

A Partnership Model: Co-designing Evaluation with Grantees

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Foundation for a Healthy Kentucky

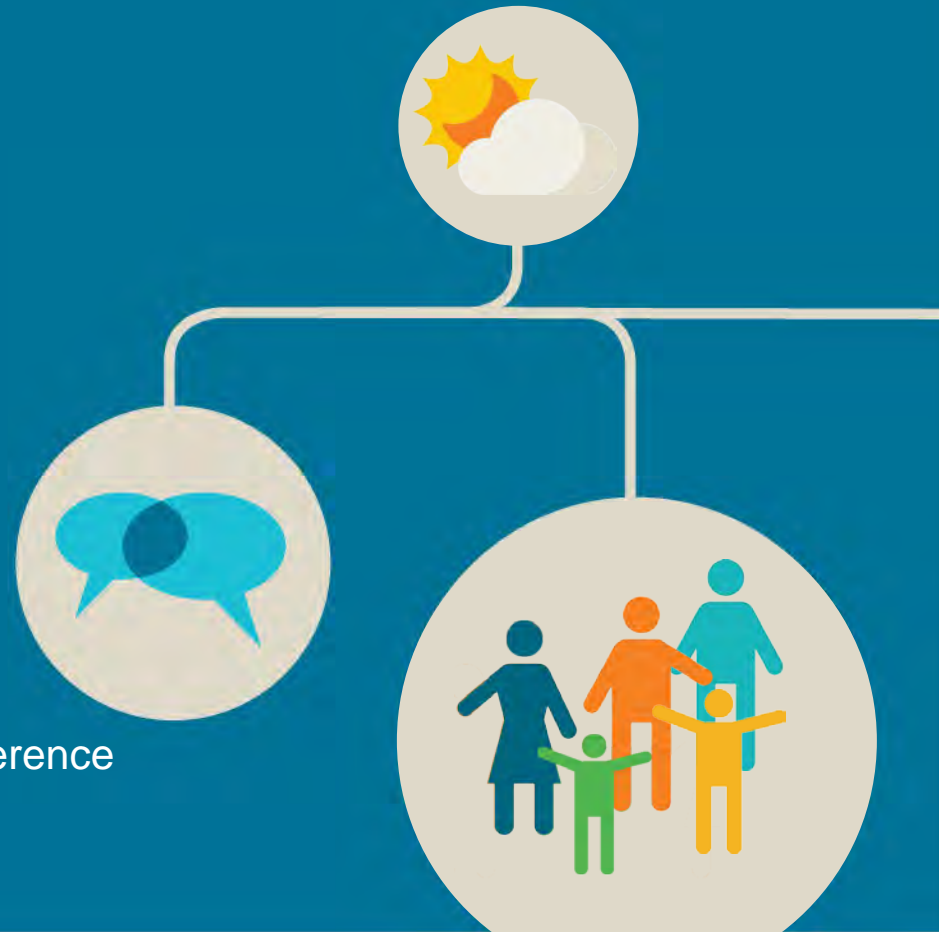
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Evaluation

Grantmakers for Effective Organizations Conference
June 10, 2015





Today's discussion



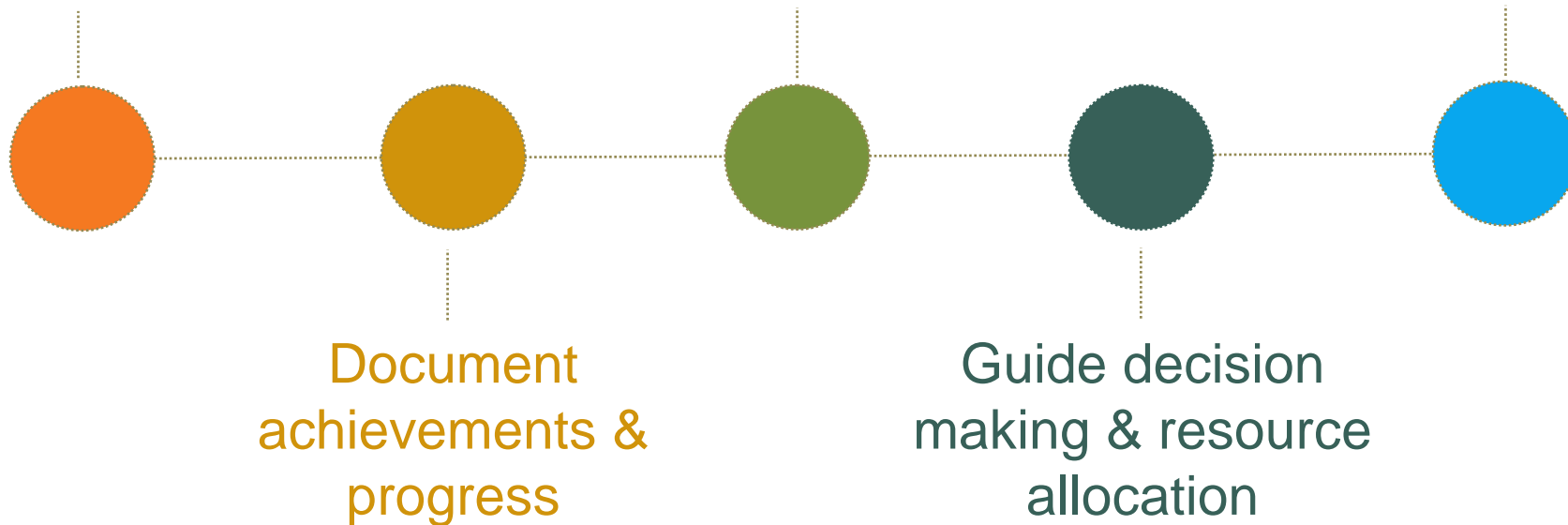


Reasons to evaluate

Describe the
program

Understand
strengths & areas
for improvement

Determine
effectiveness



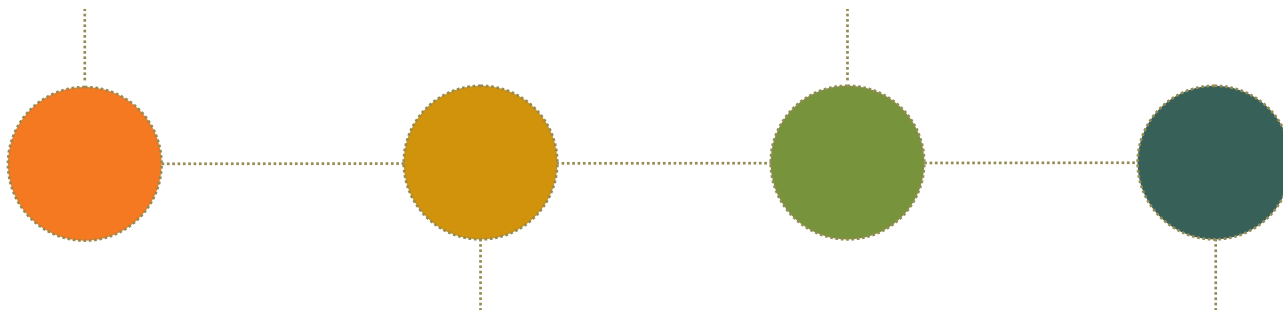
→ Benefits of a participatory approach



Tensions funders may experience

Push-pull dynamic

Power dynamics

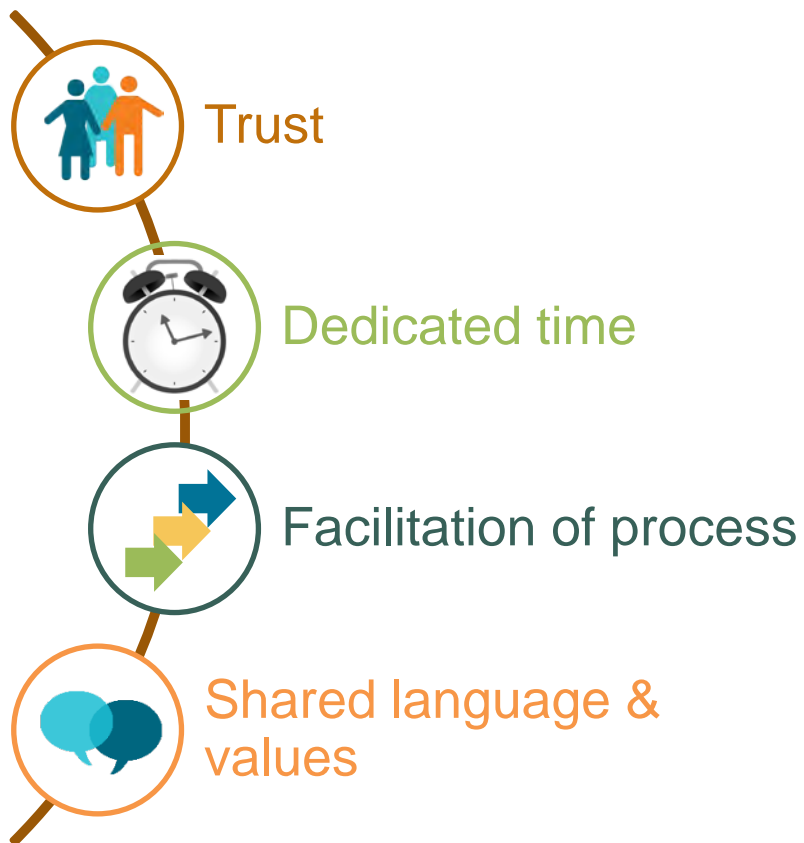


Balancing capacity
building & results

Confusion about
expectations



What it takes





FOUNDATION FOR A
HEALTHY
KENTUCKY



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 at the Foundation for a Healthy Kentucky

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

Promoting Responsive Health Policy

*“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.”*

Investing in Kentucky Future

*"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."*

Kentucky's Healthy Future Initiative

*“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?



Georgia

Evaluation Resource Center

Because results matter.

Healthcare Georgia Foundation
grantmaking for health



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





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

ERC Services

Evaluation Capacity
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Learning Community

Website & Toolkit

Direct Evaluation Support
& Referral Service



Georgia Evaluation Resource Center

Because results matter.

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Healthcare Georgia Foundation's **Evaluation Resource Center (ERC)** offers evaluation tools and services tailored to help nonprofit health organizations achieve better outcomes.

The ERC is directed and funded by Healthcare Georgia Foundation.

WHY EVALUATE?

Healthcare Georgia Foundation believes strongly in the benefits of evaluation: that all organizations should understand their work and why it matters. Evaluation gives health nonprofits the information they need to improve their organizations and programs, ultimately benefitting the individuals, families and communities they serve.

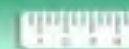
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READY TO GET STARTED?


[USE THE TOOLKIT](#)

THE EVALUATION PROCESS

Getting started is easy. Our Toolkit will help your organization navigate the evaluation process in a clear, chronological way. [Click here to begin.](#)



MEASURE



IMPROVE



COMMUNICATE

Healthcare Georgia Foundation
grantmaking for health


The Georgia Evaluation Resource Center is a service provided by Healthcare Georgia Foundation. For more information, visit www.healthcaregeorgia.org.

Healthcare Georgia Foundation

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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

| Outcome | Indicators | Data collection methods | Timeline & person(s) responsible |
|-------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------|
| Example: Is the program increasing student academic achievement? | a. Students' increase in both and 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 Grants: 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 mfreyl@healthcaregeorgia.org by **May 18th, 2015** at 5:00pm.

| Outcome | Indicators | Data collection methods | Timeline & person(s) responsible |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <i>Example:</i> 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. Structured process in place for ensuring leadership continuity and strategically positioning the organization for success before departure of key individuals. | a. Succession planning consultant hired b. Board self-assessment for readiness / strategies to manage key individual transitions. c. Organization strategy defined. d. Written proactive approach to leadership transition that includes: - clear job descriptions, roles, responsibilities, & skills (both replicated & developed) - aligns with org's mission, vision, values <i>key staff list?</i> <i>Succession plan is plan implemented by...</i> <i>key staff list?</i> <i>Board lead?</i> | a. Consultant search via GCMP b. Board self-assessment c. Interviews between Bd, Adm & Consultant | a. Consultant search/hired by May 2015 & first meeting scheduled - Administrator b. Board assessment document created, submitted to Board by Consultant - July c. Board planning sessions in August & October 2015 d. Transition committee appointed - Board / 8/2015 e. Profile of skills, characteristics needed - Consultant/Board/Adm. 10/2015 f. Plan in place - Jan. 2016 - BOO, Adm, Consultant |
| 2. Improved community awareness as noted by increased patient capacity, volunteers and donor base. | A. Increased new patient applications, increased patient recertifications and number of patients seen. B. Increased volunteer enrollment C. Increasing clinic recognition among donor base. D. Advertising/marketing activities: website enhancements; newspaper articles; professional volunteer recognition on DeCobb Medical electronic newsmag; medical malpractice policy secured | a. Monthly count of patient applic's, recerts, & appts b. Quarterly count of new vol's c. Monthly... | a. Data collection monthly - Adm. b. Website updates PRN - Adm./webmaster c. Volunteer application changes - Adm. d. Participate on DM electronic newsmag committee - Bd, Chair |

Succession plan
Sust.

With time and board
See and understand your role

Improved programs/clinics
(community - transition)

Resource deck?

...include have
...include have

...get out of the...
...get out of the...

...the most important...
...the most important...

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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