

WORKING PAPER 3

Using Workshops to Develop an Evidence Strategy:

Lessons from the UK Food Standards Agency

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Key messages:

- The UK's Food Standards Agency (FSA) needed to develop a strategy to ensure that its investment in evidence to support its policymaking processes was both efficient and effective.
- Over a period of nine months in 2009, and with limited resources, the FSA developed an evidence strategy that has proved to be stable over time.
- The process used by the FSA to develop this strategy contains many lessons for people wanting to help small government departments or individual policy teams to develop their own evidence strategies.
- Constructing an evidence strategy needs to be led by a clear set of policy priorities and intended outcomes. It is helpful to set these in a thorough analysis of what the future might hold – the trends and drivers that might affect policymaking, and the main risks that might need to be addressed. This helps focus discussions on the evidence that is most likely to be useful and that can address both short- and long-term policy needs.
- It is important to balance wide engagement with external stakeholders with an internal process that allows an organisation the space to reflect on what it can reasonably hope to achieve. For the FSA, a mixture of analysis and workshops proved helpful in achieving this balance.
- When senior management actively engages in an evidence strategy, it sends clear signals that, while they are leading the process, they are also listening carefully to what external stakeholders and internal staff have to say.

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Abbreviations and Acronyms

FSA	:	Food Standards Agency
GACS	:	General Advisory Committee on Science
M&E	:	Monitoring and Evaluation
PESTLE	:	Political, Economic, Social, Technological, Legal & Environmental
S&ES	:	Science and Evidence Strategy

Executive Summary



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In 2009, the UK's Food Standards Agency (FSA) embarked on a nine-month strategy to improve the way it sourced, handled and used evidence to make policy. It had seen how another government department, the Department for Environment, Food and Rural Affairs (DEFRA), had developed a strategic approach to managing its evidence base and decided to run a similar process to develop its own Science & Evidence Strategy (S&ES).¹ This case study outlines what happened over the nine months. It contains lessons for others who are helping small government departments or individual policy teams think about their evidence needs in a strategic and systematic way.

The purpose of the S&ES was to ensure that the resources the FSA spent on evidence were well aligned with its policy goals and strategic priorities. This meant having a clear understanding of what those goals and priorities were in the context of a revised strategic plan for the organisation as a whole. The S&ES was therefore set to begin shortly after the main strategy process was underway.

¹ See Shaxson, L (2014) *Investing in Evidence: Lessons from the UK's Department for Environment, Food and Rural Affairs*. Indonesia Knowledge Sector Initiative Working Paper 2

As part of this main strategy process, the first step the FSA took was to look at the future, identifying the main trends in food safety issues, their likely impacts on industry and on the British public, and where the main uncertainties lay. This analysis was used to identify major food safety risks – those that the FSA would probably need to address in the next five years. A detailed piece of work was then done to uncover the main political, economic, social, technological, legal and environmental drivers that could further impact food safety policy.

On the basis of these analyses, an internal discussion process generated a set of seven strategic priorities with associated outcomes and objectives. The FSA sent these out widely to its stakeholders, beginning the process of consultation that would continue through to the end of the S&ES. It was important to involve a wide range of stakeholders in the strategy process, from food safety inspectors to external experts and internal FSA staff. Not only would this give the FSA a fuller understanding of the range of evidence that might be needed, it also helped to strengthen a collective approach to managing the evidence base for policy. The process was designed to address both of these issues by balancing the need to ‘open up’ discussion with the need to eventually ‘close down’ these debates and construct a final strategy document the FSA could use to drive its work on evidence for the next five years.

Once the strategic priorities and outcomes had been identified, the S&ES process began. It began with two workshops: the first, for 32 external stakeholders, ran over one and a half days and was designed to get the full range of views on what the evidence base should consist of. The second workshop, which ran for one day, involved 50 FSA staff members to work out what could be done, by which teams, and with what budgets. The workshops were carefully designed so that by the end participants

would have written for themselves the outline of an evidence strategy for each of the strategic outcomes. This made the process of writing the evidence strategy document itself (the document that covered the whole organisation) relatively straightforward.

Throughout the process, the FSA’s Chief Scientist and its high-level advisory committee on science played a crucial role. While they were clearly seen to be leading the process, their presence at the workshops ensured that they listened to what the FSA’s staff had to say and that they fully engaged with the external stakeholders.

The final evidence strategy document not only outlined the FSA’s priority evidence needs, it also set out what activities would be needed to underpin a more effective use of evidence in policymaking. These included the skills and capabilities that would be required to interpret and analyse evidence as it became available, the ability to manage partnerships with organisations such as universities, and skills in appraising and evaluating the FSA’s ongoing food safety activities. It also set out governance arrangements that would ensure the strategy would be implemented effectively over the coming five years – meeting both short-term priorities and longer-term requirements for evidence.

An evidence strategy document is only as good as the processes that underpin it. The processes the FSA put in place balance the

The final evidence strategy document not only outlined the FSA’s priority evidence needs, it also set out what activities would be needed to underpin a more effective use of evidence in policymaking.

need for wide consultation with a variety of stakeholders with the right every organisation has to consider, in private, how it should deliver on its remit. They also ensure that if new priorities suddenly emerge, there is a robust sequence of decisions taken so that the overall strategy remains coherent. This was borne out in practice: half way through the strategy, responsibility for nutrition policy was handed over to the Department of

Health. While this required major changes to the main strategic plan, it is a mark of the success of the S&ES that it only needed minor alterations.

The S&ES process was led by two people within the FSA who contracted two external consultants to run the workshops. This case study shows that it is possible to develop a robust evidence strategy with only limited resources.

Introduction



This short case study describes the process the Food Standards Agency (FSA) went through in 2009 to develop its Science and Evidence Strategy (S&ES)². The FSA is the government body in the UK charged with overseeing all food safety issues, such as food contamination and food composition. It could be viewed as the agency responsible for the UK's food sector; its mandate overlaps a little with the UK's equivalent of the Department of Agriculture (which covers food production) and to a greater degree with the UK's Department of Health (which covers nutrition and diet).

This paper offers a partial analysis of the full process the Agency went through. It does not analyse the wider policymaking context within which this strategy process was undertaken, as that information had not been collected at the time. Instead it describes in detail the steps the FSA went through to develop an evidence strategy from a high-level policy strategy document, and the processes it put in place to ensure

² A separate case study has been written on how DEFRA implemented its Evidence Investment Strategies in 2006, 2010 and 2014. The Food Standards Agency is a very different organisation from DEFRA, with a far narrower remit. However, the FSA watched DEFRA's initial EIS process closely and invited two of the consultants who had worked with DEFRA (including this paper's author) to help design and implement its own evidence strategy process.

the strategy is implemented efficiently and effectively. The focus was to ensure that the evidence strategy process was led by the FSA's policy goals, that it involved as wide a range of stakeholders as possible and that it was well embedded within the Agency's ongoing work and resource envelope.

The paper is written in three parts:

1. A description of the overall strategy process the FSA went through to help focus its work on its key strategic priorities;
2. The development of the S&ES which comprised two distinct activities:
 - The external workshop which involved a broad range of stakeholders discussing what evidence would be needed to help the agency address those priorities.
 - The internal workshop, which developed the outline of the evidence

strategy, balancing new needs identified by external stakeholders with an understanding of what the agency was already addressing.

3. The S&ES document itself, associated evidence plans, mechanisms and governance structures necessary to ensure that the strategy would be implemented effectively.

The analysis mainly draws on internal documentation used by the team who facilitated the workshops, although other publicly available documentation is referenced. The case study will be useful to people working to strengthen the way government departments use evidence. It shows how it is possible to develop a framework for an evidence strategy in a workshop setting, involving stakeholders in a structured way in setting priorities for the evidence base for key policy issues.

The first step: clarifying the FSA's strategic priorities

In July 2008, the FSA developed a new strategic plan for the Agency as part of the organisation's regular strategy process³. As Table 1 shows, this began with a piece of analysis that used horizon scanning to identify the main trends, their likely impacts and key uncertainties. This was followed by a risk analysis to identify from where the biggest risks to public health might arise, and an analysis of the Political, Economic, Social, Technological, Legal and Environmental (PESTLE) drivers to identify potential impacts and remaining uncertainties. This led to a detailed and participatory process to build a high-level plan with associated objectives, outcomes and strategic priorities, the draft of which was sent out for formal consultation.

Table 1: Timeline for FSA strategy process

Jul 2008	Horison scanning for main trends: identifying their impacts & key uncertainties
Jul-Sep 2008	Risk analysis: identifying where we can most impact public health
Sep-Nov 2008	PESTLE analysis of main drivers: identifying impacts, and uncertainties
Oct-Nov 2008	Early engagement with stakeholders on emerging high-level plan, including GACS (the FSA's high-level General Advisory Committee on Science)
Nov 2008 onwards	Mapping the risks & opportunities across the food chain for food safety and healthy eating
Nov-Feb 2009	Developing objectives, outcomes and strategic priorities, draft strategic plan sent out for consultation

Source: Internal documentation presented at FSA's evidence strategy external workshop

³ The 2008 strategy document is not available online, the author drew from a hard copy used during the workshop process.

The resulting strategic plan identified seven draft strategic outcomes and related priorities, as shown in Figure 1. These were sent out to stakeholders to gather their views as part of the statutory (UK-wide) consultation process that all new policies and strategies go through.

While the outcomes are written in the sort of wording familiar to those working in international development, it is noticeable that the way the priorities are worded is a mix of policy implementation, lower-level outcomes (for the FSA, industry and consumers), new knowledge and the better application of knowledge. Developing the evidence strategy helped clarify some of the wording and relationships between outputs and outcomes.

It was important that the process of identifying the outcomes was done internally by the policymakers. This gave the FSA a strong sense of ownership of its strategy and also ensured that the input from external stakeholders was directed, from the outset, to helping the FSA deliver its goals.

Once the draft strategic plan had been sent to stakeholders for comment, the S&ES began. Running the two strategy processes in parallel was intentional, as it was recognised that the process of developing the S&ES could raise issues that would need to be dealt with in the full strategic plan. This turned out to be the case as (as reported later) some of the work on the evidence strategy suggested tightening the wording of two of the outcomes.

Figure 1: Draft strategic outcomes identified during the FSA's Strategic Plan process

Purpose: Safe Food and Healthy Eating for All							
Objective: Improve food safety				Objective: Improve the balance of the diet			
Imported food entering the UK market is safe to eat	Food produced or sold in the UK is safe to eat	Consumers make informed choices about food safety when eating outside the home, prepare and cook food safely at home	A proportionate, risk-based regulatory regime relating to food, which is clear about the responsibilities of food business operators and others, and which generates public confidence in food	Retail products and catering meals are healthier	Retailers, manufacturers and caterers provide the nutrition information consumers need to make healthy choices	Consumers understand about food and a healthy diet, prepare and cook healthy meals at home	Outcomes
<ul style="list-style-type: none"> • Increase horizon scanning and forensic knowledge of global food chain • Apply enhanced knowledge and understanding of imported food risks to controls at ports • Monitoring of imports at retail & food services 	<ul style="list-style-type: none"> • Continued reduction in foodborne disease: tackling campylobacter & salmonella in poultry as a priority • Develop our knowledge of what interventions work; and take risk-based approach to increase compliance • Delivering more risk-based, proportionate meat controls • Tackling contamination in the supply and traceability • Improved scanning and knowledge about the use of new technologies in food production 	<ul style="list-style-type: none"> • Continued reduction in foodborne disease • Develop our knowledge of what interventions work in raising hygiene standards in foodservice outlets • Implement a single Scores on the Doors scheme 	<ul style="list-style-type: none"> • Delivering an effective, risk-based inspection and enforcement regime • Better, more proportionate regulation • Stronger EU presence for negotiation and collaboration 	<ul style="list-style-type: none"> • Continued reductions in saturated fat, salt and sugar in mainstream products • Greater availability of healthier options in retail and food services • Increase the pace of change in eating out settings • Understanding dietary habits and nutritional status of the UK population; modelling the effect of changes to consumer habits and products 	<ul style="list-style-type: none"> • A single, simple and effective front of pack labelling approach by the whole food industry • Increased provision of nutrition information in a wide range of catering outlets 	<ul style="list-style-type: none"> • All food businesses to deliver a single set of key healthy eating messages • Increased consumption of healthier foods, especially fruit & veg • Promote FSA as a trusted source of information • Develop integrated Government advice for consumers on food issues • Stimulate demand for lower salt and sat fat products 	
<p>Priorities across food safety and to improve the balance of the diet:</p> <ul style="list-style-type: none"> • Analysis of food safety risks in whole food chain; analysis of nutrient risks and opportunities to support healthy eating strategies <ul style="list-style-type: none"> • Targeted risk-based research and surveillance • Work out where we can have most influence and impact; then determine and implement policy for partnerships across the food chain <ul style="list-style-type: none"> • Increase understanding of how to change behaviour 							

Source: Internal documentation, presented at FSA's evidence strategy external workshop

The second step: strategy workshops



The Chief Scientist's team decided they would need two workshops to discuss and identify the key issues, evidence needs, ways of working and priorities for the new S&ES. The workshops were:

- one external, to open up discussions with external stakeholders about what the evidence base should consist of; and
- one internal, to reflect on what could be done by which of the FSA's teams, and with what budget.

The workshops were held two months apart to allow the Chief Scientist's team time to synthesise the findings of the first workshop and prepare the ground for the second.

Two facilitators were hired to conduct the workshops (chosen by limited tender). Both were experienced facilitators: they had worked extensively with Defra on its Evidence Investment Strategy process and with other government departments on broader issues around the provision of expert

“Two workshops were held, two months apart: the first for external stakeholders, the second for internal stakeholders”

evidence and advice to policymaking processes. The facilitators worked closely with the FSA team to scope the workshops, making sure that the FSA knew what each workshop session would cover, how it would be run and what it would generate. The workshops were intentionally designed to be very interactive to foster genuine participation.

3.1. The first (external) workshop

The main purpose of the external workshop was to discuss what evidence would be needed to help the FSA deliver on each of its strategic outcomes and how to access the evidence, given a limited budget:

- What evidence should the FSA continue to collect, stop collecting, start collecting, or redirect its efforts to collect?
- Given budget limitations, should the aim of the evidence base be to cover as much as possible or to focus on a few key priorities?
- How could it make the most of what evidence already exists?
- How could it work better with others to access the evidence it needed?

This was also presented as a chance to take a fresh look at how to gather, interpret and use evidence:

- Could the FSA and other stakeholders work in different ways to make it easier to collaborate to get the evidence?
- Were there opportunities for longer-term or cross-cutting work?
- What were the big unknowns and how could the FSA respond best to them?

- How could it balance pressures to deal with immediate issues with the need to think about the long term?

The workshop was spread over two days. The first day used the strategic priorities to help shape the evidence base, while the second day built on what had come out of the previous day to further develop the participants' ideas about what sorts of relationships would need to be put in place to meet all the identified evidence needs.

Thirty-two external stakeholders participated in the workshop, from a wide variety of organisations, including NGOs, the food industry, food safety inspectors, researchers, other government departments, civil society organisations and senior advisers to the FSA. These had been chosen after wide consultation within the Agency to identify people who could represent the breadth of the FSA's needs for evidence. FSA policymakers were not included in this list as there would be a second internal workshop just for them – though the main people charged with developing the evidence strategy did attend.

Day 1: Understanding the breadth of evidence needs

The time available to the workshop was very short – two half days – as many participants had to travel quite a distance to where the workshop was held. The facilitators faced two options: assign people to a single outcome and encourage them to work into it in real depth, or encourage people to work on more than one outcome and, to an extent, sacrifice the depth of analysis. As most people had an interest in several outcomes, the Chief Scientist's team and facilitators decided to assign people to specific groups based on their area of interest, while setting up a process which invited regular challenges and critiques of one group's work by another. In this way most participants were able to contribute to all seven outcomes over the two days.

The Chief Scientist's team and facilitators

began by introducing the FSA's overall strategy process and asking participants to comment on the draft outcomes. While they had already had a chance to contribute written comments through the formal consultation process, it seemed important to offer an informal space for further comments and feedback on the draft document. The team then ran through the purpose of the external workshop, setting it in the context of the broader strategy process and outlining what the workshop was intended to produce. It was noted that the workshop would be run in a participatory style that might be unfamiliar to some people—they were

that discussions were productive, but otherwise let the groups self-facilitate.

The idea for the first day was to produce a long list of evidence needs for each outcome. The danger was that an unstructured brainstorm would lead to a wish list of needs that were not clearly directed at achieving the outcomes. To avoid this, the workshop was structured so that participants first discussed who the beneficiaries of each outcome would be and what success would look like. Each group was given a set of pre-printed sheets to fill in, to ensure that discussions remained focused and to make it easier for facilitators to

Figure 2: Overview of the structure of the first day

Structure of the first day

For each strategic outcome:

- To whom is this outcome important and why?
- What would success in achieving this outcome look like?
- What do we need to know about this outcome? What sorts of things will the FSA need to know to assess programs against the success criteria?

Then, taking the results of the last question:

- What sort of data, research, citizen knowledge and knowledge from M&E would be required?

Throughout, we will ensure a process of challenge so that everyone gets to work on several outcomes

asked to hold their comments about this until the end of the two days.

Throughout the first day the facilitators and Chief Scientist's team observed the discussions to ensure that there was sufficient knowledge sharing taking place and that the process of critique and challenge was effective and inclusive. In some instances participants were moved between groups to ensure one person did not dominate discussions—a standard facilitation tool. At the beginning of each session clear instructions were given to the groups (see Figure 2); these were left up on the screens during discussions. In this way, groups were able to discuss topics freely without the need for FSA presence. The facilitators moved between groups to ensure

type up the groups' work to feed into the next day's session. The plan for the first day is summarised in Table 2 below.

The blank sheets used for the two group sessions are attached in Annex A. Participants used large sheets of flipchart paper and post-its for the initial brainstorming for sessions 1 & 2; these were then summarised onto pre-printed sheets that could be written up overnight.

The first day produced a long list of evidence needs for each outcome, in no particular priority. Discussion of evidence needs also helped tighten some of the wording of the outcomes themselves; an unanticipated result but one the FSA recognised and used in the final strategy document.

Table 2: Plan for the first day

Time	Session purpose	Notes
14.00	Introduction to the workshop	Set the scene for the workshop; describe the process for the two days and what will be achieved.
14.15	First group session: stakeholder mapping	Participants moved to their designated groups: one for each outcome. They were asked to discuss and write (on a pre-printed sheet of paper) the answer to the question: <i>To whom is this outcome important? Why? To whom might it be important in future? Focus on the breadth of the potential stakeholder base for this outcome: how would they interpret it?</i>
14.45	First challenge session	Leaving behind a presenter, each group moved to another outcome, to critique and challenge what the previous group had done.
15.15	Second group session: success factors	Each group returned to their 'own' outcome to review the critique from the first challenge session and to rewrite what they initially produced. They then moved onto the second question: <i>Given what we know about whom this outcome is important to and why, what would success criteria look like?</i> The answer to this was summarised onto pre-printed sheets, as before.
15.45	Second challenge session	The challenge process was repeated, but the groups moved to an outcome they had not previously worked on.
16.15	Tea break	
16.30	Third group session: brainstorming the evidence needs	Back in their 'own' outcomes, each group then answered the question: <i>What do we therefore need to know about this outcome? What will the FSA need to know to measure progress against the success criteria?</i> The full breadth of evidence needs was considered ⁴ .
17.30	Wrap-up for the day	Summary of progress and outline of the next day's work.

Source: Internal documentation

Day 2: Structuring the evidence needs

The aim of the second day was to put some structure around the evidence needs identified on Day 1, so that it would be easier for the FSA to develop a plan for procuring the evidence.

After the first day, participants were used to the process of group work followed by

challenge. The structure of the second day continued with this format but allowed people greater flexibility to move between groups if they wanted, so that they did not lose their enthusiasm.

The main purpose of the day was to create an evidence 'map', as set out in Figure 3 below.

⁴ Including social and natural science, forward-looking evidence, evidence of the current state of affairs, evidence from monitoring and evaluation work, data, statistics, trend monitoring, primary and secondary research and evidence from stakeholder perspectives. This list was intended to prompt a broad assessment of evidence needs; Day 2 rationalised them into categories that would be more useful to the FSA in developing its strategy.

Figure 3: The purposes of different types of evidence

Beginning an evidence map

Group what you did yesterday under four broad headings:

Type of evidence	Purpose	Examples
Data	To tell us what the current picture is	Baselines, trends, indicators
Research evidence	To tell us how we got where we are now	Primary and secondary research, longitudinal studies
Evidence from stakeholders	To tell us who values what about this outcome	Feedback from citizens and other stakeholders, workshop outputs
Evidence from M&E	To tell us what has worked in the past	Monitoring and evaluation studies, performance indicators

This ‘map’ was to be created for each of the strategic outcomes: groups were then encouraged to move around and read and comment on each other’s map before coming

back to refine their own (see Table 3 below). This helped spot cross-cutting issues. A ‘parking wall’ was used to record issues that people felt were important but that did not

Table 3: Plan for the second day

Time	Session purpose	Notes
09.00	Reflection on Day 1 and introduction to Day 2	The FSA’s Chief Scientist provided an overview of what Day 1 had achieved. His presence sent an important signal to participants that this was a key process for the FSA.
09.30	Building an evidence map	Participants took the long list of evidence needs from the previous day and added them to the ‘map’, synthesising and rationalising where possible and spotting gaps in the evidence.
10.00	Identifying key relationships	Participants were given the freedom to move to whichever outcome they wanted to work on to identify who the FSA should work with and how the evidence could be collected.
11.00	Tea break	
11.15	Links to other outcomes and other issues	Three rapid challenge sessions (15 minutes each): leaving a presenter behind, the groups circulated to spot any links between the evidence needs for each of the outcomes.
11.45	Writing a program brief	As discussions began to tail off, participants were asked to summarise all they had learned about evidence needs into a ‘program brief’ for a new (hypothetical) manager for the evidence program for each outcome. There was no template for this: they were simply asked to write a couple of paragraphs or a set of bullet points.
12.00	Wrap-up and close of the whole workshop	Participants were informed about the internal workshop to be held a month later, and that the evidence strategy itself would be sent to them for comment.

Source: Internal documentation

appear to be making it into the strategy. It had been made clear at the outset that this might happen, and that one of the things to be done after the workshop would be for the FSA to identify which of these 'parked' issues should be inserted into the strategy and which could be shared with other departments.

Towards the end, groups were asked to identify what sort of methods should be used to collect the evidence and which organisations should be involved. In many cases the evidence was already being collected, but this offered an opportunity to think about how it could be done more effectively, how organisations could combine resources and whether there was a need to simplify and synthesise rather than just collect more information.

At the end of the second day the final exercise was set: each group was asked to

programme brief, so the facilitators asked for both to be recorded so the FSA could consider both options. This was a helpful way of ensuring that the workshop did not force consensus where it did not exist.

The external workshop generated a first cut of the evidence map for each strategic outcome – in some cases generating up to four densely packed pages of evidence needs. This map ensured that all different types of evidence were considered and that evidence needs were targeted towards the outcomes (rather than being a wish list). The workshop did two other things that were not anticipated:

- Helped refine the wording of the strategic outcomes to make them more focused on what the FSA really wanted to achieve.
- Identified some issues that the FSA had not included in its strategic plan – as noted above it had been anticipated this might happen, but it was still useful to see what stakeholders thought was important.

The outputs of the first workshop were reviewed by the Chief Scientist's team to look for duplications, and sent around internally as source material for the second workshop.

3.2. The second (internal) workshop

One month later the FSA held a second, internal workshop for FSA staff only, to allow them to reflect on what had been produced by the first workshop and develop an outline evidence strategy. It took a single day and followed two stages (see Table 4): first, ensuring that everything that needed to be considered was considered and second, creating a structured evidence plan by identifying the outputs and activities. Fifty staff attended from across the Agency, and several external experts from the Agency's high-level General Advisory Committee on Science (GACS). While this made for a large workshop, it was necessary to ensure that there was sufficient representation from all the FSA's policy areas.

The structure of the evidence map pro-

draw together all the work that had been done on 'their' outcome to develop a 'program brief'. They were asked: *"If a new person was coming in to take charge of delivering the strategic outcome, what would they need to know and in what order?"* This proved to be a useful tool to help the groups bring order to their ideas and to clarify what they felt the priorities were. In one group, there were some dissenting opinions about the content of the



duced by the external workshop was not used as the basis for this workshop. The first workshop, which was with external scientists and social scientists, used a categorisation that would be familiar to those working in a non-policymaking (and somewhat more academic) environment. For the internal workshop the categories were changed to be more appropriate to policymakers—understanding the current situation, understanding what was driving change, assessing the FSA's impact and anticipating future needs. In this way external stakeholders were not being asked to pre-suppose what the FSA needed, and the FSA had source material that represented a real breadth of evidence.

As set out in Table 4, in the morning session participants reflected on what the first workshop produced and what the priorities were for the FSA, given their limited resources. This was done in groups: one group for each strategic outcome. They were asked to:

- a. Reflect on the tables produced in the external workshop, considering all the evidence needs that were identified, as well as the 'program brief' that had been written;
- b. Clarify what was already known by the FSA before identifying the major evidence

gaps and reprioritising the evidence needs; this was an important step to reduce the likelihood of 'reinventing the wheel'⁵;

- c. Rewrite the program brief to bring out clear priorities for action.

The afternoon session identified the outputs and activities that would need to happen to develop an outline of the evidence strategy:

- a. Outputs would be the 'things' that would need to be delivered, e.g. a report, a set of realistic targets, an improved M&E program; and
- b. Activities were the actions that would need to be taken to deliver the outputs.

After a final session of challenge and critique, the FSA's senior advisers were invited to comment on what they had heard during the day. They had participated in the detailed discussions during the workshop and this had helped them understand some of the specific day-to-day issues facing the FSA. However they were also able to bring a strategic perspective on what evidence the FSA would be likely to need in future.

5 Rapid staff turnover means that there is a constant danger of forgetting what has already been learned: there does not seem to be a foolproof way of guarding against this, but the point was made explicitly in the workshop to encourage people to think carefully about whether new (and possibly expensive) evidence was needed or whether it would be more cost-effective to review what was already out there.

Table 4: Structure for the internal workshop

Time	Session purpose	Notes
09.30	Introduction to the day	The Chief Scientist's team recapped what the first workshop produced and outlined this workshop's purpose.
10.00	Identify evidence needs for each outcome	Participants reviewed what the first workshop produced and added more (this was a free-form session, not in groups). They were specifically asked to consider whether there were any evidence needs important to the FSA, but that did not fit well under any of the outcomes.
10.30	Cluster evidence needs and identify gaps	Working now in outcome groups, participants clustered evidence needs around what the FSA already knew and what more it needed to know, considering in particular how it could better: <ul style="list-style-type: none"> • Assess the current state; • Understand drivers/causes of change; • Evaluate their impact; and • Look to the future.
11.15	Tea break	
11.30	Gap analysis	For each cluster, participants identified where the gaps were and who the FSA could work with: whether this was a case of reviewing existing work and re-interpreting it to serve each outcome, commissioning new work for an existing problem, commissioning new work for a potential new problem, and identifying in each case who to work with.
12.30	Rewriting the program brief for each outcome	Drawing on all the previous analysis, participants were asked to rewrite the draft program brief produced by the external workshop.
13.00	Lunch break	
14.00	Developing a program plan	Facilitators recapped the differences between outcomes, outputs and activities: <ul style="list-style-type: none"> • For each outcome, what are the big chunks of evidence that will need to be delivered – the program-level outputs the FSA would be responsible for? • What activities would need to be done to produce each of those outputs?
15.00	Challenge session	Leaving behind a presenter for each outcome, people moved between groups to comment and critique.
15.30	Final plenary session	Senior advisers were invited to comment on what had struck them about the day and whether anything had been overlooked.
16.00	Wrap-up and close	

The third step: writing the evidence strategy document

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The second workshop developed the outline evidence strategy for each of the outcomes. There was then a process of internal consultation and budget discussions to ensure that what was proposed could be funded and to identify where external stakeholders could contribute. It also helped define the process that would be used to ensure that the evidence strategy could be updated.

It was always the intention that the evidence strategy document would be used in two ways. Internally, it would be used to guide detailed planning, prioritisation and delivery of the evidence. Externally, it would be used as a statement of the FSA's principles and priorities, as well as the basis for discussion with potential partners such as other government departments, the food industry and other private sector organisations, and universities. A first draft of the evidence strategy was written by the Chief Scientist's team, circulated to external workshop attendees in early September, and discussed by the high-level GACS at one of its regular open meetings. The FSA noted that the main innovations in the strategy included:

- Identifying the priority evidence themes; five associated with individual outcomes and one providing strategic and cross-cutting evidence and analysis, supporting the underpinning and longer-term work needed to look beyond the period of the current strategic plan.

- Identifying priority activity themes around evidence, specifically:
 - Identifying and obtaining the evidence.
 - Building partnerships internally across themes, as well as externally.
 - Resourcing the processes of interpretation, knowledge transfer and translation.
 - Building knowledge, skills and capacities.
 - Appraisal and evaluation, including progress on the Strategy itself.
 - A broader scope of work on evidence; going beyond just commissioning new work to gathering and using existing evidence, translating evidence into actions and evaluating impacts.
 - Reinforcing the contribution of social sciences to what had been traditionally a natural-science-heavy program of work.
 - Building a new strategic evidence program to support cross-cutting work, work on future policy needs, and evidence that did not fit clearly into existing programs.
 - Central control of evidence funds, held by the FSA's Chief Scientist, which would be allocated on the basis of bids prioritised according to a common framework.
 - Clear prioritisation of evidence needs on an ongoing basis, using a transparent process.
 - An end-to-end review of the evidence commissioning process to ensure it was transparent and produced high-quality evidence that was fit-for-purpose.
- The final evidence strategy document⁶ is only 20 pages long, but clearly sets out why the evidence strategy is necessary and what its purpose is, the priority evidence themes for the next five years and how they are linked to the strategic outcomes, and the priority activities that are needed to obtain and use evidence effectively. Its structure is given in Figure 4 below.

Figure 4: The contents page of the final strategy document

Contents	Page
Foreword from the Food Standards Agency's Chief Scientist	2
The Strategy in summary	3
What the Strategy does - structure and key parts	3
Science in the Food Standards Agency	4
Part 1: Priority Evidence themes	8
Food Safety: UK production and consumption	8
Food Safety: imports	9
Food behaviours and information	10
Effective risk-based regulation, enforcement and compliance	11
Strategic and cross-cutting evidence and analysis	12
Part 2: Priority Activity themes	13
Identifying and obtaining the evidence and analysis we need	13
Partnership	14
Interpretation, knowledge transfer and translation	16
Knowledge, skill and capabilities	17
Appraisal and evaluation	18
Contacts for further information	19
Annex A Outline of the evidence prioritisation process	20

Source: FSA Evidence Strategy, May 2013 update, p1.

⁶ See FSA (2013) *The Food Standards Agency's Science & Evidence Strategy 2010-2015, May 2013 update*. Available at <http://www.food.gov.uk/science/sci-gov/scistrat>

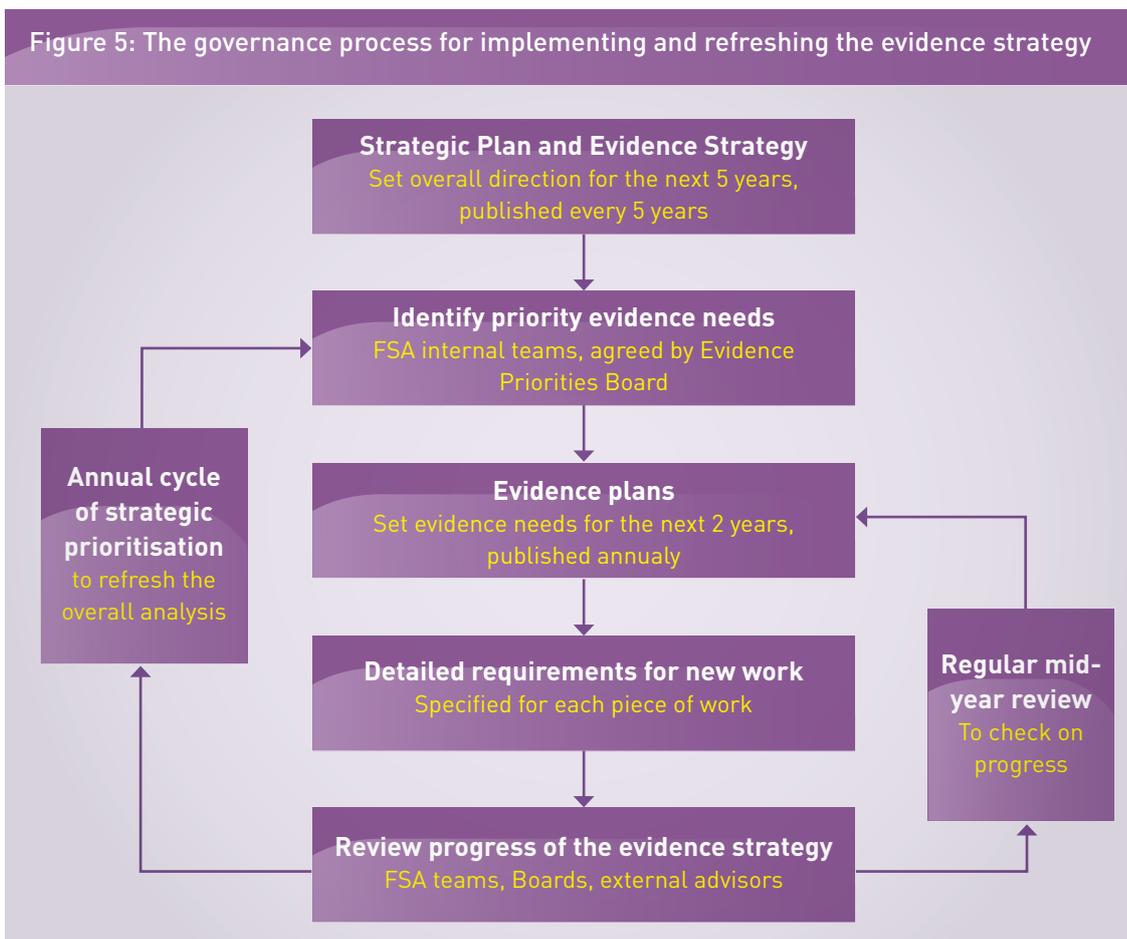
Finally, the document set out the processes that would be followed to ensure that the strategy was implemented effectively; including the governance structures that would be put in place (see Figure 5).

Several structures were set up to implement the S&ES at different levels. All evidence that is commissioned goes through an annual Evidence Priorities Board. This includes both planned work and one-off requests that emerge throughout the year. The Evidence Priorities Board is led by the Chief Scientist. It comprises senior managers who control research budgets and budgetary allocation for administration. Its purpose is to provide a challenge function by ensuring that there is a good spread of types of evidence, that the social sciences are well represented, and that there is a reasonable balance between primary and secondary research. It does this by considering three questions:

- How well the work (whether it is planned or one-off) fits with the FSA’s strategic, policy or operational objectives;
- The likelihood and nature of its impact. This includes an assessment of the quality of the approach that will be taken to use or exploit the evidence that will be generated); and
- The scientific quality of the approach being used to generate the evidence and whether it is fit-for-purpose.

Once the Evidence Priorities Board has agreed the evidence needs for the next two years, teams produce evidence plans and detailed requirements for each evidence activity. These are passed through five lower-level Boards comprising mid-level managers—each Board roughly corresponding to an outcome in the strategic plan—which meets at six-monthly intervals. These Boards produce

Figure 5: The governance process for implementing and refreshing the evidence strategy



Source: adapted from FSA Evidence Strategy, May 2013 update, p20.

two lists:

- Evidence needs that have been prioritised and for which resources are available in the associated outcome budget.
- Evidence needs that have been prioritised but for which there are no resources in the outcome budget – for which resources

need to be reallocated internally.

An annual cycle of strategic prioritisation refreshes the list and suggests resource allocations. This goes to the high-level Evidence Priorities Board for approval or amendment.

Learning from the S&ES process



The S&ES was published in 2009 and is due to be updated in the near future. Interviews with staff from the Chief Scientist's office indicate several areas of learning over the past five years.

1. The S&ES document, and the process of producing it, have made a significant difference to how the FSA conducted its evidence-related activities.

Both the S&ES document, and the process through which it was developed, have stood the test of time. Despite some substantive changes to the FSA's remit, which meant that the overall strategic plan needed to be refreshed⁷, only minor alterations needed to be made to the S&ES. The participatory nature of the workshops ensured that all key stakeholders were included in the process, and the fact that the S&ES was pitched at a level above short-term policy priorities meant that it was a simple matter to make the relevant changes to the document.

⁷ In 2010 the FSA lost its responsibility for nutrition policy to the Department of Health, and its responsibility for many aspects of food standards and labeling to DEFRA, the Department for Environment, Food and Rural Affairs (see Working Paper 2). The FSA's remit was focused on a narrower remit of food safety policy and enforcement.

2. Workshops were an effective and efficient way of encouraging participation, both internally and externally.

The workshops were very highly structured but encouraged free-flowing discussion within each of the sessions. Although the techniques used were not familiar to participants (particularly the challenge sessions in the external workshop), the facilitators were able to type up the first day's outputs so that they fed into the second day. This helped participants see how their inputs were being used and for what purpose. The facilitators took the view that with the right people in the workshop, and the right questions, discussions would more or less run themselves. However they kept an eye on the groups to ensure that no single voice dominated: an important consideration where the mix of participants was so broad.

3. It was not possible to completely reorient existing research programs to the new evidence themes. However, improving the FSA's governance structures and processes around evidence has ensured that evidence continues to be directed towards achieving the FSA's outcomes.

Even though there have been several iterations of the FSA's overall strategic plan to reflect its changed mandates, the S&ES and its governance processes have proved to be robust mechanisms for continually ensuring that evidence needs are aligned with policy goals. The intention is to continue the process of reorientation so that each policy program and project has an evidence component that sets out the rationale for collecting and using the evidence, which can then be evaluated. The danger is that short-term policy priorities focus the agency too much on reactive applied work and that the longer-term, more strategic

work is pushed aside. While the FSA does not allocate specific proportions of its budget to different types of evidence⁸, the process of putting submissions to the Evidence Priorities Board help ensure that an appropriate balance is retained. It also ensures that when an important new priority suddenly emerges, there is a rigorous process in place that ensures that any new evidence needs are considered in light of existing priorities⁹.

4. The new structures put in place to implement the evidence strategy made it apparent that even though there was no significant pressure on program budgets, considerably more internal capacity would be needed to manage evidence programs effectively.

An evidence strategy not only influences what evidence is procured; it also affects how evidence is handled internally. This requires a specific set of skills, such as project management, skills in interpreting evidence, and expertise in using it to inform policy. All of these were identified as key skills the FSA was lacking. This placed pressure on the

8 In comparison to DEFRA, which differentiates between statutory needs for evidence (40% of the total evidence budget), non-statutory short-term needs (40% of the total) and non-statutory long-term needs (20% of the total). See Working Paper 2 in this series. DEFRA and the FSA share a similar philosophy of evidence and a similar approach to developing evidence strategies, and are in regular communication.

9 In 2013, it was discovered that many foods labeled as 'beef' in fact contained large amounts of horsemeat, causing a scandal that reached across the European Union (much of this 'beef' came from other countries in Europe). Although the FSA has processes in place to procure evidence around the risks to human health, risks to the integrity of the food chain had not been foreseen. While the short-term political and media focus has waned, it is clear that this represents more than just a slight shift in priorities for the FSA and its future evidence needs. The issue of food integrity will be explored in more detail in the FSA's forthcoming S&ES process.

administrative budgets within the Agency, as people hired with one skillset were being asked to take on work for which they were not well trained.

The Evidence Boards produce two lists according to what can and cannot be delivered according to program budgets. The FSA's intention is to make similar assessments about management and administrative capability to ensure that the evidence that is procured is effectively translated into policy and programming. The net result will be an approach that looks across the whole portfolio of FSA skills (evidence specialists, policy specialists and administrative staff). This will ensure that the way FSA staff resources are configured is geared explicitly to the objectives of the S&ES for the whole Agency.

5. The FSA's Chief Scientist played a key role in the evidence strategy process.

The workshops were run by the team from the Chief Scientist's office, not the Chief Scientist himself. However, by attending one of the days at the external workshop, and actively taking part in discussions, he sent a strong signal to the FSA's stakeholders that he was taking their participation seriously. The presence of members of the high-level GACS at the internal workshop sent a similar signal to staff, showing that this was being led from the top of the office but that senior management was listening to what FSA staff had to say. Senior management commitment to the strategy process was an important part of ensuring its effectiveness.

Annex

Hypothetical Example Tables

The actual tables that were created in the workshops are confidential to the FSA and cannot be reproduced here. The tables below give hypothetical examples of the sorts of issues participants entered at the workshop, to give an idea of how to fill them in.

External Workshop 1: Group Session 1

Outcome Title..... (hypothetical example: better nutritional information for consumers).....	
To whom is this Outcome important? To whom might it be important in future?	Why?
Consumers	To improve their ability to make choices about healthy food
Consumer support groups	To enable them to provide better advice about dietary choices and healthy eating
Food manufacturers	To ensure that they take a consistent approach to labelling (But also to encourage competition between them)
Trade associations	So they can provide advice to manufacturers, particularly small businesses
Etc.	Etc.

External workshop 1: Group session 2

Outcome title..... (hypothetical example: better nutritional information for consumers).....	
Given what we know about who this Outcome is important to (and why), what would success criteria look like?	
Success criteria	Details
Consumers have a clearer understanding of what nutritional information should be provided	There is a consistent approach to the provision of nutritional information across the UK <ul style="list-style-type: none"> • In food service outlets e.g. restaurants • For food people buy at home
The food industry gets better at providing nutritional advice	The number of food service outlets providing nutritional information is increased in line with FSA targets
The food industry shares insights on how consumers respond to better nutritional information	Development of a model that helps understand what prompts changes in consumer behaviour
Etc.	Etc.

External workshop Day 2: Group Session

Outcome title (hypothetical example: better nutritional information for consumers).....				
Programme brief: what do we need to know and by when?				
<ul style="list-style-type: none"> • Horizon scanning for new issues that may emerge relating to the need for better nutritional information • Literature review on what other countries do about the provision of nutritional information • Prioritise the areas where better information would have the most impact on dietary choices • Etc... 				
Evidence 'map':	Data	Analytical evidence	Evidence from stakeholders/ consumers	Evidence from M&E
What?	Collect data on who provides nutritional information at present	Horizon scanning: what new issues could emerge in future? Literature review of what we know about how consumers respond to nutritional information	Work with small & medium enterprises (SMEs) to understand the cost of providing nutritional information	What initiatives have been trialled in other countries? How cost-effective have they been?
How?	Survey (include industry)	Commission consultant to run horizon scanning workshops Commission academic literature review	Hold 3 regional meetings with SMEs before xx/yy/zzzz	Include this question in the academic literature review
With whom?	Do this ourselves	Go out to tender for both	Branch X to set up meetings	Go out to tender



The Knowledge Sector Initiative (KSI) is a joint program between the governments of Indonesia and Australia that seeks to improve the lives of the Indonesian people through better quality public policies that make better use of research, analysis and evidence.

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