TASO Transforming Access and Student Outcomes in Higher Education

Developing theories of change for whole-provider approaches in higher education: Scoping report

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Table of contents

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1. Introduction

1.1 Project background

In recent years, the concept of taking a whole-provider approach to addressing risks to equality of opportunity in higher education has gained importance. Drawing on a growing recognition that institutional factors play a direct and indirect role in shaping student outcomes (Tinto, 2012; Thomas, 2012; Thomas et al., 2017), the whole-provider approach aims to support students to access, succeed in, and progress from higher education. It does this by aligning institutional policies and engaging stakeholders, from senior leadership to staff and students, around the shared goal of reducing equality gaps for students.

However, in practice, there is variation in how different higher education providers conceptualise and implement a whole-provider approach in their context (Thomas, 2017). This not only raises the question of what constitutes a whole-provider approach, but also how its impact and implementation can be evaluated. This project aims to explore these two questions by capturing the whole-provider approach in a theory of change, which serves as the first step to planning its evaluation.

The increased development and implementation of whole-provider approaches has been driven in part by regulatory requirements set out by the Office for Students (OfS). The OfS requires higher education providers in England to develop access and participation plans (APPs) that set out how they will address inequalities in access, success, and progression for students from underrepresented groups (OfS, 2023a). Since the 2020–21 APP cycle, providers have been required to include a section on their whole-provider approach to access and participation.

The latest APP guidance (published March 2023) advises providers that a whole-provider approach should promote 'alignment and consistency across the organisation to create an approach from which all students benefit, irrespective of where they are located within the provider' (OfS, 2023b). While the OfS suggests some key features of whole-provider approaches in its APP guidance (OfS, 2023c), in practice higher education providers vary in both how they define their approach conceptually and how it is implemented. This includes variation in the extent to which a strategic commitment translates to on-the-ground implementation, and whether the institution's wider work and policies align with or undermine the commitments made in the APP to widen access and improve the success and progression of students from targeted groups.

1.2 Project aims

This project seeks to capture how the whole-provider approach is conceptualised, developed, delivered, and evaluated at higher education providers in England. It builds on previous research on whole-provider approaches by adopting a theory of change framework to identify the key components and intended impacts of the approach. The overarching aim is to build a more comprehensive understanding of the range of whole-provider approaches adopted by the sector. Using a case study approach, we worked with six higher education providers in England to develop theories of change for their approaches.

A theory of change framework was intentionally chosen to capture how whole-provider approaches are implemented on the ground by identifying component activities, and to explore the outcomes and impacts an approach is intended to achieve. Importantly, by making the intended outcomes explicit and exploring the causal pathways through which the approach is expected to lead to change, this work also lays the foundations for moving towards further evaluating how and whether whole-provider approaches change outcomes in practice, across different contexts, and how they might be improved.

Creating a theory of change for whole-provider approaches therefore has the potential to serve two purposes: it increases conceptual clarity by defining the key activities included in an approach and how they are expected to lead to change; and informs evaluation planning.

The remainder of this report builds on previous research by Thomas (2024) and TASO's work with the six partner providers. It is structured as follows: Section 2 outlines the rationale for adopting a whole-provider approach; Section 3 conceptualises whole-provider approaches within a theory of change framework; Section 4 reflects on evaluation; and Section 5 concludes with key findings and recommendations.

For more information about the provider case studies and their whole-provider approach theories of change, please see the accompanying case studies report.

2. Rationale for adopting a whole-provider approach

The rationale for adopting a whole-provider approach is that aligning institutional policies and engaging stakeholders on the shared goal of promoting equality of opportunity for underrepresented groups in higher education will drive change more effectively than

delivering individual or isolated interventions. There are five key reasons for adopting a whole-provider approach.

1. **Supporting organisational alignment**

Adopting a whole-provider approach promotes shared strategic objectives and common language around equality of opportunity and inclusion. This is reflected in and strengthened by broader institutional strategies related to equality, diversity and inclusion (EDI). The whole-provider approach supports the communication of and engagement in organisational missions and strategies, by enabling staff and stakeholders to relate and align their work to a broader institutional mission of reducing equality gaps. This facilitates planning of student-facing activities, reduces duplication, and enables the pooling of expertise and resources across a provider.

The whole-provider approach may also strengthen internal legitimacy for equality-focused work by clarifying roles and accountability structures (Thomas, 2017). One example is where providers develop EDI strategies that are monitored in governance systems and provide resources for delivery staff to embed EDI principles in their practice, which may also prompt critical review and reform of strategy and governance. Embedding equality of opportunity as a goal in both strategy and delivery structures helps to build a collective provider-wide commitment.

2. **Promoting cultural change**

Adopting a whole-provider approach promotes an organisational culture aligned with equality of opportunity from a leadership and strategy level, but also through influencing wider staff practice. A key mechanism here is the cultivation of inclusive practices across all staff, reinforced through visible leadership as well as through peer influence and internal accountability (for example, see Deem et al., 2022).

This reflects the importance of informal organisational norms, behaviours, and routines in sustaining or impeding institutional change. While strategic plans and formal policies are essential, institutional theory emphasises the influence of organisational culture in shaping practice (Kezar and Eckel, 2002; Shaw et al., 2021; Kezar et al., 2025). The whole-provider approach supports cultural change through staff development, student voice, and inclusive practices across the provider. For example, leadership may promote the inclusion of student voice in decision-making, but a real cultural shift in regular student consultation and co-creation emerges from staff across the provider visibly including students and sharing their experiences with each other. These cultural dynamics help to translate strategic intent into embedded, institution-wide practices and norms.

3. **Addressing equality gaps across the student lifecycle**

Adopting a whole-provider approach ensures that efforts to reduce equality gaps in student outcomes span the full student journey, from pre-entry to post-graduation. Students may face barriers in higher education at multiple stages, including pre-entry, transition into higher education, on-course, degree attainment, and in post-graduation outcomes. These barriers impact different student groups in different ways, and may interact to accumulate over time, resulting in unequal opportunities to access, succeed in, and progress from higher education.

A lifecycle perspective calls for initiatives that are longitudinal, cross-cutting, and responsive to students' evolving needs (Kift, 2023). The whole-provider approach aims to address equality gaps across the student lifecycle by supporting the coordination of student-facing services at all phases of the student journey and mitigating reactive or siloed interventions. In practice, this might look like proactively identifying transition points in the student journey where students from different groups face particular challenges, and implementing initiatives to support them. A provider may also put on-course and post-graduation support in place for students who entered the provider through an access initiative, ensuring students do not only 'get in' but also 'get on'.

4. **Enhancing collaboration and coordination**

Adopting a whole-provider approach enhances collaboration and coordination across and within academic and professional services teams that are delivering student-facing support.

Fragmented initiatives, though well-intentioned, may fall short of effectively addressing embedded systemic barriers and can also contribute to a disjointed student experience where students encounter inconsistent support, struggle to navigate institutional systems, and ultimately feel disconnected from their university (Kift, 2009; Thomas, 2017). Increased collaboration between staff therefore contributes to more consistent student-facing support initiatives and can also address implementation challenges, such as limited buy-in and resourcing, which overall contributes to a more positive student experience. Collaboration and coordination may be enhanced by formal structures such as governance and monitoring of interventions across a provider, and less formal structures such as working groups for staff who are addressing similar student challenges across the provider.

5. **More effectively reducing equality gaps**

Taken together, by supporting organisational alignment, promoting cultural change, supporting students across the lifecycle, and enhancing collaboration between staff, the whole-provider approach can support institutions to move towards a collaborative, coordinated approach to reducing equality gaps in higher education. Without a whole-

provider approach, individual initiatives aimed at reducing inequalities may lack the institutional context and support necessary to drive meaningful improvements in student outcomes, or to do so efficiently (Thomas, 2017).

By contrast, a whole-provider approach has the potential to strengthen the impact of individual initiatives, making the approach more effective than the sum of its parts. This means the impact of the approach is not simply equal to the sum of impacts of interventions carried out across a provider, but comes from what might be viewed as a multiplicative effect of initiatives aimed at reducing equality gaps, being delivered in a coordinated manner and amplified by aligning with the wider organisational context.

3. Conceptualising the whole-provider approach

3.1 Defining the scope of a whole-provider approach

Despite a strong theoretical rationale and regulatory incentives for adopting a whole-provider approach, the definition of what constitutes a whole-provider approach in practice remains relatively loose, with ambiguity about what it should capture and how it should be implemented (Maccabe, 2021). This means the whole-provider approach section presented within APPs often references a wide range of activities beyond the APP's core scope.

This risks it becoming a repository for access- and participation-related activities not captured elsewhere, without a clear unifying logic of how the components of the approach work together to widen participation and improve equality of opportunity. Further, the APP's focus on intervention strategies means that existing business-as-usual functions within a provider that may contribute to equality of opportunity, such as wellbeing or careers support, are overlooked. This is particularly relevant for providers with a high proportion of students from groups that are underrepresented in higher education generally, who are more likely to be supporting equality of opportunity through embedded business-as-usual functions, which are less prominent in the APP's intervention strategies.

To bring clarity to the scope of whole-provider approaches, previous research by Thomas (2017) has taken a case study approach to understanding how higher education providers have defined, implemented, and evaluated whole-provider approaches in practice. From these case studies, core and additional features of the approach have been identified (Thomas, 2020). Thomas (2024b) developed this research into a whole-provider approach

toolkit, which supports higher education providers with the conceptualisation, review and planning of their approach.

Thomas's research considers the whole-provider approach not simply as a collection of interventions delivered across the (whole) institution. Rather, it includes activities that purposefully facilitate the 'enabling environment' — the institutional structures, cultures, and leadership commitments that support coordinated and equality-focused practice (Thomas, 2024). A whole-provider approach may therefore include both targeted student-facing interventions and system-level strategies that align services, policies, and staff priorities around equality of opportunity to enable more cohesive support.

Thomas (2024) outlines four core dimensions of the enabling environment for widening access and student success:

1. Institutional commitment: A visible and sustained commitment from institutional and senior leadership to widening access and student success, articulated through strategic priorities and operational practices.
2. Structure and organisation: Alignment of institutional policies, processes and services, which are designed to support all students across the entire lifecycle, aligning cohesively and coherently with widening participation and student success objectives. Communication channels, governance, and operational arrangements are configured to support coordination, accountability, and the effective implementation of access and success initiatives.
3. Organisational culture: Staff across academic and professional services demonstrate awareness, commitment and capability, supported through professional development opportunities. They collaborate across roles and departments to implement inclusive practices and challenge structural inequalities. Students are engaged as partners in shaping, delivering and benefiting from access and success activities. They are equipped with the knowledge, skills, and opportunities to contribute meaningfully to institutional efforts to promote equity and inclusion.
4. Data, evidence, evaluation and learning: The generation and use of high-quality data, evidence and evaluation is embedded in practice and decision-making, informing continuous improvement and institutional learning in relation to access and success.

Taken together, these dimensions reinforce the idea that effectively addressing equality gaps in higher education is not just about the delivery of services and interventions, but about configuring the institutional context to enable and support those efforts. Variation in organisational context means individual providers may exhibit strengths in certain dimensions of the enabling environment, while others remain less mature or developed.

The absence or underdevelopment of multiple areas of the enabling environment poses risks to the feasibility and effectiveness of the whole-provider approach.

One example of how the enabling environment may support or hinder equality of opportunity in practice relates to the delivery of reasonable adjustments for disabled students. A recent report highlights that while higher education providers are meeting their legal responsibilities to provide reasonable adjustments, profound challenges remain in students accessing these adjustments (Borkin et al., 2024). Although there is some support, it is not well coordinated and therefore not accessible or effective. Students often have to resubmit documentation and advocate for themselves across different services.

3.2 Theory of change for whole-provider approaches

We have developed a middle-level theory of change for the overall concept of the whole-provider approach. This was based on the enabling environment dimensions identified by Thomas (2024) and insights from developing theories of change for six institutions' whole-provider approaches.

Like any theory of change, a middle-level theory of change describes how inputs and related activities are expected to produce outputs and outcomes. However, rather than capturing this information for one specific intervention, the middle-level theory of change captures patterns of change that are expected across a broader type of similar interventions, in this case whole-provider approaches (Cartwright, 2020). It therefore has an element of generalisability, as the causal pathways identified in the middle-level theory of change are ones we would expect to find across provider-specific approaches.

This does not mean that all whole-provider approaches will necessarily include these pathways, depending on the areas of focus for a specific provider, or that other causal pathways may not also be relevant. Rather, the middle-level theory of change provides a simplified framework for common components across the sector, that providers can adapt to develop the design, implementation, and evaluation of their institution-specific approaches. Building on previous research on whole-provider approaches, this identifies the intended outcomes and the causal pathways to change, which informs their evaluation.

In this section, we outline the inputs, activities, outcomes and causal pathways included in the middle-level theory of change for whole-provider approaches, based on previous research by Thomas (2017, 2024) and our work with the project partners. The aims and intended impact of the theory of change are outlined in Section 2 and Section 3 above.

Inputs:

The delivery of the whole-provider approach is enabled by the four core dimensions identified in Thomas's (2024) enabling environment framework, as outlined in Section 3.1 above.

In our work with the project partner providers, we identified one additional key input that supports the enabling environment:

- Resources and funding: for implementation, monitoring, and adaptation of access and success initiatives, and maintaining business-as-usual services.

While we have included the above dimensions as 'inputs' in line with our standard approach to theory of change, they could perhaps more accurately be described as the necessary conditions for the delivery of a whole-provider approach. Many of them could also simultaneously be outcomes of the approach, and indeed overlap with the outcomes described below. This reflects the iterative nature of the whole-provider approach, in that the circumstances that help it to succeed are the same circumstances it aims to promote and support.

Activities:

Examples of coordinated activities a provider may include in a whole-provider approach:

- Strategic policy and process reviews: Auditing and reforming policies and interventions to address structural barriers and unintentional biases.
- Staff development initiatives: Delivering professional learning opportunities focused on inclusive practice, structural inequality, and student partnership, and ensuring staff have capacity to engage in these.
- Activities supporting cross-functional collaboration: Supporting joint working activities across departments and services to address the holistic needs of students, such as formalised working groups and informal spaces to share practice.
- Student engagement initiatives: Developing and resourcing student voice and student partnership approaches that inform interventions and foster engagement and belonging among students.
- Reviewing governance structures: Working with senior leaders to identify changes to governance, policies and procedures that are needed to prioritise inclusion and monitor progress.
- Evidence and evaluation initiatives: Embedding consistent evaluation into the design and delivery of interventions, and using data to identify risks, inform service design and improve intervention provision. This also supports the evaluation of the whole-provider approach itself.

For further detail on activities that have been included in whole-provider approaches across the sector, please see the case study report.

Outcomes and causal pathways:

We have identified six causal pathways and related outcomes through which a whole-provider approach is expected to contribute to the long-term impact of reducing equality gaps in higher education:

- **Causal pathway 1: Cultural change through leadership**
  Senior leaders consistently communicate the importance of reducing equality gaps and reflect this in institutional policies, which legitimises and prioritises widening participation work across the institution. This visibility prompts wider engagement from staff and stakeholders and aligns localised interventions with strategic goals.

  Related outcomes:
  - Improved clarity and alignment of roles and responsibilities for reducing equality gaps across the institution.
  - Signs of policy and practice reform.
  - Institutional culture and systems that are inclusive by design, not exception.

- **Causal pathway 2: Cultural change through institutional momentum**
  The whole-provider approach cultivates institutional values that legitimise equality-focused work. As more staff and teams visibly engage with access, success, and progression priorities, a reinforcing cycle of peer influence, internal legitimacy, and cultural momentum is set in motion. This enables more foundational, sustained shifts in institutional priorities, policies, and practices.

  Related outcomes:
  - Increased awareness and engagement among staff with widening access and student success goals.

- **Causal pathway 3: Institutional coherence**
  Cross-departmental collaboration and aligned policies reduce fragmentation and siloed working, ensuring a consistent and supportive experience for students across the lifecycle.

  Related outcomes:
  - Stronger sense of institutional culture of collaboration, reflection, and shared purpose around inclusion.

    - More alignment and consistency in the content, delivery, and evaluation of student-facing initiatives across the lifecycle.

- **Causal pathway 4: Capacity and confidence building**
  Professional development opportunities and shared practice forums equip staff with the skills and confidence to address inequality of opportunity in their everyday work. Over time, this leads to more inclusive teaching and student-facing support practices, ensuring that the impact of strategic policies trickles down to students' experience of higher education.

  Related outcomes:
    - Enhanced staff confidence and capability to act on equality gaps in their own contexts.
    - Increased inclusive practice among staff across the provider.

- **Causal pathway 5: Student-staff partnership**
  Co-created activities and student representation structures include and empower students to influence institutional decision-making, reinforcing trust, student engagement, and relevance of provision, benefiting both students and the provider.

  Related outcomes:
    - More consistent inclusive and student-centred communication and language used across the provider.
    - Improved relationships and trust between staff and students.
    - Improved student belonging, engagement, and satisfaction, especially among underrepresented groups.

- **Causal pathway 6: Evidence-driven improvement**
  Consistent and high-quality evaluation practices and data collection, combined with timely access to monitoring and evaluation findings, enable teams to better identify risks to equality of opportunities and to track progress in addressing them. This creates a feedback loop that enhances the effectiveness of individual services and interventions.

  Related outcomes:
    - Greater use of data and consistent evaluation practices to identify barriers, target interventions, and evaluate effectiveness of interventions.
    - Sustainable, evidence-informed practice embedded across all lifecycle stages and functions.

While we have summarised the outcomes in this report, a provider-specific theory of change may split outcomes into shorter- and longer-term outcomes, to specify the order in which they lead on from each other to achieve the overall impact of improving equality of opportunity in higher education.

Figure 1: Middle-level theory of change for whole-provider approaches

Section	Description
Problem statement	Higher education providers deliver a range of initiatives and provisions to reduce equality gaps in higher education. Delivering these initiatives in isolation with little coordination or alignment risks diminishing their effectiveness. Adopting a whole-provider approach to promoting equality of opportunity helps providers to align institutional policies and engage stakeholders on the shared goal of promoting equality of opportunity for underrepresented groups in higher education, which will drive change more effectively than delivering individual or isolated interventions.
Inputs/ enablers	• Institutional and senior leadership commitment • Structural and organisational alignment • Organisational culture • Data, evidence, evaluation and learning • Resources and funding
Activities	• Strategic policy and process reviews • Staff development initiatives • Activities supporting cross-functional collaboration • Student engagement initiatives • Reviewing governance structures • Evidence and evaluation initiatives
Outcome	• Improved clarity and alignment of roles and responsibilities • Increased awareness and engagement among staff with widening access and student success goals • Increased inclusive, evidence-informed practice among staff across the provider • Institutional culture and systems that are inclusive by design, not exception • Stronger institutional culture of collaboration, reflection, and shared purpose around inclusion • More alignment and consistency in the content, delivery, and evaluation of student-facing interventions across the lifecycle • Improved student belonging, engagement, and satisfaction, especially among underrepresented groups • Greater use of data and consistent evaluation practices
Impact	• All students are supported to succeed across the lifecycle • Inclusive practice is embedded throughout the provider at strategic and individual levels • Reduction in equality gaps
Causal pathways	**1: Cultural change through leadership.** Visible commitment from senior leaders legitimises and prioritises equality-focused work, driving wider engagement and institutional reform. **2: Cultural change through institutional momentum.** Growing staff participation in inclusive practice generates peer influence and cultural momentum, embedding long-term institutional change. **3: Institutional coherence**. Cross-departmental collaboration and policy alignment reduce silos, creating a more consistent and supportive student experience. **4: Capacity and confidence building.** Professional development and knowledge-sharing equip staff with the skills and confidence to address inequality of opportunity in their everyday work, ensuring that the impact of strategic policies trickles down to students' experience of higher education. **5: Student-staff partnership.** Increased student co-creation and representation empower students to shape decisions, which builds trust, belonging, and student-centred provision. **6: Evidence-driven improvement.** Consistent and robust evaluation and data use enable teams to better identify risks to equality of opportunities and to track progress in addressing them, strengthening interventions and embedding evidence-informed practice.

4. Evaluation and the whole-provider approach

In the sections above, this report has focused on the first aim of this project: conceptualising the whole-provider approach within a theory of change framework. We now turn to the second aim: considering how higher education providers might approach evaluation. There are two key dimensions to this question: evaluation as part of the whole-provider approach and evaluating the whole-provider approach itself.

4.1 Evaluation as part of the whole-provider approach

Consistent evaluation and effective use of data are key aspects of a whole-provider approach, as identified in Thomas's (2024) dimensions of the enabling environment and in causal pathway 6 of the middle-level theory outlined above. The cultural change and increased institutional coherence facilitated by the whole provider approach support a more consistent approach to evaluation across a provider, as well as a coordinated approach to data collection. The importance of using evaluation and data to understand what works is reflected in regulatory guidance that requires higher education providers to evaluate the interventions in their APPs (OfS, 2023b).

To improve equality of outcomes, there needs to be effective use and interpretation of data. This requires clarity around evaluation and data collection responsibilities, and an iterative cycle of implementation, evaluation, and adjustment of practice.

Institutionally, this approach might mean standardising evaluation planning across the provider and publishing shared data dashboards so that all staff working with students can monitor outcomes. This is supported by professional development for staff and the involvement of students as evaluation participants and co-creators. While evidence-driven improvement forms its own causal pathway in the theory of change, the effective generation, dissemination, and learning from evidence is underpinned by the other causal pathways.

In practice, higher education providers face a range of challenges to implementing consistent evaluation and data use across an institution. These barriers include lack of buy-in, lack of expertise, resource, and capacity among staff to conduct high-quality evaluations and make use of findings, and lack of the necessary digital infrastructure to effectively share student data across the provider. Even when evaluations take place,

their results are frequently not applied, limiting opportunities for practice improvement. Taking a whole-provider approach to evaluation can help providers to address some of these challenges and promote greater consistency of evaluation practice.

4.2 Evaluating the whole-provider approach

The second dimension of evaluation within the whole-provider approach is the evaluation of both its implementation and impact.

4.2.1 Challenges in evaluating whole-provider approaches

While the whole-provider approach has been conceptualised in previous research (Thomas, 2017 & 2024) and in OfS guidance (OfS, 2023c), how it could be evaluated remains underexplored. As with all initiatives aimed at addressing equality gaps in higher education, it is important to be able to assess not only the impact of the approach, but also how it works, for whom, in what context. However, evaluating such approaches presents several challenges.

Evaluating the whole approach

Higher education providers are likely to be evaluating (or have plans to evaluate) the more tangible activities of the whole-provider approach identified in the theory of change, such as targeted student-facing interventions. However, simply summarising the impacts of these interventions risks overlooking the anticipated benefits of embedding and coordinating all the components of an approach across an institution, as opposed to simply delivering standalone interventions.

In particular, this limits the evaluation of wider institutional changes that are also part of the whole-provider approach, such as shifts in institutional culture and the role of leadership in promoting and legitimising equality-related practice. These structural and cultural provider-wide outcomes are often less tangible and harder to measure or track in practice than gaps in student outcomes. But they are an important aspect of how a whole-provider approach is expected to widen participation and reduce equality gaps, beyond the collection of standalone initiatives. A challenge for evaluation is therefore to go beyond establishing the impact of individual components of the whole-provider approach, and to measure the aggregated impact as part of a coordinated approach. In practice, this is likely to require a high level of resourcing and expertise.

Incompatibility with impact evaluation methods

A second challenge is the incompatibility of the whole-provider approach with more robust quantitative impact evaluation methods, such as randomised controlled trials or quasi-experimental designs. These methods rely on establishing a counterfactual where the intervention – or elements of it, in this case the whole-provider approach – did not occur, while other influences remain as similar as possible. Outcomes and impacts can then be compared between the intervention and this counterfactual.

As the whole-provider approach is designed to be embedded in policy and practice across a whole provider simultaneously, it is not possible to isolate or compare the effects of specific aspects. When using only randomised controlled trials or quasi-experimental designs, a provider will struggle to identify if one aspect of their approach is particularly effective and disguising the potential ineffectiveness or negative impact of other aspects, and vice versa.

Comparison across providers

Third, comparing the effectiveness of whole-provider approaches across institutions is challenging. While the broad aims of a whole-provider approach may be similar, the implementation of specific activities is likely to be highly influenced by a provider's context. This also has implications for the generalisability of implementation and process evaluation frameworks for whole-provider approaches. Although a provider could feasibly evaluate the implementation of their approach, this may not translate seamlessly to another provider.

4.2.2 Considerations for evaluating whole-provider approaches

While it is out of the scope of this project to develop a full evaluation framework for whole-provider approaches, we outline some general considerations for their evaluation in this section. Evaluating whole-provider approaches is complex, due to the number of interacting elements included in them, the number and variability of outcomes and stakeholders impacted, and the degree of flexibility in their implementation. All these different elements need to be considered when designing a robust evaluation methodology.

Acknowledging complexity in theory of change

The development of theories of change for whole-provider approaches provides an initial basis for evaluation, by identifying the impacts, outcomes, and causal pathways whose success an evaluation would aim to measure. However, the complexity of the approach requires complexity in theory of change design.

While theories of change provide a useful framework, in their more basic form they risk providing a limited overview of linear chains of cause and effect, omitting the complex interactions at play within a whole-provider approach (Abercrombie et al., 2018). It is therefore key to take into account the wider context of the provider, identify potential feedback loops within the theory of change, and draw out the assumptions and risks underpinning the approach (Boswell, 2025).

This may be supported by adopting a 'systems thinking' approach to theory of change development (Abercrombie et al., 2018), which highlights the interrelated factors within a system such as a higher education provider, where activities and outcomes influence each other through circular loops rather than linear pathways. TASO's Enhanced Theory of Change resources can support providers to explore more complex, non-linear pathways to impact.

Taking a flexible approach

Evaluations of whole-provider approaches therefore need to not only focus on linear routes of cause and effect, but also on the wider context, and the reciprocal influences they may have on each other. This requires flexibility in evaluation and remaining open and responsive to new findings, requirements, or issues, looking at the entire range of changes triggered by a whole-provider approach (Hummelbrunner, 2011).

The evaluation of a whole-provider approach may therefore not focus only on indicators of success, but also on assessing the patterns and trajectories of different aspects of the approach that contribute to its long-term aim over time (Rogers, 2024).

As a starting point, practitioners can evaluate key components of the whole-provider approach and use the findings to inform and adjust their delivery. For example, an evaluation could assess whether staff development initiatives impacted staff practice and in turn, student outcomes over the course of a year. In the long term, the evaluation approach should consider how components of the approach interact and what impact they have on reducing equality gaps collectively.

Adopting realistic timeframes

Unlike the evaluation of singular interventions, which can be time-bound to a delivery timeframe, the timing of the evaluation of a whole-provider approach is likely to be more open-ended. While shorter-term outcomes of a whole-provider approach can be identified, such as improved alignment of student-facing interventions and increased staff awareness of widening access and student success goals, a successful approach will continue to develop and evolve over many years.

Taking a whole-provider approach involves long-term planning, and shifts in organisational structure, culture, and practice will be subject to contextual factors and other priorities. Evaluations of whole-provider approaches will therefore be ongoing and require a realistic view of change.

Combining methods

The complex nature of a whole-provider approach means it is unlikely to be evaluable in its entirety using one evaluation method. Rather, elements from different evaluation approaches can be used to build a picture of how and whether the whole-provider approach is leading to its intended impact of improving equality in higher education.

Adopting a 'methodological bricolage' approach to evaluation may be helpful here. A bricolage approach intentionally combines and adapts evaluation methods and analysis approaches to suit the specific context of the evaluation (Aston & Apgar, 2022). Bricolage evaluation designs are particularly helpful for evaluating complex initiatives, as they account for the role of context and support iterative learning from evaluation as change happens.

Implementation and process evaluation approaches can be used to understand how a whole-provider approach is put into practice, how it operates to achieve its intended outcomes, and the factors that influence these processes (TASO, 2024). For example, this could include capturing the experiences and perceptions of stakeholders involved. This may look like measuring students' perceptions of how much their opinions are included in institutional decision-making, if this is one of the causal pathways identified in the theory of change. Tracking the implementation of the whole-provider approach may also be supported through existing monitoring resources, such as the 'Self-assessment of WPA tool' developed by Thomas (2024).

Theory-based evaluation methods may also support the evaluation of whole-provider approaches. Building on a robust theory of change, theory-based methods investigate impacts by exploring the causal pathways thought to bring about change and alternative explanations to potential outcomes (HM Treasury, 2020, p. 43).

Theory-based evaluation approaches are suited to evaluating complex programmes implemented within multifaceted systems, such as higher education providers, where the relationship between the intervention and the outcome is not straightforward (TASO, 2022). They aim to explore whether an intervention contributed to a change, rather than establishing whether the entirety of the change is due to the intervention.

In the context of whole-provider approaches, theory-based evaluation methods may therefore be suitable for exploring the contributions of the causal pathways to the overall impact of the approach, while being flexible enough to account for the interaction between pathways and the role of wider contextual influences. Alternatively, outcome harvesting can be used to work backwards from outcomes related to the whole-provider approach. Outcome harvesting establishes the source of changes in behaviours, activities, or practices of individuals or groups, and whether these align with or add to the proposed causal pathways.

Finally, systems-change approaches to evaluation may support the evaluation of whole-provider approaches. More commonly used in the field of international development, systems-change approaches acknowledge the complexity of interventions that contain many different elements (for example, activities, stakeholders, influencing factors) which are linked and influence each other, often with unforeseeable consequences.

In contexts where the presence of different elements leads to uncertainty, the relationships between cause and effect are influenced by the context, and there are alternative routes to achieve effects – good practices can be identified and tested, but answers require careful analysis, coordination and expert knowledge (Hummelbrunner, 2011). While a full exploration of the application of systems-change evaluation to whole-provider approaches lies outside of the scope of this report, principles from systems change are likely to be applicable in future research.

While these methods (and others) may help to evaluate components of the whole-provider approach, it is important that results of individual component evaluations are not considered in isolation, nor simply summarised as a measure of the effectiveness of the approach. Rather, a full evaluation of a whole-provider approach must take into consideration the influence and interaction of its components. Evaluating the overall impact will therefore require careful and considered synthesis of findings from across the provider over time, and the necessary time, expertise, and resources to carry this out.

Given the practical constraints to evaluation within the higher education sector, including access to expertise and limited capacity, a starting point for evaluation is to monitor and evaluate one component or causal pathway of the whole-provider approach first, while considering its interaction with the wider provider context.

5. Conclusions and recommendations

5.1 Key findings

In this report, we have proposed an updated conceptualisation of a whole-provider approach to reducing equality gaps in higher education, building on previous research conducted by Thomas (2017, 2024). This includes a rationale for adopting a whole-provider approach and a proposed theory of change for whole-provider approaches.

Overall, a whole-provider approach aligns policies, structures and stakeholders around the shared goal of promoting equality for underrepresented groups to access, succeed in and progress from higher education. The approach encompasses senior leadership, staff, students, teaching, support and the wider student experience.

It does this by creating cultural change through leadership and shared institutional values, promoting institutional coherence of aims, organisation, and practice, building capability and confidence in staff, centring student voice and participation and facilitating evidence-driven improvement. The whole-provider approach therefore spans functions, most commonly governance and strategy, learning and teaching, student support and engagement, widening participation, and data and evaluation.

Creating a theory of change for whole-provider approaches gives a starting point for evaluating their impact on reducing quality gaps in higher education, by identifying the causal pathways through which the approach leads to change. However, the complexity and overarching nature of the whole-provider approach make it challenging to evaluate in its entirety in practice, which is reflected in the lack of evaluative efforts in the sector.

The benefit of a whole-provider approach to addressing equality gaps does not merely emerge from the sum of its component activities. It also arises from the collective effect of coordinated interventions delivered in the context of a provider that prioritises equal access to opportunities in leadership, policy and organisational matters, staff practice, and the student experience.

Evaluations of whole-provider approaches therefore must be flexible and account for the complexity and breadth of the approach at all points of the process, from developing a theory of change to choosing and combining evaluation methods, to synthesising findings. In practice, a full-scale evaluation of a whole provider-approach requires a high level of resource and expertise. Providers may therefore be better placed to evaluate individual causal pathways of the approach initially, while considering their interaction with the wider provider context.

5.2 Recommendations

5.2.1 Developing and evaluating whole-provider approaches

1. **Clearly conceptualise the whole-provider approach:** Higher education providers should develop clear conceptualisations of their whole-provider approach and reflect this in their APPs. In particular, whole-provider approaches should not be a collection of individual and possibly unrelated interventions, but show how policies, initiatives, and culture are aligned to widen participation and promote equality of opportunity for all students across a provider. Differentiating between student-facing initiatives, institution-level change, and business-as-usual activities can help providers to identify relevant components of their approach. The articulation of whole-provider approaches should be supported by clearer guidance on what should be included in the whole-provider approach section of the APP.

2. **Consider using a theory of change:** Using a theory of change framework can help providers to identify key areas of focus in their whole-provider approach, the outcomes that each element of the approach and the approach overall hope to achieve, and the causal pathways through which changes are expected to come about. This facilitates the development of a coherent approach that works towards an agreed aim and forms the basis of evaluation planning. For practical recommendations on developing theories of change for whole-provider approaches, see the case study report.

3. **Identify strengths and areas for development:** When developing whole-provider approaches, providers should aim to identify and address specific areas for development in their enabling environment, while also promoting consistency and progress in areas that are already further developed. This applies both to specifically developed interventions and business-as-usual activities. The 'self-assessment of WPA' tool developed by Thomas (2024) can be used to support this process.

4. **Connect initiatives to the whole-provider approach:** When developing and implementing institution-wide and localised initiatives to address inequalities, higher education providers should be clear about what the initiative consists of, how its success will be evaluated, and how it links to the whole-provider approach. This requires clear connections at strategy level between interventions and the whole-provider approach.

5. **Combine methods for effective evaluation:** To evaluate the whole-provider approach in its entirety, a mixed methods approach is likely to be most appropriate. This allows evaluators to select and combine methods flexibly to evaluate different

components over time. Importantly, the evaluation should take into account the influence and interaction of components. In practice, fully evaluating a whole-provider approach requires sustained investment in resourcing and expertise in multiple evaluation approaches and methods, and is therefore likely to require external evaluation support. As a starting point, providers should focus on developing a theory of change to identify key causal pathways, and evaluating individual causal pathways, while considering their connection to the context.

5.2.2 Future research

The findings from this project could be further developed through future research in the following areas:

- Testing and exploring how the conceptualisation and middle-level theory of whole-provider approaches outlined in this report applies to higher education providers across the sector; how this differs across more diverse providers; and how contextual provider-level features influence whole-provider approaches.
- Developing an evaluation framework for whole-provider approaches and testing this in higher education providers. While there is a clear theoretical rationale for adopting whole-provider approaches, evidence on their effectiveness is lacking, so conducting evaluations is important to ensure approaches are achieving the impacts they intend to in the ways that are expected. Conducting pilot evaluations will also generate learnings for evaluating whole-provider approaches across the sector.
- Further exploring how principles of systems-change evaluation and methodological bricolage can support the evaluation of whole-provider approaches and similar multi-intervention or complex interventions, as these allow for the flexibility and complexity required in whole-provider contexts.

5.3 Limitations

The focus of this project was on whole-provider approaches in relation to access, participation, and progression in higher education, reflecting that most higher education providers have articulated their approach in the context of their APP.

However, as noted by project participants, this somewhat limits the scope of the whole-provider approach to focus on practice directly related to student-facing activities and staff, plus supporting functions such as governance processes and evaluation and data usage. As a result, the middle-level theory of change excludes aspects of a provider that are not usually included in the APP's remit but are arguably also relevant to the whole-provider approach, such as a provider's facilities, digital infrastructure, civic engagement, research priorities, and collaboration with other organisations (Blagburn & Graziano,

2025). Future conceptualisations of whole-provider approaches may expand to consider the role of other functions of a provider in supporting equality of opportunity, that aren't directly captured in the APP.

The reflections presented in this report are based in part on our research with six higher education providers, which can be found in the case study report. While our work with the providers generated valuable insights into how whole-provider approaches are being conceptualised and implemented in the sector in practice, we acknowledge that this is a small sample and none of the providers were small or specialist, potentially limiting the generalisability of our findings. Future research may consider how whole-provider approaches differ based on specific provider contexts.

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