstanding codified programme and see improvements within the next cycle where we wanted to make a change." *Chance UK CEO*

- "I think having the theory of change will enable us to further develop the programme curriculum, content and structure beyond this project and will provide a framework to work within when making further developments" *Chance UK senior programme manager*

- "Building in more points (cycle points) in the year to stop, reflect and review delivery and implementation and to adjust where necessary and appropriate; convening SMT and project delivery staff to reflect on progress and achievements together; and bringing the staff team together before a new project in the way we did for the theory of change workshops." *Chance UK senior programme manager*

- "Using the data checklists to ensure we are collecting the right data and at the right point for each of our projects, and using more of the functions of our [online data collection system] to improve data management and keep up with evaluation deadlines and monitoring outcomes." *My Future programme manager*

Table 4: Summary of new understanding, skills and products

REFERENCES

1. NHS Digital. *Mental Health of Children and Young People in England, 2017 [PAS]*. https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-of-children-and-young-people-in-england/2017/2017#related-links (accessed 18 July 2020).

2. World Health Organisation. *Adolescent mental health*. https://www.who.int/news-room/fact-sheets/detail/adolescent-mental-health (accessed 2 October 2020).

3. Goodman, A., Joshi, H., Nasim, B. and Tyler, C. *Social and emotional skills in childhood and their long-term effects on adult life: A review for the Early Intervention Foundation*. London: Early Intervention Foundation; 2015. https://www.eif.org.uk/report/social-and-emotional-skills-in-childhood-and-their-long-term-effects-on-adult-life (accessed 18 July 2020).

4. Raposa, E., Rhodes, J., Stams G.J. et al. The effects of youth mentoring programs: A meta-analysis of outcome studies. *J Youth Adolesc* 2019; 48(3). DOI: 10.1007/s10964-019-00982-8.

5. Children's Commissioner. *Forging futures through mentoring: A risk worth pursuing?*; 2018. https://www.childrenscommissioner.gov.uk/wp-content/uploads/2018/04/Forging-futures-through-mentoring-CCO-April-2018-1.pdf (accessed 20 July 2020).

6. Feinstein, L. *Social and emotional learning: Skills for life and work*. London: Early Intervention Foundation; 2015. https://www.eif.org.uk/report/social-and-emotional-learning-skills-for-life-and-work (accessed 9 September 2019).

7. DuBois, D., Portillo, N., Rhodes, J., Silverthorn, N. and Valentine, J. How effective are mentoring programs for youth? A systematic assessment of the evidence. *Psychological Science in the Public Interest*. 2011;12(2):57-91. DOI:10.1177/1529100611414806

8. Clarke, A.M., Morreale, S., Field, C.A., Hussein, Y., and Barry, M.M. *What works in enhancing social and emotional skills development during childhood and adolescence? A review of the evidence on the effectiveness of school-based and out-of-school programmes in the UK*. Ireland: World Health Organization Collaborating Centre for Health Promotion Research; 2015. (accessed 9 August 2019).

9. Pawson, R. and Tilley, N. *Realistic evaluation*. London: Sage; 1997.

10. Jamal, F., Fletcher, A., Shackleton, N., Elbourne, D., Viner, R. and Bonell, C. The three stages of building and testing mid-level theories in a realist RCT: A theoretical and methodological case-example. *Trials*. 2015 Oct 15;16:466. DOI: 10.1186/s13063-015-0980-y. PMID: 26470794; PMCID: PMC4608279.

11. Busse, H., Campbell, R. and Kipping, R. Examining the wider context of formal youth mentoring programme development, delivery and maintenance: A qualitative study with mentoring managers and experts in the United Kingdom. *Children and Youth Services Review*. 2018; 95:95-108. doi.org/10.1016/j.childyouth.2018.10.028.

12. Green, F., Lowther, K., Simpson, D.A. and North, J. *Rapid-cycle design and testing*. UK: Dartington Service Design Lab; 2021.

13. Kuperminc, G. *Group mentoring*. Washington, DC: National Mentoring Resource Centre; 2016. www.nationalmentoringresourcecenter.org/ [accessed February 2019].