A Partnership Model: Co-designing Evaluation with Grantees

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Today’s discussion

Framing: reasons for participatory approaches to evaluation

Examples from two foundations

World Café discussion
Reasons to evaluate

- Describe the program
- Document achievements & progress
- Understand strengths & areas for improvement
- Guide decision making & resource allocation
- Determine effectiveness
Benefits of a participatory approach

1. Creating shared goals & commitment
2. Increasing ownership & shared responsibility
3. Increasing likelihood that results will be used
4. Building capacity
5. Sustaining learning & growth
6. Listening & showing respect for grantee perspective
Tensions funders may experience

Push-pull dynamic

Balancing capacity building & results

Power dynamics

Confusion about expectations
What it takes

- Trust
- Dedicated time
- Facilitation of process
- Shared language & values
- Flexibility
- Responsiveness
- Transparency
- Disseminating results
Guiding Principles

Mission: To address the unmet health care needs of Kentuckians.

Investing in communities.

Informing health policy.
Evaluation integral to Foundation’s work

• Promoting Responsive Health Policy:
  – To make public policy more responsive to the health and health care needs of the people of Kentucky.

• Investing in Kentucky’s Future:
  – To engage communities in testing innovative strategies to improve children’s health

  Kentucky’s Healthy Future Initiative(ended in 2014)
  – To improve the health and access to health care of Kentucky’s low-income, underserved populations.
Evaluation is integral to each initiative…not a barrier to participation

- Initiative & project level
- External evaluator –
  - Skills sharing; developmental approach
- Qualitative and quantitative
- Planning phase for demonstration projects (includes evaluation)
- Evaluation advisory committee (per initiative, with national, regional, and local experts)
- “News you can use”
  - Progress reports inform operations (grantee and Foundation)
  - Final reports inform strategic planning, other funders, public
“The best part of the evaluation is the conversation—among ourselves and also with the evaluation team. It’s great to be treated as a subject rather than simply an object. We operate with a sense that there’s a narrative to change. The conversation helps us tell—and thereby understand—the emerging story.

The perfect example: we were able to name a new forum for consumer advocacy in Kentucky, the tiers of customer service at kynect, Kentucky’s health exchange. We called the advocacy “working the tiers.” Just the fact of naming it helped us alert the entire state legal services community to an opportunity. Keep your enrollers, because they can work the tiers. We’ve also structured our proposals to show how the process “deliverables” build toward policy change. Each proposal is written with an implicit logic model that points beyond process to outcomes: ultimately change not just in policy but in health indicators—and that means people’s lives. We’re thankful that the written template includes room for stories and lessons learned. Telling the story often helps you understand the lesson.”
"By involving all of the major partners in the evaluation plan during the grant writing phase, we were able to really focus on what we wanted at the end of our work. It was challenging to get everyone in the same room, but invaluable to designing the steps. One of Steven Covey’s 7 Habits of Highly Effective People is ‘begin with the end in mind.’ The principle works for communities too.”
“The biggest issue is getting the SEP [sub-grantee evaluation plan] approved. We think it’s a great evaluation plan…but they are still asking for more. *Evaluation has been the worst thing in this whole program.*”

“The two-year *timeline is very aggressive* especially with the evaluation approval process. We’ve been focusing on that and didn’t have time to focus on the program.”

“Had this initially been proposed as an *IRB-approved research* project, we would have changed the way we structured the program—simplified it.”
Lessons we’ve learned so far…

- Don’t assume!
- Create shared understanding: terms and concepts
- Planning phase and evaluation support
- LISTEN to the communities you work with
- Communicate clearly and often
- Evaluation findings → course corrections
Lessons we’ve learned so far…. 

• Be sure your Board is “on board”
• Be humble and willing to learn
• Be aware of the funder-grantee power imbalance
• Equity lens:
  – How does this work confer agency?
  – Strengthen community?
Healthcare Georgia Foundation’s
General Operating Grant Program
Co-Designing Evaluation

- The need for evaluation capacity
- Building it into proposals
- Building it into grants
The ERC: Because Results Matter

The Georgia Evaluation Resource Center offers evaluation tools and services tailored to help nonprofit health organizations achieve better outcomes.
Our commitment to better outcomes

Movement toward performance-based funding + Need for evaluation capacity = Evaluation Resource Center
The Georgia Evaluation Resource Center offers evaluation tools and services tailored to help nonprofit health organizations achieve better outcomes.
ERC Services

- Evaluation Capacity Assessment
- Evaluation Coaching & Technical Assistance
- Learning Community
- Website & Toolkit
- Direct Evaluation Support & Referral Service
General Operating Grant Program

Goals

- Enhance health nonprofit organizational capacity to deliver effective services and programs
- Strengthen and sustain high-impact health programs, services and supports
- Build/Strengthen Georgia’s health professional workforce capacity
Leveling the playing field

- Pre-award assistance with applications (Case Statement, outcomes, evaluation plan)
- Post-award assistance with evaluation plans
### Evaluation Plan – worksheet

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Indicators</th>
<th>Data collection methods</th>
<th>Timeline &amp; person(s) responsible</th>
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| **Example:** Is the program increasing student academic achievement? | a. Students’ increase in both math and language standardized test scores.  
   b. Teachers report increased child participation in classroom and homework. | a. Standardized tests  
   b. Interviews with teachers | a. Data collected every November by teachers, submitted to evaluator for analysis  
   b. Data collected bi-annually (fall & spring) by evaluator |

1.  

2.  

3.
### Healthcare Georgia Foundation General Operating Grant: Evaluation Plan for Physicians’ Care Clinic, Inc.

Please complete the attached evaluation plan, based on your outcomes as submitted in your grant proposal. Submit to Muddy Frey at: info@healthcaregeorgia.org by May 18th, 2015 at 5:00pm.

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Conclusions

- Recognize the power dynamic but still encourage and require evaluation that is meaningful
- Build your own evaluation capacity simultaneously
- Focus on evaluation for IMproving, not just proving
Questions

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