THE IMPACT OF STORY: MEASURING THE IMPACT OF STORY FOR ORGANISATIONAL CHANGE

ABSTRACT

Purpose: The role of dialogue has recently been identified as being important in generating impact in organisations, but the purposeful use of narrative or story-based approaches to effect organisational change and service improvement is still relatively innovative. This paper documents and examines two projects in health and social care settings which aim to generate organisational development and service improvement.

Design/methodology approach: The paper evaluates and compares two case studies of story based organisational development and service improvement projects in the UK. This involved developing an appropriate evaluation framework and assessing the impacts in each case using semi-structured interviews and thematic content analysis.

Findings: This paper reports the diversity of impacts and outcomes that were generated by the projects. Specifically, it is argued that there is a strong indication that story-based projects best achieve their objectives when clearly linked to key organisational strategic drivers or pathways, as evidenced by robust evaluation.

Practical implications: This paper recommends that researchers and practitioners, working with story-based methods, design credible and robust evaluative practices, in order to evidence how their work supports organisations to meet current sector challenges. The paper recommends a flexible evaluation framework for evaluating story-based projects in the workplace.

Originality/value: This paper offers new evidence and insight into the impacts and outcomes of using story-based approaches, and a new evaluation framework for these sorts of projects.

Key words: Organisational change, story, evaluation, evaluation framework, service improvement, story work
INTRODUCTION

The impact agenda is a highly contested space and has been criticised for limiting creativity and indeed changes in practice beyond academe (Alvesson and Sandberg 2013; Johnston and Reeves 2017). As such, rather than ‘in the box’ thinking, there have been calls for ‘box changing, jumping or transcendence’ for more imaginative approaches (Alvesson and Sandberg 2014 p967) which engage stakeholders in collaborative forms of inquiry (Cunliffe and Scaratti, 2017; Ozanne et al 2017; Pettigrew and Starkey 2016; Wall, 2013; Wall 2014; Wall 2015; Wall, 2016a; Wall, 2016b; Wall 2017a; Wall 2018 forthcoming; Wall 2017b).

Within this context, MacIntosh et al (2017) highlighted the importance of dialogue and reflexivity, and the role of the importance of narrative within the impact debate. Alongside this, story-based and narrative approaches are gradually becoming more respected as an effective tool for learning and development and for understanding organisational change (McCormack and Milne 2003; Gabriel 2008; Gabriel and Connell 2010;; Reissner 2011; Pässilä and Vince 2016). Evidence of impact has included: service improvement in health care settings (IDEA 2009; SCIE 2010; Ellis et al 2011); positive impacts on policy (in terms of client outcomes) (IDEA 2009; Clark and Purdy 2007; SROI Network 2011); improvements in performance indicators (Shalock 2001); improvements in staff engagement (MacLeod and Clarke 2009); improvements in wellbeing outcomes (Boorman 2009; Rath and Harter 2010; NEF 2011).

However, although there is a diversity of potential methods and strategies to evaluate story based interventions, there is no agreed standard or process. Therefore, a practice problem facing the practitioner researcher using story-based methods in the work place is how to analyse, interpret and present the data in a systematic way that results in credible evidence. As Guest et al (2012) propose “good data analysis (and research design, for that matter) combines appropriate elements and techniques from across traditions and epistemological perspectives”. In this way, evaluation can not only evidence the project outcomes but also create convincing links to personal learning as well as wider organisational development objectives, thus adding credibility to story-based methods.

This paper draws from a practitioner research project in the UK, as part of a work applied learning and organisational development project, to evaluate the impacts of two case-studies. In order to achieve this, however, the practitioner researcher had to develop an appropriate evaluation framework and methodology which was ecologically appropriate for (1) the wellbeing and narrative nature of the project, (2) the practice setting of the practitioner researcher, and (3) generated valid results which could then be utilised in practice to support organisational development and service improvement.

This paper is structured as follows. The first section reviews some of the key evaluative methods and tools which are used in practice to measure impact and organisational learning in the context of health and social care organisations. The second section then outlines the methodology adopted as part of this study, exploring the suitability of various evaluative methods in the context of health and social care settings. The following sections then present and compare two case studies, highlighting the key impacts and broader findings from the case studies. Finally, the paper moves to a discussion of some of the challenges of evaluating story-based methods for organisational learning and change, and reflects on the stages of designing robust evaluative frameworks in the context of story and health.
ASSESSING IMPACT IN HEALTH CARE

Over a decade ago, a cross-government and social care sector working party produced the document *Putting People First: Transforming Adult Social Care* (IDEA 2009) setting out the vision for adult social care and its direction over the next ten years. This paper was a keystone paper as it set forth a strategic direction which is generically known as ‘personalisation’, or highlighting the importance of the individual experience. Similarly, Shepherd et al (2010), in their position paper for the Sainsbury Centre for Mental Health, identified peoples’ lived experience as the most potent driver of organisational change within a culture of recovery. This has positioned and framed the work of external providers ever since, with an emphasis on co-production, laying the ground for participatory methods of working and of evaluation.

In terms of approaches to evaluating work within this broader professional context, there are different varieties to how and why evaluation is done. For example, Trochim (2006) postulates that evaluation strategies fall broadly into four major groups: scientific / experimental, management-orientated systems, qualitative / anthropological, and participant-orientated (the latter of which seem appropriately aligned to the context). In contrast, Mertens and Wilson (2012) propose four categories of evaluative purpose: to determine inputs and need, to improve or change practices, to assess programme effectiveness, and to address issues of social justice. Again, these seem relevant to helping decide the frame of practitioner oriented evaluation in the above professional context.

Within these broader approaches, there are specific methodologies which are used in contemporary health care settings. One of the most popular, and which continues to influence many other models is Kirkpatrick’s (1998) model and toolkit, which was developed as an evaluation tool for assessing impact and outcomes of learning and development programmes. Bespoke methodological approaches utilising Kirkpatrick’s thinking have been developed by governments. For example, The Impact Evaluation Model (IEM) uses principles of outcomes based accountability, and has been recommended by the UK government for localised impact evaluation of activities especially around service and workforce reform. Reio et al (2017), however, critiques Kirkpatrick’s work as being overly focussed on the achievement of outcomes of training rather than on the impact on the stakeholder and whether their needs have been met. Reio et al propose that stakeholders should be able to input to design, development and evaluation.

Return On Investment (ROI) models have also be adopted to measure impact in a very specific and narrow sense (Wall et al 2016, Wall et al 2017). More recently, Social Return On Investment (SROI) methodologies have also appeared which have also been participatory by nature, and emphasises those outcomes which are valued by people, including stakeholders and beneficiaries of social programmes, and provides a participatory mechanism for their voice or story to be heard. For example, The SROI Network, which promotes use of SROI methods internationally to address social injustice, claims:

SROI tells the story of how change is being created by measuring social, environmental and economic outcomes… SROI is a framework to structure thinking and understanding. It’s a story not a number. The story should show how you understand the value created, manage it and can prove it. (SROI Network 2011, website).

Other forms of participatory evaluation methodologies typically assess progress, performance and impact of a project, but with a primary objective of creating a culture of learning for project staff, beneficiaries and partners. Hasenfeld et al (2004), as an example, promote the
Participatory Model of Evaluation (PME) as a highly collaborative process, relying upon a feedback loop from partners and staff. In their work Hasenfeld (ibid) has explored how involving clients in the community in ongoing feedback, makes them part of the evaluation process. The validity accorded to case studies by PME lends credence to personal narratives as a methodology in evaluation.

The practical issues of implementing such complex evaluation approaches can stifle widespread use (Wall et al 2017). In contrast to complex methodologies, Davies and Dart (2005) claim that the Most Significant Change (MSC) technique serves as a legitimate form of participatory monitoring and evaluation. MSC was first developed as a means of auditing changes in overseas development aid projects, but can support organisational learning and service improvement. It is participatory because of the multiple perspectives elicited. As they explain:

it contributes to evaluation because it provides data on impact and outcomes that can be used to help assess the performance of the program as a whole… MSC makes use of… "thick, description", closely textured accounts of events, placed in their local context, and where the role of the observer and their subjectivity, is visible. In the world of ordinary people these often take the form of stories or anecdotes. (Davies and Dart 2005 p67).

METHODOLOGY

This paper adopts a case study approach to document and examine the impact of story in the context of health care organisations, and was undertaken by a practitioner research seeking the dual roles of (1) contributing to the development of the organisations and (2) generating new practitioner knowledge for the individual (Wall 2014; Heikkinen et al 2016). The two case studies relate to two story-based intervention projects focused on organisational development and service improvement as dual outcomes. The projects were delivered within two public sector organisations: one is an adult social services organisation (now referred to as “Social Care Co”) and the other is a health care organisation (now referred to as “Recovery Co”) in England.

The intention was a form of case study which was discovery-led and inclined towards emphasising social processes and relationships within a natural phenomenon, rather than restricting the attention upon outcomes, and is also suitable for comparison case studies (e.g. of individuals or organisations). In this way, the descriptive case studies focuses on contemporary events, explored in their real-life contexts rather than in controlled environment (Yin). The use of multiple cases also provide the opportunity to compare and contrast the findings across different real-life contexts, in terms of different (1) real-life organisational cultures and (2) story interventions (ibid). However, it is acknowledged that the case study approach is also vulnerable to criticism re credibility of generalizations from findings (Denscombe 2010).

Several options were considered when designing the project for suitable data collection methods. However, given the nature of the projects, it was argued that evaluation can be a “sense-making process” in organisations (Weick et al 2005; Weick 2016), as well as one that collects and interprets data, and sharing of personal stories could be a useful experience for participants in the evaluation. Furthermore, it was also argued that practitioner researchers in the context of providing services to health care organisations need to consider how the provider-client relationship might be affected by their choice of methods, for
example a rigorous “root and branch” investigative survey might jeopardise future relationships.

It was therefore decided that the project data would be collected through semi-structured interviews incorporating the Most Significant Change method (Davis and Dart 2005). This was chosen as it was the most ecologically appropriate for (1) the wellbeing and narrative nature of the project, (2) the practice setting of the practitioner researcher, and (3) generated valid results which could then be utilised in practice to support organisational development and service improvement. The interview guide, which was the initial proposed evaluation framework to be used with story projects, is presented below in Table 1. For both case studies purposive sampling (or purposeful sampling) was used for data collection, with between 6 and 12 staff and service users. The evaluation framework (interview questions) were initially trialled outside of the two evaluations and questions which appeared to prompt repeated answered were adjusted.

Table 1. Initial evaluation framework (interview guide) for evaluating story projects

<table>
<thead>
<tr>
<th>As a result of participating in the [project]:</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. What were your personal expectations of what the story project would deliver in terms of your own learning? <em>(Prompts: In what way were these realised? In what way were they different?)</em></td>
</tr>
<tr>
<td>2. What has been your experience of using what you learnt in your everyday environment? <em>(Prompts: new skills, understanding, or behaviours)</em></td>
</tr>
<tr>
<td>3. What has particularly enabled you to use this learning in your workplace? <em>(Prompts: Opportunities? Particular support?)</em></td>
</tr>
<tr>
<td>4. What has made it difficult to use this learning in your workplace? <em>(Prompts: Obstacles? Lack of opportunities? Culture?)</em></td>
</tr>
<tr>
<td>5. Looking back at the last 6 months, ie the duration of the current story project, what has been the <strong>most significant change</strong> for you in your own work as a result of this project? <em>(Prompts: Behaviours? Practices? Team work?)</em></td>
</tr>
<tr>
<td>6. What were your initial expectations of what the story project would deliver in terms of organizational benefits? <em>(Prompts: In what way were these realised? In what way were they different?)</em></td>
</tr>
<tr>
<td>7. What have been the actual outcomes and benefits to the organization? <em>(Prompts: Efficiency. Budgetary. Knowledge. Partnership working.)</em></td>
</tr>
<tr>
<td>8. Looking back at the last [XX] months, ie the duration of the current story project, what do you think has been the <strong>most significant change</strong> in the organisation’s service delivery, as a result of this project? <em>(Prompts: Better delivery of Recovery services. Better teamwork. Better partnership working.)</em></td>
</tr>
<tr>
<td>9. Looking back at the last [XX] months, ie the duration of the current story project, what has been the <strong>most significant change</strong> for your clients (and/or stakeholders &amp; partnership organizations)? <em>(Prompts: Social Return on Investment. Improvements in Wellbeing or Confidence. Better client/organization relationships. Better take-up of services.)</em></td>
</tr>
</tbody>
</table>
CASE STUDY 1: RECOVERY CO

Background

The story project was commissioned by a health care organisation which focuses on the recovery of adults who have or are currently experiencing mental health issues (also referred to as ‘service users’). The project began in October 2012, and explicitly aimed to support culture change, challenge attitudes and practices around ‘recovery’, improve organisational teamwork, increase the wellbeing of service users, develop a shared vision for the ‘recovery’ team, and improve the team’s profile within the wider organisation. The main intervention involved story-based team building workshops and “Story Cafes”, which use stories and conversational circles as springboards to new empathetic awareness and learning.

Evaluating the project

The evaluation was conducted by semi-structured interviews using the evaluation framework (Table 1, above). Evaluation focused on Learnings and Outcomes, and participants were asked to identify the Most Significant Change in the following areas: a) own practice; b) service delivery; and c) client benefits. 6 people participated, and included service users, organisational staff, ‘recovery’ leaders and team members (RIPFA 2011). The interviews were conducted face to face and recorded. The ethicality of this approach was discussed at length with the organisation and the ‘recovery’ team, and agreed before any data were collected.

Organisational outcomes and impact

Outcomes from the project included: (i) set the scene for creative team working; (ii) encouraged innovative working; (iii) created a sense of community in the team; (iv) changes in team experience of itself; (v) changes in behaviour as a team leader and manager; (vi) legitimised new ways of reporting incidents; (vii) using narrative to support staff in an incident risk review process / handling difficult emotions / staff wellbeing; (viii) encouraged use of anecdotal evidence to inform higher level management; (ix) significant changes in team practices.

Service delivery

In terms of service delivery, the evaluation identified a number of most significant changes. The first area of change was that communications within the team have improved and that this is a cultural shift. An indicative statement from a participant said: “Because we’re using it (stories), it’s changing some of the culture already, and the language that we use and the way that we speak to each other.”

The second area of most significant change from the story work in the organisation related to developing/finding a community of ‘recovery’, giving credence to more creative and innovative work, and supporting the promotion of ‘recovery’ principles. One research participant reported a change in knowledge-sharing within the ‘recovery’ teams and to higher levels in the organisation (see also reference to the risk procedure above). Exploring the broader impact, the participant further felt that her experience of the Story Café project was helping guide her through leading a piece of work around values across a number of organisational units and processes, for example, revising the annual appraisal and personal development review and supervision templates, to ensure culture change and workforce wellbeing.
Overall, it was also reported that understanding the importance of using story approaches and seeing the impact of story of the team was reported to have real significance in context of, for example, very high profile health care incidents, and the importance of taking anecdotal evidence seriously and linking this to best practice. There was considerable importance given to ethics and process of delivery and evaluation, how to collect narrative, use it responsibly and have a process around its collection and use.

Client benefits

The evaluation found that engagement with clients was improved as was their relationship with the ‘recovery’ teams, in additional to the level of trust in the team. It seemed that the joint participation in the Story Café by service users and staff prompted a change in attitudes towards service users, their capabilities and the respect shown towards them. Although no baseline evaluation of wellbeing was carried out there has been positive feedback from service users in the Story Cafes (informal storytelling and conversation circles). It was reported that The Story Cafes enabled service users to be seen to have more capabilities and this was considered to be helpful in creating a culture shift towards more inclusive approaches to ‘recovery’.

A summary of the outcomes and impacts generated through use of the evaluation framework (Table 1) are outlined in Table 2 below.
<table>
<thead>
<tr>
<th>Personal Expectations</th>
<th>Personal Learning</th>
<th>Organisational Outcomes</th>
<th>Change &amp;/or Impact on Own Work</th>
<th>Change &amp;/or Impact on Service Delivery</th>
<th>Change &amp;/or Impact on Clients &amp; Service Users</th>
</tr>
</thead>
</table>
| Check Alignment with Recovery principles (2) | Change in staff attitudes towards service users (4)  
Team development (2)  
Impact on therapeutic relationship (2)  
Setting scene for RAG teams to work more creatively (2)  
Potential of using Narrative & Stories in organisation to support other processes / staff development (2)  
Experiencing Stories is powerful connects people (2);  
Galvanising | Creative team practices (2)  
More supportive management practices (2)  
Encouraging Creativity in the Team (2)  
Team development (2)  
New ways of Knowledge sharing (2)  
Culture change (2)  
Links to other processes & projects (2) | Improved therapeutic relationship (2)  
Stories as a powerful tool (2)  
Knowledge sharing (2)  
Working in a holistic and supportive way (2)  
Improved communications (2)  
Confidence to use Narrative to support staff in Risk Review  
Networking with community partners  
Clarifying thinking | Cultural Shift (2)  
Alignment with Recovery Impact Assessment (2)  
RAG Team development as a community (2)  
Renewed team purpose (2)  
Using Narrative & Stories in organisation (2)  
Model for future narrative projects (2)  
Wellbeing of workforce | Enhanced offer (4)  
Change in staff attitudes towards service users (4)  
Communication (4)  
Self-expression (3)  
Therapeutic benefit (2)  
Socialising; being part of a group  
Concentration  
Confidence – “being myself”  
Understanding 5 Ways of Wellbeing |

Note: Numbered themes refer to order of frequency
CASE STUDY 2: SOCIAL CARE CO

Background

The second case is based in a public health care organisation, and specifically commissioned by the organisational lead for the ‘personalisation’ agenda. Starting in April 2012, the project aimed to collate evidence of personalisation practices and generate a repository of this evidence. The project aimed to: inform and educate staff, policy-makers, other stakeholders and the public about personalisation practices; develop staff skills around gathering, and using customer stories for service improvement in training and teams; and improve internal and external communications and engagement.

Evaluation of the project

The evaluation was carried out by semi-structured interviews in person or by telephone using the evaluation framework designed for the project (Table 1). The evaluation was agreed through the organisational leaders who complied with the organisation’s own research governance framework. The project involved interviewing 10 service users.

Organisational outcomes

The evaluation identified that all of the participants stressed the importance of the following most significant changes: the achievement of better engagement with clients, and public education and awareness of personalisation practices. However, there was a sense from all participants that the story-gathering group now needed to be supported and developed for its potential outcomes to be realised fully. As one manager said: “We’ve got to do something strategic to create the space for this”.

In addition to the hard outcomes of a media-based repository of stories, the softer outcomes related to partnership working and engagement. Although organisational outcomes could not readily be evaluated nor costed out in terms of ROI, the project was also considered to have built a platform and a legacy for the future.

Service delivery

The evaluation identified that the story project had successfully supported the ‘transformation agenda’, enabling more creative support planning as well as challenging resistance to culture change. One participant expressed: “The stories are for me the most powerful thing we can offer in this climate in terms of the Change Agenda.” According to the participants, this has impacted upon service delivery where clients’ needs have been met more effectively through a shift in primary focus towards story listening rather than assessment of a “Category of Need” (a bureaucratic assessment of a specific need). Participants reported seeing the beginnings of meaningful change in service delivery of ‘personalisation’. For one social worker the time spent in listening to stories was very significant:

What I’m hearing is different – I’m listening to the words that the person uses and how they describe their experiences and what they’re describing because that could be the most important thing they need help with – rather than the Category of Need.

Client impact

For service users, a ‘social return on investment’ was identified as a common theme: “Where the… project has been able to influence the practice of staff, then people who use services are
going to get a service that is much more tailored to their individual life histories and experiences.”

Similarly, wellbeing or a “therapeutic perspective” was a significant outcome for the clients, “feeling listened to is very important” and more consideration of what is important to them in their lives; as was raising awareness of use of personal budgets. Additionally, through involvement of partnership organisations and by providing a framework for knowledge-sharing, better services can be offered through better multi-disciplinary working.

A summary of the outcomes and impacts generated through use of the evaluation framework (Table 1) are outlined in Table 3 below.
Table 3. SOCIAL CARE CO’s summary of project outcomes

<table>
<thead>
<tr>
<th>Personal Expectations</th>
<th>Personal Learning</th>
<th>Organisational Outcomes</th>
<th>Change &amp;/or Impact on Own Work</th>
<th>Change &amp;/or Impact on Service Delivery</th>
<th>Change &amp;/or Impact on Clients &amp; Service Users</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop story writing skills (7)</td>
<td>Developed listening skills (5)</td>
<td>Educating Public (7)</td>
<td>Partnership involvement (7)</td>
<td>Engagement with Service Users (7)</td>
<td>Supports Personalisation (7)</td>
</tr>
<tr>
<td>Client engagement (7)</td>
<td>Better Listening; Listening differently (5)</td>
<td>Educating Social Workers (7)</td>
<td>Listening skills (6)</td>
<td>Better Personalisation services (6)</td>
<td>Better Personalisation services (6)</td>
</tr>
<tr>
<td>Evidence collecting for Personalisation (7)</td>
<td>Confidence to talk to people about their life experience and needs (5)</td>
<td>Partnership Working (7)</td>
<td>Transformation of Service Delivery (5)</td>
<td>Improved awareness of personal budgets (5)</td>
<td>Improved awareness of personal budgets (5)</td>
</tr>
<tr>
<td>More sympathetic approach (3)</td>
<td>Confidence to write up stories (5)</td>
<td>Staff Skills &amp; Knowledge development (5)</td>
<td>Different Ways of Working (5)</td>
<td>Trust &amp; Confidence in Services (4)</td>
<td>Trust &amp; Confidence in Services (4)</td>
</tr>
<tr>
<td>Tool to promote organisation</td>
<td>Changing ways of thinking about situation (4)</td>
<td>Improvements in efficiency (4)</td>
<td>Story Awareness (4)</td>
<td>Better services through multi-disciplinary working (4)</td>
<td>Better services through multi-disciplinary working (4)</td>
</tr>
<tr>
<td>A tool for collecting and analysing information</td>
<td>Letting clients have more time to tell their story in their words (3)</td>
<td>Cultural Shift (4)</td>
<td>Meeting client’s needs (4)</td>
<td>Social Return</td>
<td>Social Return</td>
</tr>
<tr>
<td>Tap into practical experience</td>
<td>Sharing experiences with other story-gatherers</td>
<td>Assist Positive Risk Taking (2)</td>
<td>More effective use of time (3)</td>
<td>Culture/relationship shift</td>
<td>Culture/relationship shift</td>
</tr>
<tr>
<td>Explicit organisational learning shared in public arena</td>
<td>Impact of different media on presenting stories</td>
<td>New ways of working (2)</td>
<td>Significant contribution to Transformation Agenda (2)</td>
<td>Engages co-production</td>
<td>Engages co-production</td>
</tr>
<tr>
<td></td>
<td>Impact on personal life (listening to children)</td>
<td>Material (stories) for Training</td>
<td>Better recording (Profile, Care Plan, Journal)</td>
<td>Therapeutic perspective</td>
<td>Therapeutic perspective</td>
</tr>
<tr>
<td></td>
<td>A new way of learning about people (behaviours)</td>
<td>First step in the right direction</td>
<td>Recognition of social workers as champions</td>
<td>Feeling empowered</td>
<td>Feeling empowered</td>
</tr>
</tbody>
</table>

Note: Numbered themes refer to order of frequency
DISCUSSION

A cross-case analysis of the findings of both projects indicated similarities around dimensions: (1) how story work underpins radical organisational cultural change, its training application for staff to be better educated around new policies and approaches in health and social care, and (2) its impact on professional relationships particularly partnership working and with service users. A strong indication from this study is that story-work enhances team-building and benefits new projects in the early stages, as strong organisational outcomes were demonstrated for both projects.

The benefits to Recovery Co were significant enough for both strategic level and other staff to extrapolate ways of integrating story-work into management practice, such as staff support, knowledge-sharing, and leadership development. In as much as story-work evidences good practice and aligns with transformation of services, both projects stated that the outcomes of the story projects potentially enhanced the reputation of the organisation as an “honest broker” (Social Care Co) or as “innovative” organisation (Recovery Co).

Yet both projects were different in their focus and ongoing issues. The Social Care Co project had a skills development focus to support the evidencing of personalisation, whereas the Recovery Co project focused on team-building, culture change (towards a ‘recovery culture’). In the Social Care Co project, participants further reflected in broad terms on sustainability and developing systems to support their “story gatherers”, whereas in the Recovery Co project, the reflection was towards further exploration of narrative approaches and how these could improve best practice at all levels.

Key themes and outcomes from the interviews were therefore mapped visually for each project using wordle software. Wordles are easily created from key words emerging from the data as visual images; words are “weighted” by occurrence, represented as the larger words in the wordle. These were shared with the clients as a thematic illustration of project outcomes to assist with personal and organisational learning. The Social Care Co wordle highlights that improvement in skills was dominant (storywriting Skills, creative thinking, better listening) as well as improvement in service-related relationships (partnership working, engagement, personalisation) (see Figure 1), whereas the Recovery Co project wordle reflects the current recovery team’s focus on change and on therapeutic relationships (change management, relationships, culture change, wellbeing) (see Figure 2).

There are also wider implications of such variability in project impacts and outcomes. Specifically, it was recognised that some of the evaluation framework prompts were not necessarily relevant in both contexts, and reflected the nature of the original scoping of the project (as discussed above). The initial evaluation framework that was developed for the purposes of evaluating story work in workplaces therefore needed to be adjusted to reflect the diversity of projects that would be developed. Reflections and decisions about this are reflected in Table 4 below.

This reflects the responsive design of evaluation in workplace learning projects. For example, on consideration, questions 2 to 4 in the evaluation framework are most relevant where the project involves skills training or/and mentoring, and less so where the project delivers service user interventions or team-building workshops. Questions 6 and 7 are difficult to answer if the participants are not responsible for or knowledgeable of strategic and organisational goals, or where projects involve participation by stakeholder and partnership organisations. Similarly question 9 presupposes the project is delivered to those who have direct relationship with service users. As such the evaluation framework design needs
addressing early into the project design, and purposively linked to organisational outcomes – and reflects Coulthard’s (2005) critique of evaluation being overly focussed on the achievement of outcomes of training rather than on the impact on the stakeholder and whether their needs have been met.

Figure 1. A wordle-analysis of the outcomes from the Social Care Co project

Figure 2. A wordle-analysis of the outcomes from the Recovery Co project
<table>
<thead>
<tr>
<th>Evaluation framework (EF) – Interview Question</th>
<th>Response Recovery Co</th>
<th>Response Social Care Co</th>
<th>Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. What were your personal expectations of what the story project would deliver in terms of your own learning? <em>(Prompts: In what way were these realised? In what way were they different?)</em></td>
<td>Leads and those involved with the design of the project responded easily; OTTs did not.</td>
<td>Cohort participants including partnership organisations responded easily. Not asked of strategic lead.</td>
<td>Keep in the generic evaluation framework</td>
</tr>
<tr>
<td>2. What has been your experience of using what you learnt in your everyday environment? <em>(Prompts: new skills, understanding, or behaviours)</em></td>
<td>Leads and those involved with the design of the project responded easily; OTTs did not.</td>
<td>Cohort participants including partnership organisations responded easily. Not asked of strategic lead.</td>
<td>Keep in the generic evaluation framework</td>
</tr>
<tr>
<td>3. What has particularly enabled you to use this learning in your workplace? <em>(Prompts: Opportunities? Particular support?)</em></td>
<td>Leads and those involved with the design of the project responded easily; OTTs did not.</td>
<td>Cohort participants including partnership organisations responded easily. Not asked of strategic lead.</td>
<td>Contextual: Use in evaluation framework for projects with skills training element</td>
</tr>
<tr>
<td>4. What has made it difficult to use this learning in your workplace? <em>(Prompts: Obstacles? Lack of opportunities? Culture?)</em></td>
<td>Leads and those involved with the design of the project responded easily; OTTs did not.</td>
<td>Cohort participants responded easily. Not asked of strategic lead.</td>
<td>Contextual: Use in evaluation framework for projects with skills training element</td>
</tr>
<tr>
<td>5. Looking back at the last 6 months, ie the duration of the current story project, what has been the most significant change for you in your own work as a result of this project? <em>(Prompts: Behaviours? Practices? Team work?)</em></td>
<td>Leads and those involved with the design of the project responded easily; OTTs made partial response.</td>
<td>Cohort participants responded easily. Not asked of strategic lead.</td>
<td>Keep in the generic evaluation framework</td>
</tr>
<tr>
<td>6. What were your initial expectations of what the story project would deliver in terms of organizational benefits? <em>(Prompts: In what way were these realised? In what way were they different?)</em></td>
<td>Leads and those involved with the design of the project responded easily; OTTs did not.</td>
<td>Strategic lead responded easily; partnership organisation member did not.</td>
<td>Contextual: Use in evaluation framework for projects delivered at management or leadership level</td>
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<td>7. What have been the actual outcomes and benefits to the</td>
<td>Leads and those involved with the</td>
<td>Strategic lead responded easily;</td>
<td>Contextual: Use in</td>
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<tr>
<td>Question</td>
<td>Response</td>
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<td>8. Looking back at the last [XX] months, ie the duration of the current story project, what do you think has been the most significant change in the organisation’s service delivery, as a result of this project? <em>(Prompts: Better delivery of Recovery services. Better teamwork. Better partnership working.)</em></td>
<td>Leads and those involved with the design of the project responded easily; OTTs did not. Strategic lead responded easily; partnership organisation member did not. Some difficulty in responding from original project manager (see above).</td>
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<td>9. Looking back at the last [XX] months, ie the duration of the current story project, what has been the most significant change for your clients (and/or stakeholders &amp; partnership organizations)? <em>(Prompts: Social Return on Investment. Improvements in Wellbeing or Confidence. Better client/organization relationships. Better take-up of services.)</em></td>
<td>Leads and those involved with the design of the project responded easily; OTTs made partial response. Strategic lead responded easily; partnership organisation member did not. Some difficulty in responding from original project manager (see above).</td>
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CONCLUSION AND IMPLICATIONS

This paper concludes that narrative or story-based work is efficacious and credible in generating workplace impacts, especially in the context of service transformation and improvement, and that practitioners can examine such dimensions in participatory ways. The willingness of staff to be involved in the project that this paper has examined further demonstrated that evaluation is regarded as valuable and a way, in itself, of engaging staff. Significantly, the involvement of service users in the evaluation was also said to have “recovery potential”, which further emphasises the suitability of participatory methods of project design and evaluation as well as research more broadly (IDEA 2009; MacIntosh 2017).

The richness of the evaluation reflect two areas: (1) the reported processes that story activates and shapes, including sense making, team working, reframing, and collective empathy towards workplace impacts (Gabriel and Connel 2010; Reissner 2011; Wall and Rossetti 2013; Pässilä and Vince 2016), but also (2) the reported impacts of practical and participatory forms of MSC-informed evaluation processes which also facilitate similar processes of sense making, framing, re-framing, and collective empathy, but also motivation to act, change and improve (Wall et al 2017). In addition, the elicited experiential content generated through the evaluation was found to be persuasive when presenting to higher level managers, as it provided strong links between the story work and organisational strategic priorities and pathways. As a result, there are a number of specific implications for different stakeholder groups, and these are represented in the Table below.

In this way, this paper argues that evaluative frameworks benefit from being designed in conjunction with the client organisation to align with their outcomes and be conducted through participatory forms. The decision to adapt the ‘most significant change’ (MSC) method and integrate this into the evaluation framework enabled the strong links to the use of stories as data and evidence. Moreover, the MSC domains of change can be identified by a top-down or bottom-up process, through participatory consultation – in other words – the framework can be adapted to the specific aims and cultural context of the project, for example, more or less skills content, more or less service user involvement.

Findings showed that the MSC-informed questions can generate important stories as data in work based projects, and can accommodate scaling up. In addition, participatory or co-production of evaluative design, has exciting potential, and one which aligns readily with guiding ethos within health and social care organisational governance and culture. In this way, this paper documents contemporary evidence of the variety of organisational development and service improvement that story work can generate as part of workplace learning projects.
<table>
<thead>
<tr>
<th><strong>Story-practitioners</strong></th>
<th><strong>Implications about story-work in organisational change</strong></th>
<th><strong>Implications about evaluation frameworks, strategies or techniques</strong></th>
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<td></td>
<td>• Access and utilise evidence to demonstrate the variety of impacts that can be generated through story-work.</td>
<td>• Clearly define own evaluation ‘toolkit’ as a flexible menu of options, which might include formal methodologies (as required by clients) as well as adapted techniques (such as MSC).</td>
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<td>• Utilise cases examples to demonstrate the value, richness, and possible application areas of story-work.</td>
<td>• Negotiate the evaluation framework and techniques with the project owners – to fit their particular outcomes as well as their requirements.</td>
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<td><strong>Project evaluators</strong></td>
<td>• Position story-work as a way to inform the strategic planning, monitoring and evaluation of strategic change programmes - - notice the who, what, why, when elements of the story construction to identify issues or ideas.</td>
<td>• Involve different parts of the organisation at the evaluation stage to be able to make sense of alternative stories as data/evidence for (1) progression or change and (2) deliverables, impacts and outcomes.</td>
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<td>• Collect and analyse a variety of stories (e.g. from different stakeholders) at the various stages of the project process (e.g. design, delivery, decision-gates, evaluation) – story listening and recording processes will be important.</td>
<td>• Involve partner organisations where possible in the original project to improve the reach and impact of workplace projects at the outset.</td>
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<td>• Engage stakeholders across the organisation by capturing their stories, and telling them in planning and feedback contexts rather than being confined to managers or PR.</td>
<td>• Adopt MSC-informed questions to enable deeper levels of evidence to emerge.</td>
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<td>• Establish story generation mechanisms across the organisation and establish links to teams and managers - and develop skills in noticing story elements (e.g. storyline, characters, actors, transition stages, and morals) (see Wall and Rossetti 2013).</td>
<td>• Utilise real client stories to enrich and ‘humanise’ planning and strategy formulation processes – the story.</td>
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<td>• Establish story curation (collection and display) mechanisms across the organisation to make evaluation a part of a culture.</td>
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<td>• Incorporate partnership working and knowledge sharing around aspects of cultural change in an organisation.</td>
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REFERENCES


