ROMA GUIDE

Table of Contents

	Page
Acknowledgements	i
Introduction	ii
Section 1 – Background	1-1
Monitoring and Assessment Task Force	1-2
Six National Goals	1-2
Frequently Asked Questions (FAQ)	1-5
Section 2 – The National Goals and Measures	2-1
Working with Goals and Measures	2-2
Exploring Ways to Use Goals and Measures	2-4
Standardization vs. Flexibility	2-11
Louisiana	2-9
Oregon	2-11
New York	2-12
South Dakota	2-12
Section 3 - Planning - A Key Factor	3-1
Making a Plan	3-2
Agency Barriers	3-6
Task Force Recommendations	3-8

ROMA GUIDE

Table of Contents

	Page
Acknowledgements	i
Introduction	ii
Section 1 – Background	1-1
Monitoring and Assessment Task Force	1-2
Six National Goals	1-2
Frequently Asked Questions (FAQ)	1-5
Section 2 – The National Goals and Measures	2-1
Working with Goals and Measures	2-2
Exploring Ways to Use Goals and Measures	2-4
Standardization vs. Flexibility	2-11
Louisiana	2-9
Oregon	2-11
New York	2-12
South Dakota	2-12
Section 3 - Planning - A Key Factor	3-1
Making a Plan	3-2
Agency Barriers	3-6
Task Force Recommendations	3-8

Section 4 - Developing and Working with Scales 4-1

What is a Scale? 4-2
Why Use Scales? 4-2
How Can CAAs Use Scales? 4-3
Family, Agency, and Community Scales 4-4
Kansas 4-5
California 4-7
Illinois 4-8

Section 5 - Developing Effective Surveys 5-1

Surveying Community Services Program Clients 5-2
Measuring Client Input 5-2
Guidelines for Client Surveys 5-4
Pseudo Surveys 5-6
Examples of Loaded Survey Questions 5-11
Minimal Disclosure Standards 5-18

Section 6 - Return on Investment 6-1

What is Return on Investment? 6-2
Why Use Return on Investment? 6-2
Missouri 6-5

Section 7 - Technical Assistance and Reporting 7-1

Measuring the Status of ROMA Implementation 7-2
Training and Technical Assistance 7-4
Best Practices for Implementation 7-5

Section 8 - ROMA...Beyond The Basics 8-1

Training Text 8-26
Paper Copy of Slides 8-26

Appendix 1	MATF Committees & Membership
Appendix 2	Sample Application - Louisiana
Appendix 3	A) CA Assessment Tool B) Lexicon: ROMA Terms
Appendix 4	A) CS Document B) IL Scales C) KS Partnership Scale
Appendix 5	Iowa's Survey Instrument
Appendix 6	VA ROI Report
Appendix 7	A) PA Example Section O B) TA Grant Summaries C) Resource Lists

ACKNOWLEDGEMENTS

Five years ago, we in the Community Services Block Grant network started an initiative to become more results-oriented. We began by identifying a menu of results, and then we explored strategies for working together to achieve these results. We have reached agreement on our national goals, and on ways to operate as a network.

Partnership and flexibility are the keys to successfully implementing the results-oriented management accountability approach (ROMA) which we have adopted. Over the last five years, we have made tremendous progress, as you will see from the many examples of local and State efforts contained in this guide. The national goals, which we have established, provide a framework for all the activities throughout the program. Within the results framework, local agencies have the flexibility to choose the specific objectives they will work to achieve.

Finally, the Office of Community Services wishes to express appreciation to Eleanor Hunnemann and Lorraine Daniels whose vision and persistence made this *Guide* a reality. This office also wishes to acknowledge and thank the members of the Monitoring and Assessment Task Force (MATF) and its subcommittees – particularly the Scales and Ladders Committee for the development and implementation of this initiative. Their leadership, dedication, hard work and willingness to experiment have made it all possible.

Donald Sykes
Director
Office of Community Services

The Monitoring and Assessment Task Force (MATF) acknowledges and thanks those who contributed to the production of the Community Services Network's first Results Oriented and Management and Accountability Guide (ROMA Guide). The volunteer hours, expertise and labor devoted to this project exemplify multi-level collaboration at its best. Local CAAs, state and national associations, and federal state offices around the nation that provided the information and guidance needed to compile this important document, which will serve as a handy quick-reference tool for staff and administrators.

MATF also thanks the Federal Office of Community Services, the National Association for State Community Services Programs, the National Community Action Association and the National Community Action Foundation for recognizing the need to share resources and commitments to accomplish this task.

Task Force members give special thanks to those states that provided content materials to support the framework of the Guide. These include CAAs and State CSBG Offices in California, Illinois, Iowa, Kansas, Kentucky, Louisiana, Missouri, New York, Oregon, Pennsylvania, South Dakota and Virginia. As CAAs continue developing capacity for managing for results and accountability, we invite other states to contribute to future updates of the ROMA Guide.

Finally, the MATF acknowledges and thanks the individuals, families and communities we serve for sharing their life experiences, challenges and victories. Without them, we would have no story to tell.

Members of the Monitoring and Assessment Task Force
April, 1999

INTRODUCTION

Times are changing and Federal, state, and local agencies are being asked to do more with less. To compete successfully for declining resources, agencies must be able to demonstrate that they can deliver the greatest impact for the least cost. This **Results Oriented Management and Accountability Guide** attempts to pull together the concepts, framework, and examples of tools developed thus far, to assist agencies in meeting the challenges of becoming more results oriented.

As government becomes increasingly customer oriented, Americans are more interested in the benefits they receive for their investment of tax dollars, and in some cases, the benefit to those receiving services. With regards to providing services and programs directed at low-income people, the question is not how much we spend on programs, but how we help them become more self-sufficient. Low-income people want to be part of thriving communities of which they may be proud.

This cannot be accomplished by a single agency, state, or Federal program working in a vacuum. Partnerships are needed that share commitments and contribute to benefit the customer. For community action, this means working with a Community Services Network of caring people and agencies that is dedicated to helping low-income people. To be successful, members of such a Network must plan together, share commitments, accomplish common goals, and provide one another with the greatest amount of capacity and flexibility to do their job well.

The Community Services Network is in the process of addressing these issues. This initiative is called **ROMA—Results Oriented Management and Accountability** — and this Guide will help your agency implement a results-oriented approach. Since ROMA is a continuous process of improvement, it is anticipated that sections will be added and updated. The **ROMA Guide** provides examples of some basic tools and direction for Community Action Agencies (CAAs) and other members of the Network to use as they journey toward full implementation of ROMA.

SECTION 1—BACKGROUND

In This Section

You will gain a better understanding of the origins of ROMA and the composition and purpose of the Monitoring and Assessment Task Force. As ROMA is introduced, a framework for the concepts and tools that comprise ROMA is established along with an explanation of how the pieces fit together. The most frequently asked questions about ROMA are answered.

Three important management concepts are gaining prominence and affecting the way public programs conduct their services. These are:

1. Managing for results;
2. Involving customers; and
3. Empowering personnel and partners.

For decades through "maximum feasible participation," the network of community action agencies has believed in and practiced customer involvement and empowered staff and partners. The network has also strongly believed in achieving results. Therefore, these management concepts are not *new* to community action. They are, however, continuously ready for refinement and repackaging.

Recognizing this, Donald Sykes, the Director of the Office of Community Services (OCS), in consultation with many key leaders of the Community Services Network, chartered the Community Services Block Grant (CSBG) Monitoring and Assessment Task Force in August 1994. (Figure 1-A.) The Task Force was established:

1. To enhance and improve program performance of the network of community action agencies and states toward better outcomes for low-income individuals, families and communities; and
2. To improve how we "*tell our story.*"

Using a partnership approach to the administration of the community services program, a strategy for developing plans and techniques that focus on a performance-based model for management is being called . . . **ROMA—Results Oriented Management and Accountability.**

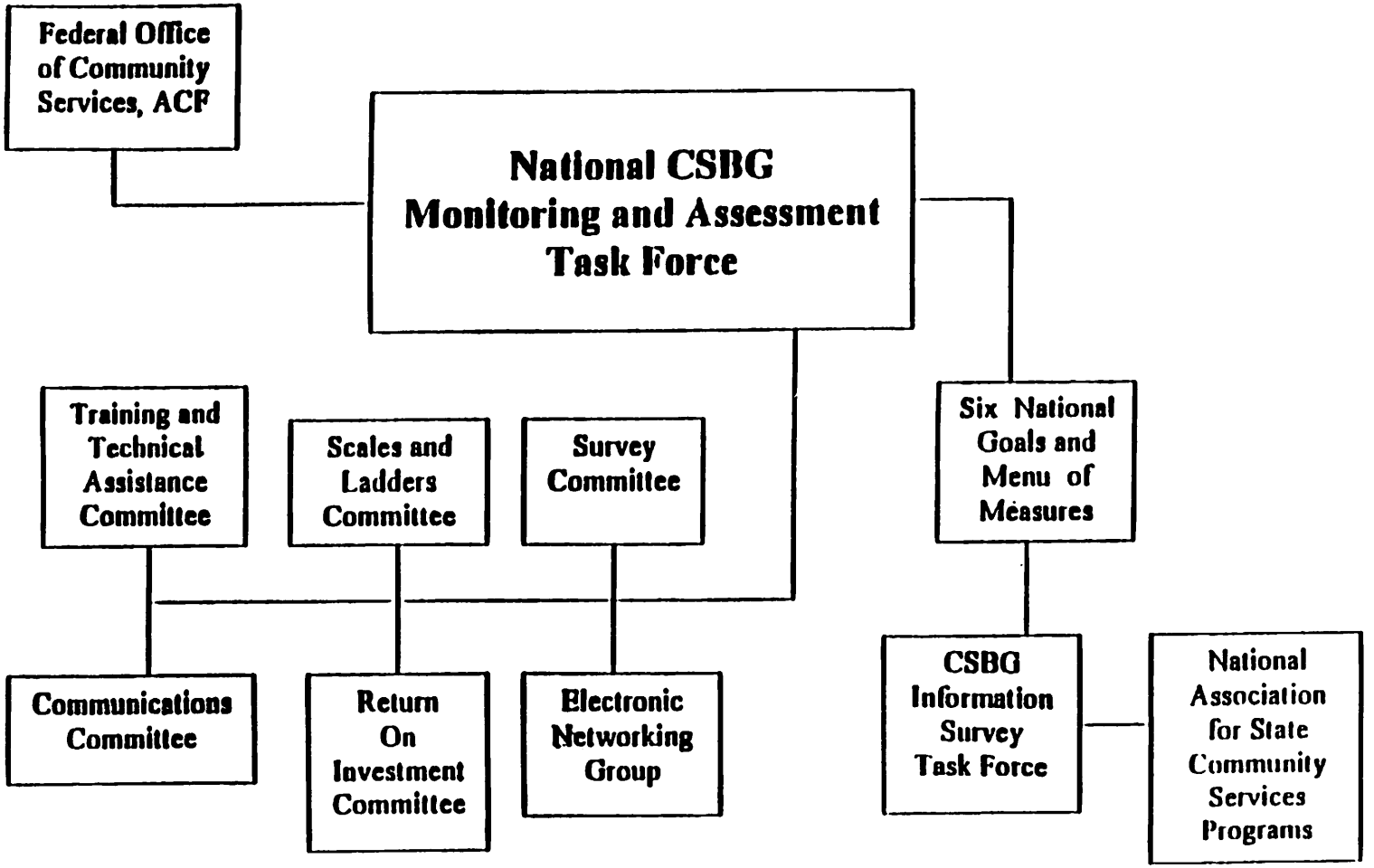
The Monitoring and Assessment Task Force is comprised of representatives from local CAAs and CSBG state offices, the national associations, and Federal staff from the Office of Community Services and the Head Start Bureau. (**Appendix 1** lists the MATF committee and subcommittee members.) During its deliberations, the Task Force discovered that an outcome oriented approach to monitoring and assessment must begin with a clear statement of the goals for the program that guide the selection of the most appropriate indicators of its success. This approach provides the framework for the recommendations in this **ROMA Guide.** The goals, which are intentionally broad to enable their use to tell the entire community services story, are as follows:

1. **Low-income people become more self-sufficient;**
2. **The conditions in which low-income people live are improved;**
3. **Low-income people own a stake in their community;**
4. **Partnerships among supporters and providers of services to low-income people are achieved;**
5. **Agencies increase their capacity to achieve results; and**
6. **Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive systems.**

To support these six goals, a menu of measures from which local agencies may choose to report on their outcomes was developed. **Section 2** discusses these goals and measures. Some of the measures are **direct** and derive their data from direct data sources and others are **survey** measures and derive their data from the use of survey methodology. In **Section 4**, *scaling* is presented as a method that can help local agencies define and measure progress toward self-sufficiency.

CHART

Organizational Structure of the Monitoring and Assessment Task Force (MATF)



Inasmuch as the Community Services Network exists to provide solutions for clients, it is imperative to gather input on client needs and status and to use this information in planning and assessing agency operations. The Task Force has included survey measures for use by local agencies that survey their clients and report on certain indicators related to the established program goals. The Task Force feels that a survey is a useful tool that may reap many benefits and has included information about surveying techniques in this Guide. **Section 5** will aid local agencies to eventually initiate a survey or incorporate appropriate questions in a survey approach already underway. Materials in **Section 5** will also help agencies fit a sound survey methodology with other techniques local agencies may already be using to gather client input, such as focus groups, national dialogues, and community town meetings.

Strong, active partnerships within the Community Services Network are essential to improve outcomes, to *"tell the story"* and to address a key goal (**Goal 4—Partnerships Among Supporters and Providers of Services to Low-Income People Are Achieved**). The Task Force supports the development of a limited-focused survey of Network partners to measure the "health" of such partnerships. The Office of Community Services is developing a simple, brief survey. Under the planned approach, a partnership survey will be sent to Federal, state, and local agency partners to assess satisfaction and responsiveness. Survey information from individuals will remain anonymous and confidential. The objective is to develop summary national information that describes overall partner satisfaction with the partnership and partners' rating of the responsiveness of training and technical assistance to CAA, state, and other agency needs.

ROMA requires that measures of program success be targeted to the performance of the Community Services program in its broadest terms. Therefore, the term **Community Services Network** has been chosen to describe the combination of community-based programs, partnership, activities, and services that:

1. **Promote self-sufficiency and vibrant, healthy communities for low-income people;**
2. **Are provided by Community Action Agencies or other agencies eligible for funding under the Community Services Block Grants; and**
3. **Address one or more of the national goals of the Community Services Network.**

Membership in the **Network** is not limited to services that are funded only by CSBG. The overall performance of the Network is the subject of the **Task Force recommendations on outcome oriented monitoring and assessment.**

ROMA emphasizes that each state engage in its own strategic planning process to address how it will contribute to the accomplishment of the national goals as well as to the specific objectives unique to the state.

The Task Force recognizes that local agencies have limited control over the eventual progress achieved under many of these measures because of external factors, including a multitude of other service providers that also influence the lives and well-being of low-income people. ROMA emphasizes the use of outcome oriented measures because these measures provide the clearest picture of how the Network is affecting the lives of the people and communities it serves. The measures also help us "tell our story." Therefore, an important consideration in "telling our story" will be to identify this control issue and to attempt to understand how various external factors affect the proposed measures.

FIGURE 1-B

Most Frequently Asked Questions About ROMA

What is ROMA?	A framework for marrying traditional management functions with the new focus on accountability . . . it is the common language for local agencies to use to respond to the Government Performance and Results Act of 1993 (which requires that federally funded programs demonstrate measurable outcomes).
Is ROMA specific to the Community Services Block Grant (CSBG), or can I use ROMA with other funding sources, too?	While the six National Goals relate specifically to the CSBG legislation, the concepts, organizing framework, definitions, and tools of ROMA can be readily used for many funding sources.
What does OCS want?	The Office of Community Services wants states and local agencies to increase their capacity to function in a results-oriented environment in order to comply with GPRA.
Why doesn't OCS just tell us what to do?	OCS respects the complexity of the Community Services Network, and understands that a one-size ROMA process does not fit all local needs, priorities, and variations in local agency operation.
What does the report form look like?	The CSBG Information Systems Task Force designed "Section O" of the annual NASCSP Information Systems Survey to collect outcome information. A draft, containing the six National Goals, was released to local agencies at the National Association of Community Action Agencies' Annual Conference in Nashville, September 1997.
How am I going to pay for all of this?	Measuring outcomes does not need to be expensive. ROMA represents a framework containing many options for selecting specific outcomes and measuring actual results. Agencies should pick and choose the specific parts of ROMA that are appropriate for them.
How am I going to track all those emergency service clients to find out what happens to them?	Agencies are encouraged to select outcomes and measuring systems that are appropriate to the agency's current and emerging capacities. Agencies are encouraged to explore best practices internal and external to the network as they design sampling formulas and inter-agency data sharing techniques for highly mobile emergency service clients.

It is important to link background information and the general conditions of poverty to the local planning and assessment process and the reporting of results. While this type of background information should not be used as core performance measures since it is significantly beyond the control of the Network, having such information is valuable in describing the environment under which local programs are operating. The Monitoring and Assessment Task Force (MATF) recommended an initiative on *Background Indicators* be continued to develop information for the Network that includes (but need not be limited to):

1. Availability vs. demand for affordable low-income housing;
2. Community unemployment rate;
3. Community literacy rate;
4. High school dropout rate;
5. Crime rate;
6. Percent of eligible low-income voters voting; and
7. Change in average benefit level.

Presently the states of Connecticut, Florida, Georgia, and Oklahoma are experimenting with a Department of Housing and Urban Development (HUD) Community 2020 mapping software that includes census data and shows the distribution of services and conditions by neighborhood communities. Any similar system that uses census data may be used to conduct a comprehensive community needs assessment and to build a data structure that puts "the story" in proper context.

Agencies should address the applicable goals in their Community Action Plans. These CAP plans and the resulting agreements arrived from negotiations between states and CAAs should identify the specific outcome measures that the individual agency will use to measure its success.

ROMA suggests that both states and local agencies should have the flexibility to adopt measures that are most relevant to the goals and objectives established for their own communities. Individual local agencies should collect data and report on measures that have been agreed to as their priorities. The underlying theme is that agencies report on their priority activities. For example, if an agency has a housing program, it should report on one or more "housing oriented" measures—choosing from the proposed listing of measures and/or choosing a locally developed measure. An agency without any "housing oriented" activities is not obligated to report on these measures.

Current measurement technologies represented by the listed performance measures and proposed surveys need improvement in order to capture incremental individual, family, and community changes. MATF recommended that scale measurement approaches be evaluated to determine if scales could yield data that are conducive to national use and local operations.

MATF also felt that present self-sufficiency or family development/stability models have focused on case management goals rather than national reporting. Therefore, attention needed to be focused on what could be aggregated. Moreover, since the intent of the CSBG is to ameliorate poverty, some attention needed to focus on measuring the changes made by agencies on the conditions in which low-income people live.

A Scales and Ladders Subcommittee was established by MATF to propose a measurement tool to address the issues of incremental changes made by local agencies in the community. The Scales and Ladders Subcommittee has proposed a tool to assist CAAs in measuring community changes and is presently

working on a tool for measuring agency changes. The proposed elements for arraying the Dimensions of Change for Family, Community, and Agency Outcomes through scale methodology are found in **Section 4**.

The foregoing recommendations of the Monitoring and Assessment Task Force extend beyond establishment of an outcome oriented approach to monitoring and assessment of CSBG programs. They support an approach to the overall management of these programs that places a premium on empowering low-income people to increase the mandated outcomes in the CSBG legislation that correspond to the MATF's goals—family stability, self-sufficiency, and community revitalization. At the heart of this approach is the belief that effective service delivery systems are created by a Network of providers who work together to achieve common goals on behalf of their customers.

CONCLUSION

While the activities that achieve the desired results are numerous and varied, the results themselves are shared by all the participants in the partnership. Diversity among program structures and approaches should therefore be encouraged and celebrated as customers become increasingly empowered and providers become oriented to using the best means available to achieve goals that the partnership holds in common.

SECTION 2—THE NATIONAL GOALS AND MEASURES

In This Section

This section provides you with an overview of the six unifying national goals and the family, agency, and community framework under which they are organized. Second, each goal, along with the measures developed, is discussed. Lastly, this section includes examples of how states have worked with goals and measures.

A clear understanding of this section serves as the foundation for implementing ROMA. Without understanding goals and measures, the information regarding using scales, developing surveys, and reporting information will not be easily understood.

Working with Goals and Measures

While developing the goals and measures, the Task Force solicited comments and suggestions from local community action agencies (CAAs) and State CSBG program directors. These comments and suggestions were instrumental in directing the Task Force to limit the national strategic plan to a broad "umbrella" of six goals. While all states and CAAs are being asked to report on their activities and services using these goals, the goals are flexible enough to allow local agencies to pursue objectives that meet their unique local conditions.

The six goals are:

1. **Low-income people become more self-sufficient (*family*);**
2. **The conditions in which low-income people live are improved (*community*);**
3. **Low-income people own a stake in their community (*community*);**
4. **Partnerships among supporters and providers of services to low-income people are achieved (*agency*);**
5. **Agencies increase their capacity to achieve results (*agency*); and**
6. **Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive systems (*family*).**

CAAs are not expected to conduct activities or create services designed to reach each goal. It is understood that CAAs provide a range of services directed at individuals, families, and community initiatives. In addition, CAAs are continuously looking for ways to improve how they conduct business. Therefore, the Task Force developed the six goals so that each goal focuses on one of three areas:

1. One client or family at a time;
2. A community system or condition; or
3. An agency or program.

For example, **Goal 1—Low-income people become more self-sufficient**, is clearly designed to measure change to one client or family at a time. Also, **Goal 2— The conditions in which low-income people live are improved**, has been designed to measure a community system or condition. Therefore, if the services of your agency were designed to have an impact on low-income people one client or family at a time, you would not be expected to adopt a goal designed to measure a community condition or system. The same holds true if your agency is more directed toward community conditions or systems. You would adopt a goal designed to measure change in community systems.

Figure 2-B on the following page provides an overview of how each of the six goals is organized under the three areas of focus—client and family, agency, and community. **Figure 2-C** highlights the areas where change is measured for each of the three outcome levels.

FIGURE 2-A

Frequently Asked Questions	
Do I have to do all the goals?	Each state must report on at least one measure under each of the six National Goals. The states have flexibility in determining how many measures on which an agency reports. Many states have worked jointly with local agencies to develop a small number of measures to be reported on in a uniform manner. Agencies are expected to report on those goals toward which they work.
Why does the National Goals and Measures list contain output measures as well as outcome goals? What is a "placeholder"?	The "Direct" measures suggested for the National Goals represent the areas of importance to the members of the Monitoring and Assessment Task Force; those that are not outcome measures can be converted into outcome measures. Placeholders represent a blank space: agencies are free to substitute any outcome measure applicable to the placeholder topics such as Anti-discrimination and LIHEAP.

FIGURE 2-B – Goals Organized by Area of Focus

Client and Family Goals

Goal 1 – Low-income people become more self-sufficient

Goal 6 – Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive

Community Goals

Goal 2 – The conditions in which low-income people live are improved.

Goal 3 – Low-income people own a stake in their community

Agency Goals

Goal 4 – Partnerships among supporters and providers of services to low-income people are achieved

Goal 5 – Agencies increase their capacity to achieve results.

Exploring Ways to Use Goals and Measures

Once the goals were determined, the Task Force began exploring ways to make them useful to states and CAAs. The focus turned to assisting states and CAAs in measuring their progress towards achieving the goals. To accomplish this, the Task Force developed direct measures for each goal. These measures are statements that describe the type of information that may illusrate progress toward a goal.

For example, if your agency has decided to report on **Goal 1—Low-income people become more self-sufficient**, you may measure your progress in reaching this goal by collecting the following type of information:

1. Number of participants seeking employment who obtain it, as compared with the total number of participants;
2. Number of participants maintaining employment for a full twelve months; or
3. Number of households gaining health care coverage through employment.

There are many ways to define and measure "self-sufficiency" in your community. That is why the Task Force has created numerous measures for each goal Local agencies are being asked to select at least one **Figure 2-D** provides an overview of the measures assigned to each of the six goals. Again, the goals are organized by the three areas of focus—Family, Community, and Agency.

Based on feedback from states and local agencies, the measures list has been expanded. The revised list can be found in Appendix 3.

Figure 2-E shows how one local agency in Louisiana incorporates the measures into the annual workplan it submits to the state.

FIGURE 2-C

Contrasting Family, Community, and Agency Outcome			
Outcome Level	Family Level	Community Level	Agency Level
National Goals	1 & 6	2 & 3	4 & 5
Units of Measure	Consumers, clients, individuals, families, enrollees, participants, households	Wards, boroughs, counties, townships, parishes, SMSAs, districts, neighborhoods, territories	Agency, program, employee groups, departments, projects, bargaining units
Type of Change	Status, Family Functioning, Attainment, and Achievement	Systems Functioning, Systems Capacity, or Community Conditions	Capacity and/or Performance
Dimensions of Change	• Income • Education • Family Functioning • Transportation • Employment • Housing • Basic Needs • Community Involvement • Substance Abuse • Child Care • Health	• Public Policy • Equity • Civic Capital • Service & Support Systems • Economic Opportunity	• Governance • Linkages and Relationships • Compliance • Cultural Sensitivity and Diversity • Equity • Workforce Environment • Planning, Measurement, and Evaluation • External Communications • Information Management

FIGURE 2-D

Client and Family Goals and Measures*

GOAL 1—Self -Sufficiency—Low-Income People Become More Self-Sufficient

Direct measures:

a. Number of participants seeking employment who obtain it, as compared with the total number of participants.
b. Number of participants maintaining employment for a full twelve months.
c. Number of households in which adult members obtain and maintain employment for at least 90 days.
d. Number of households with an annual increase in the number of hours of employment.
e. Number of households gaining health care coverage through employment.
f. Number of households experiencing an increase in annual income as a result of earnings.
g. Number of households experiencing an increase in annual income as a result of receiving allowable tax credits, such as the earned income and childcare tax credits.
h. Number of custodial households who experience an increase in annual income as a result of regular child support payments.
i. Number of participating families moving from substandard housing into stable standard housing, as compared with the total number of participating families.
j. Number of households which obtain and/or maintain home ownership.
k. Number of minority households which obtain and/or maintain home ownership.
l. Number of people progressing toward literacy and/or GED.
m. Number of people making progress toward post-secondary degree or vocational training.
n. Other outcome measure(s) specific to the work of your agency.

Survey question measure:

o. Number of clients who consider themselves more self-sufficient since participating in services or activities of the agency.
p. Number of clients reporting an increase in income since participating in the services of the agency.

Scale Measures:

q. Number of households which demonstrated movement up one or more steps on a scale matrix measuring self-sufficiency.
r. Number of households achieving positive movement in self-sufficiency as demonstrated by an increase of at least one point in an overall score of a Family Development Scale.
s. Number of households achieving stability in the dimension of a Family Development Matrix.

GOAL 6—Low-Income People Achieve Their Potential by Strengthening Family and Other Supportive Systems

Direct measures:

a. Number of aged households maintaining an independent living situation.
b. Number of disabled or medically challenged persons maintaining an independent living situation.
c. Number of households in crisis whose emergency needs are ameliorated.
d. Number of participating families moving from homeless or transitional housing into stable standard housing.
e. Number of households in which there has been an increase in donation of time to volunteer activities (not mandated by welfare-to-work)
f. Number of households in which there has been an increase in children's involvement in extracurricular activities.
g. Number of high consumption households realizing a reduction in energy burden.
h. Number of households moving from cultural isolation to involvement with their cultural community.
i. Other outcome measure(s) specific to the work done by your agency.

Survey question measure:

j. Number of households indicating improved family functioning since participating in the services or activities of the agency.

Scale measures:

k. Number of households moving from crisis to stability on one dimension of a scale.
l. Number of households moving from vulnerability on one dimension of a scale.
m. Number of households moving from a condition of crisis to a condition of vulnerability on one dimension of a scale.

* Measures are subject to revision by the Monitoring and Assessment Task Force

FIGURE 2-D (continued)

Community Goals and Measures*

GOAL 2—The Conditions in Which Low-Income People Live Are Improved

Direct Measures:

a. Number of accessible, living wage jobs created and/or retained.
b. Increase in assessed value of homes as a result of rehabilitation projects.
c. Increase in proportion of state and federal funds allocated for meeting emergency and long-term needs of the low-income population.
d. Increase in access to community services and resources by low-income people.
e. Increase in available housing stock through new construction.
f. Increase in the availability and affordability of essential services, e.g. transportation, medical care, child care.
g. Other outcome measure(s) specific to the work done by your agency.

Survey question measure:

h. Number of households who believe the agency has helped improve the conditions in which they live.

Scale Measure:

i. Number of communities which demonstrate movement up one or more steps on a scale or matrix measuring Community self-sufficiency, community health, or community vitality.
j. Number of households who believe the agency has helped improve the conditions in which they live.

GOAL 3—Low-Income People Own a Stake in Their Community

Direct Measures:

a. Number of households owning or actively participating in the management of their housing.
b. Amount of "community investment" brought into the community by the Network and targeted to low-income people.
c. Increase in minortiy businesses owned.
d. Increase in access to capital by minorities.
e. Increased level of participation of low-income people in advocacy and intervention activities regarding funding levels, distribution policies, oversight, and distribution procedures for programs and funding streams targeted to low-income people.
f. Other outcome measure(s) specific to the work done by your agency.

Survey question measures:

i. Number of households participating or volunteering in one or more groups.
j. Number of households who say they feel they are part of the community.
k.

FIGURE 2-D (continued)

Agency Goals and Measures*

Goal 4-Partnerships Among Supporters and Providers of Services to Low-Income People are Achieved

Direct measures:

a. Number of partnerships established and/or maintained with other public and private entities to mobilize and leverage\ resources to provide services to low-income people.
b. Number of partnerships established and/or maintained with other public and private entities to complete the continuum of care for low-income people.
c. Number of partnerships established and/or maintained with other public and private entities which ensure ethnic, cultural, and other special needs considerations are appropriately included in the delivery services system.
d. Other outcome measure(s) specific to the partnerships created by local agencies.

Survey question measures:

e. Number of principal partners that are satisfied with the partnerships.
f. Partners' rating of the responsiveness of training and technical assistance.

Scale measures:

g. Number of agencies which demonstrate movement up one or more steps on a scale matrix measuring Agency partnership capacity.
h. Number of agencies achieving stability in the _____dimension of an agency partnership scale.

Goal 5-Agencies Increase Their Capacity to Achieve Results

Direct Measures:

a. Total dollars mobilized by the agency.
b. Total dollars mobilized by the agency as compared with CSBG dollars.
c. Number of boards making changes as a result of a periodic organizational assessment
d. Number of programs which have become more effective as a result of research and data (their own as well as others)
e. Number of programs which have become more effective as a result of needs assessment surveys
f. Number of families having their situation improved as a result of comprehensive developmental services
g. Increase in community revitalization as a result of programs.
h. Number of agencies increasing their number of funding sources and increasing the total value of resources available for services to low-income people.
i. Number of agencies leveraging non-CSBG resources with CSBG resources at a ratio greater than 1:1.
j. Number of agencies where board composition accurately represents the ethnic diversity of the service territory.
k. Number of agencies where customers served accurately represents the ethnic diversity of the service territory.
l. Number of agencies where staffing component accurately represents the ethnic diversity of the service territory.
m. Number of development contacts as a result of outreach programs.
n. Number of special populations showing improvement as a result of programs aimed at the population.
o. Number of clients showing improvement as a result of emergency services received.
p. Other outcome measure(s) specific to the work done by the local agency.

Scale measures:

q. Number of agencies that achieve and maintain compliance with all applicable Federal State, and local statutes, regulations, and requirements.

r. Number of agencies that achieve and maintain a governance process that is inclusive, representative of, and accountable to the community.

r. Number of agencies that achieve and maintain a workforce environment which empowers and develops its employees, has opwn communications, pays its employees a living wage, and is mission-driven

FIGURE 2-E

Sample Summary Table for CSBG Supported Activities and Services in Louisiana's State Application Process

Service Area	Need Identified	Estimated Number Applying For Assistance (Client Pool)	Description of Services Name and describe services provided to address identified needs. Include CSBG/IS Identification Numbers in parenthesis after each service described.	Goals and Outcomes Indicate the unduplicated number of clients you plan to assist under each service provided and describe the outcomes accomplished as a result o the services provided, including the number achieving the outcomes. Incl the number and letter for the Task For Goal and Outcomes in parenthesis af each outcome.
Employment	Lack of Job Skills	400 Individuals	On-The-Job Training (1.4) Agency with the assistance of JTPA will provide youth with a four-week job skills training class. Classes will include instruction for clerical & retail sales position and on-site job supervision.	400 Youth (16-21) will be provided wit OJT and skills training classes and 50 o those clients will obtain employment completion of training during the sum months. (1a)
		140 Individuals	Skills Training (1.6) Agency with the assistance of JTPA funding will provide adult clients with a six-week job skills training class. Classes will include instruction for clerical & retail sales positions.	140 clients will be provided with skills training and 50 of those clients will ob employment for at least 90 days after completion of training (1c)
		5 Individuals	Skills Training (1.7 a) Agency with the assistance of Green Thumb will provide senior citizen clients with job skills training.	2 clients will maintain employment for full 12 months (1b).

Standardization vs. Flexibility

The ultimate test of reporting on the national level is how we tell "our story." The Task Force struggled over whether all CAAs should report on certain core measures. This would mean that more standardization would be possible in reporting and a more consistent story could be told. Such standardization would answer the "apples and apples" vs. the "apples and oranges" reporting problem. Endless hours, with much feedback from the Network, were spent on this question. In the end, the Task Force settled on greater flexibility rather than standardization to allow time for further exploration of community need, increased local capacity building, and greater creativity and flexibility in the process. Such a decision, however, means that, for the short term, states will need to aggregate data by goal, and some consistency will be lost. It is anticipated that as experimentation continues, a few solid measures will emerge that allow for standardization at the national level. In the meantime, the Network will need to vigorously use the local and state data to "tell the story" at the most immediate level through as many mechanisms as possible.

The following pages contain examples of how states are working with goals and measures.

Oregon

A statewide focus on outcomes, the "*Oregon Benchmarks*," has led all organizations and programs in the state to look at the results of their services. The Department of Housing and Community Services, along with a committee of representatives of local agencies, created the "Omniplan." Local agencies now provide integrated workplans and budgets for all emergency assistance, stabilization, self-sufficiency, and capacity-building programs funded by the department rather than provide separate plans for each funding source. The "Omniplan" requires programs within agencies to work closely together while tying service results to specific items on the *Oregon Benchmarks*.

In implementing the "Omniplan," agencies were expected to conduct community needs assessments and work with identify goals that would work to meet these needs and provide an outcome-based objective to measure progress community leaders and residents in determining their desired outcomes. Agencies were asked to toward each goal. Finally, agencies were asked to design methods to meet the needs and identify what impact their efforts had.

Agency concerns have been raised and an intense dialogue between the state office and the CAA association has taken place. This process has brought the state, the association and the agencies together, helped them more clearly define roles and improved the relationships among stakeholders.

New York

The focus in New York was on creating an environment that encourages local agencies to build on what they were already doing, and begin to change the way they thought about their work by looking at the outcomes of their efforts. In 1996, agencies were asked to tie the narrative description of success that they report to one of the six goals developed by the Task Force. In 1997, agencies were asked to select measures of the goals they would use to measure success on an agency-wide basis. Selection of measures was left up to each agency. However, agencies were asked to use the selected measures for two years to establish a baseline year and a second year to use as a comparison.

As in other states, there was some resistance. Three primary concerns were noted: 1. Tracking outcomes takes resources and training, 2. Reporting is difficult, and 3. Level of effort, previously captured in units of service, would no longer matter. Agencies were provided training in preparation for selecting measures and preparing their community action plans. In addition, agencies have begun to explore describing their work in terms of return on investment, i.e., what was achieved for a particular level of investment. The sharing of data also seems to have helped in overcoming resistance.

South Dakota

Agencies in South Dakota were encouraged to link outcome measures to welfare reform initiatives and emergency service programs. State office staff provided training and sample outcome statements were provided that focused on client's achievement of employment, independent living, reduction of debt, and maintenance of a safe and stable living environment. The state office recognized the role local agencies played in assisting families living on the edge of poverty, and emphasized the important aspects of the agencies' programs that kept families from falling back farther or faster into poverty.

South Dakota's agencies also worked with the concept of "enhanced" employment. Many families are already working, and local agencies assist families in obtaining "improvements" in their work status, such as higher rates of pay, paid benefits, one full-time job instead of multiple part-time jobs, and jobs with training opportunities for possible advancement.

The work of these states is just a small piece of the transition towards outcome-based management. Utilizing goals and direct measures entails a great deal of attention to detail. **Section 3** provides more detail on why we plan, who should plan and good planning practice

SECTION 3—PLANNING—A KEY FACTOR

In This Section

This section discusses the planning process, and the importance of involving partners, boards, and clients. It provides details on who should plan, how the plans fit together, and what makes a good plan. In addition, it includes some common barriers, along with solutions, that states and agencies have encountered when trying to implement goals and measures.

Making a Plan

While you may find using goals and direct measures easy, implementing an outcomes approach agency-wide entails the creation and execution of a plan developed in concert with your partners, board, staff, and customers. Involving all levels will lead to a more thorough and realistic plan and greater commitment by those involved, and will foster a feeling of empowerment. This may lead to fewer barriers from within and outside of your agency and a more successful implementation of ROMA.

Collaboration among the state office, the statewide association, and the local agency is key to successful implementation of an outcome management system. An environment of collaboration helps ensure that requirements are realistic and not overwhelming, and that those involved understand how outcome measurement is directed at providing better services to clients. In addition, the process of educating and involving your board ensures that they understand the commitment of time, personnel, and other resources that outcomes management may take. It will also create an environment where your board is more supportive and more invested in acting in ways that will not create barriers to achieving your goals. **Figure 3-A** captures important points for boards of directors to understand.

Involving personnel at all levels ensures that your plan takes into consideration the processes and services provided throughout your agency. Finally, implementation of your plan will be more successful since personnel clearly understand the process and purpose and have been empowered through their involvement.

To give you more concrete information on creating a results-oriented plan, review the following questions and answers.

What is Results-Oriented Planning?

1. Planning that focuses on the influence you want to have on your customers.
2. Planning that includes concrete goals, objectives, and the measures you will use to indicate how much progress you are making in achieving them.
3. It focuses attention on what you are trying to achieve for your customers rather than on the processes you use to get there.

Why Plan?

- Good plans help you deliver better services to customers. Plans that are based on accurate customer needs assessments help target the best services to the greatest need. When resources are limited, services must be more relevant— and of the best quality.
- Planning improves your program management by providing a roadmap and a method for checking on your progress.
- A well developed plan establishes a firm basis for your priorities and performance measures and gives you good information on which to base decisions regarding funding and service delivery.
- The results give you a story to tell to your customers, legislature, potential partners, and the public, in general.
- Your plan provides an effective agenda/frame of reference for talking to your partners and making the right agreements.
- The plan provides a history of what worked in the past.

FIGURE 1

Most Important Points for Boards of Directors

1. **ROMA is based on law – GPRA OF 1993.** It is not a management fad. CSBG reauthorization requires that CAAs implement management accountability systems.

2. **For many Board members, strategic planning will be the normal function most affected by ROMA.** It is also the easiest area in which to make the transition. Operational areas take longer to convert. A Board may spend three hours deriving a ROMA-based strategic plan which will require 3 years of work for the staff to provide valid data and feedback for evaluation and modification of future plans.

3. **Members of the Board should work with staff to understand the barriers to ROMA implementation.** Realistic 2-and 3-year time frames should be established for the conversion. During that time, the Board may be called upon to interact with funding sources pressuring the agency for quicker transition, i.e., unrealistic demands for data or unrealistic numbers of positive outcomes.

4. **Because the shift to ROMA is not a fad, knowledge of ROMA techniques can become a factor in recruitment of future Board members.** Individuals with these skills will not only require less orientation, they will serve as an internal resource for training and technical assistance.

1. Plans provide a useful framework for state legislatures as they carry out their oversight, fact finding, and approval functions. Plans tell (1) a program's story clearly and concisely, avoiding conjecture or supposition about what is being accomplished; (2) how a program is being implemented; and (3) the costs associated with the program.

2. A 1993 Federal law, the Government Performance and Results (GPRA) Act, requires plans and performance measures for all Federal programs, including CSBG.

Who Should Plan?

1. Everyone should plan.
2. The Network partners plan together.
3. Community Action Agencies should and are required to plan. CAA Boards are central to the CAA planning process. Good planning reflects Board policy—not vice-versa.
4. States must include all the elements of a plan in their applications for grant funding.
5. The Office of Community Services must comply with GPRA and should help all community action partners plan together to achieve their shared commitments.

How Often do We Need to Make Plans?

- As often as necessary to make them part of the way you do business.
- Create/update at least once a year, but only to change what needs to be changed and to set your immediate targets for the next twelve months. The important thing is that your plan should reflect your reality. If your situation changes, so should your plan.
- **Figure 3-B** shows the planning and evaluation cycles and highlights the importance of planning in an outcome-based agency.

What is in a Plan?

1. An assessment of the current situation including a customer needs assessment survey, an analysis of resources available, and an assessment of the current strengths and weaknesses and current opportunities and threats to the program.
2. A mission statement (based on the statute) and a vision statement.
3. A list of goals and objectives.
4. A discussion of the approach or strategies to accomplish the goals and objectives.
5. A list of the performance measures that will be used to measure progress toward achieving the goals and objectives.

What Makes a Good Plan?

1. It contains a realistic vision that puts customers first.
2. Goals grounded in reality must be measured and represent the shared commitments of partners in the Network.
3. It reflects Board policy.
4. It reflects community diversity.
5. Success indicators are concrete and measurable.
6. Strategies really work and strike a balance between demonstrating commitments and allowing the doers flexibility to take advantage of unforeseen opportunities.
7. It is shared with customers and stakeholders.

How Do You Make a Good Plan?

1. Receive input from customers and stakeholders.
2. Work together to achieve agreement from

partners. Take the time to get people to participate, be open to different points of view, and create an atmosphere where everyone wants to compromise to do better for the customer— low-income people.

3. Follow a logical sequence that keeps the plan unified and cohesive.
4. Work in groups; maximize participation; and stay disciplined by sticking to a clear agenda prepared in advance.
5. Appoint a group facilitator.
6. Keep a good record of decisions and discussions.
7. Use the group(s) to get buy-in.
8. Never stop planning—always issue "working plans."
9. Change when a better way is found.

How do the Plans Relate to One Another?

1. The state plan (application) brings partnerships together and shows how each of the national goals will be addressed by state. It summarizes the individual contributions and expectations of each CAA in the state so that the complete story is told.

2. The Community Action Plans state what part of the state and national plan belong to each CAA. These plans only address goals related to specific CAA programs. They reflect the needs of specific communities and the conditions in those communities. Community Action Plans describe specific actions the CAAs and their partners will take to achieve specific results that are negotiated among themselves and the state CSBG directors. These specific agreements form the basis for state distribution of CSBG and other funds.

Overall, how the plans fit together is a reflection of what partnerships exist and how they work. The Federal government, states, and CAAs will fit together in different ways in different places. But, all partners in the Network will be working to achieve the same goal—to assist low-income people with achieving increased self-sufficiency in revitalized communities and stable families.

Who is Responsible for What?

1. The CAAs prepare their Community Action Plan. They conduct their needs assessment and engage their customers, partners, and stakeholders.
2. The States prepare their application for CSBG funds by including the elements of a statewide community action plan. In other words, states prepare a statewide plan that summarizes and aggregates each CAA plan.
3. States are responsible for making sure that each of the national goals is addressed in some aspect of the statewide plan.

What are the Responsibilities for the States?

1. States address the six national goals in their applications either directly or through a consolidated presentation.
2. States may not require each CAA to address all six goals. CAAs should address goals that relate to their individual programs and the priorities the CAA Board has established for the organization.
3. Requirements are established that reflect a reasonable balance between the need to look at outcomes of the program and additional burdens being imposed on CAAs.
4. States should provide technical assistance to CAAs that need help developing their plans under the new framework. Team building among CAAs, their partners and the states is an important part of implementing this process.

What are the Responsibilities for the CAAs?

1. For each goal that corresponds to the work your agency does, and based on a current needs assessment survey, select at least one of the measures to report. You may use any or all of the measures contained in the menu of measures and report on as many as you wish. If none apply to your situation, you may create your own measures to reflect the progress your agency is making toward the goal or goals you have selected. Some of the measures on the menu may apply to more than one goal—use them under whatever goal(s) seems most appropriate to you.
2. Measures that call for a "number of" something to be counted are expressed in two parts: (1) the actual count, and (2) the baseline total. For example, if the measure is the "number of households maintaining employment," express it as a factor of the total number of households served by the agency, such as 27 out of 86. Do not report percentages without also reporting the counts and baselines so that data may be aggregated with that of other agencies before percentages are calculated at the state level.
3. Data is collected on the measures selected during the year they are selected. So, if the FY 1997 CAA plan includes self-sufficiency, data about average income of the core caseload will be collected during FY 1997.

What are the Responsibilities of OCS?

1. OCS uses the state plans and reported results obtained through this process to develop their plans and measures submitted to the President through the Office of Management and Budget and the Congress, as part of the process.
2. OCS will emphasize that non-aggregable data from local agencies and/or states is a reflection of the need to be responsive to local needs and priorities even if the result is loss of national statistics that describe conditions nationally.
3. Federal training and technical assistance should focus on using this planning process to foster team building and partnerships that improve services to low-income people. State CSBG Directors have received basic training on the new process.

Agency Barriers

At first, everyone may not buy into the idea of results-oriented planning and outcome measurement. Some of our current practices and systems may not be as conducive to this approach. The following common barriers or areas of resistance that states encountered as they began developing outcome measurement systems are from a report entitled *Implementing Results-Oriented Management and Accountability for the Community Services Block Grant: A Preliminary Report on State Efforts*; published by the National Association for State Community Services Programs (Refer to **Section 7**).

Concern 1—Measuring Outcomes Takes Resources Away from the Poor

There is no question that designing and implementing data collection and management systems takes resources of time, technology and money, and that these expenses can seem daunting. However, this is

only a short-term view. Most organizations have realized that this initial investment has returned resources in better management and service delivery, as well as more accurate tracking and allocation of funds. In addition using outcome measurements has meant the ability to more clearly tell the agency story and increased their ability to acquire funding.

Concern 2—Lack of Success Will Cost Agencies Funds

Some agencies indicated concern that producing a weak outcome will result in a reduction of funding. At this point, no state funding formula has been altered to include outcomes. In addition, a commitment has been made to examine state and agency results with some contextual understanding of the environment in which the state or agency is operating including those general conditions beyond the control of the agency.

Another frequently expressed concern is that the movement to results-oriented management and accountability will affect the client numbers reported. This may happen in several ways. For example:

1. As agencies move from counts of service units to counts of outcomes, the new counts may be less. Even if the same number of clients is served, it may take 27 service units to produce three outcomes. Rather than reporting on the 27 service units, you will be reporting on the three outcomes; and
2. As agencies move to provide family development and other long-term services rather than focus on emergency services, even with a greater investment of resources, fewer people may be served.

Everyone involved needs to understand the new methods for calculating numbers, what they mean, and why they differ from previous reports.

Concern 3—CSBG Represents Only a Small Portion of the Agency Budget—Why Go Through All of This Trouble

Many funders—Federal, state, and private—are requiring outcome measurement. Implementing new CSBG practices provides you the opportunity to make the shift toward examining performance and to learn what works without the risk of funding being tied to the findings. In addition, CSBG, however small, is often one of the few funding sources that support the infrastructure of agency administration and operation. Participating in outcome measurement will have an impact agency-wide.

Concern 4—Should Only Those Services Supported by CSBG be Covered—What About Other Programs

Most programs are now being asked to demonstrate what difference they have made or what their outcomes have been. The outcome management system outlined in this Guide includes techniques, measures, and sample tools that are relevant to multiple programs and funding sources. The focus is on the outcomes as experienced by the client, not as produced by a particular funding source. This focus enables you to use this system agency-wide as it is readily adapted to provide information for other funding sources. In many cases, ROMA has served as a model for other programs.

Concern 5—This is Just a Fad

Some agencies and states have been resistant to investing significant time and financial resources into adopting an outcome orientation out of fear that this is just another management system fad. Over time, other management techniques and expectations may be

developed; however, it is clear that funding sources are increasingly tying funds to outcomes and accountability. It is unlikely that this trend will reverse, which makes a transition to an outcome orientation more valuable.

Concern 6—Lack of Agency Capacity

Another source of resistance has been concern over how well equipped agencies are to adopt this outcome oriented system. Like the range of models outlined in Section 2, training and technical assistance is key to successful implementation. While some states have already instituted training and technical assistance, additional resources may be needed. **Section 7** contains additional information.

Concern 7—This is Trying to Change What Services We Provide

A shift in service priorities from emergency services to long-term services may be appropriate in some communities. However, the focus of ROMA is not to force this shift, or to make it necessary to do so to implement an outcome orientation.

For example, it is not necessary to stop providing meals to seniors; however, it is necessary to measure what happened because those meals were served rather than simply reporting the numbers served. Reporting the results shifts from counting to indicating the results of the actions taken. For example, the delivery of meals makes it possible for seniors to remain independent, to maintain their quality of life, and to save on the cost of institutionalization.

Task Force Recommendations

The Federal, state and local partners in the Network should be surveyed periodically regarding their level of satisfaction with the partnership arrangements in the Community Service Network. The Task Force recommends that the survey results address the following specific indicators of program success:

1. Partner perception of the effectiveness of partnerships among Network members; and
2. Partner perception of the responsiveness of technical assistance.

It is important to link background information and the general conditions of poverty to local planning and assessment processes and the reporting of results. While this type of background information should not be used as core performance measures, since it is significantly beyond the control of the Network, having such information is a valuable way to describe the environment under which local programs are operating. The Task Force recommends that an initiative on **Background Indicators** be continued to develop information for the Network that includes (but need not be limited to):

1. Availability versus demand for affordable low-income housing;
2. Community unemployment rate (official SMSA);
3. Community literacy rate;
4. High school dropout rate;
5. Crime rate;
6. Percent of eligible low-income voters voting; and
7. Change in average benefit level.

SECTION 4—DEVELOPING AND WORKING WITH SCALES

In This Section

The section provides an explanation of the purpose of scales and how they may be used by agencies to address incremental change. Examples of how an agency may use the Community Scaling Tool are offered.

What Is A Scale?

A Scale is simply a continuum that describes different states or conditions of status. It has a beginning point and an ending point, with increments in between to help us measure change. One example of a scaling tool we use daily is a thermometer. Inside a room, the thermometer is built into a thermostat to regulate temperature and therefore provide us with comfort. The scale begins at 50 degrees, ends at 90 degrees, with each increment of 1 degree marked in between. Although we could communicate with each other solely using the numerical indicators of degrees, we generally use words we have learned to associate with certain temperatures. Inside a house, 50 degrees is "cold," and 90 degrees is "hot." The number we associate with "comfortable" is generally around 70 degrees.

We can take the concept of scales and apply it within human services systems to help agencies get credit for what they are actually accomplishing. A Sample Housing Scale is illustrated in **Figure 4-A.**

Why Use Scales?

In previous sections, information has been provided on goals and measures and a process for planning has been established. When the Task Force began its process for creating the goals and measures, they explored how CAAs may use these tools. The Task Force understood the need for agencies and states to report on their successes. The movement was moving away from measuring outputs that say nothing about the impact of services, to measuring outcomes that attempt to describe the effect of an agency's programs. A scale, or a continuum, better describes the different states or conditions of low-income people and agency efforts to serve them.

FIGURE 4-A

Sample Housing Scale

THRIVING	• Lives in housing of choice, either owns home, condominium, or rents apartment.
SAFE	• Lives in safe and secure non-subsidized housing, choices limited due to moderate income.
STABLE	• Lives in safe and secure subsidized rental or public housing.
VULNERABLE	• Lives in unaffordable home. • Lives in unaffordable subsidized rental. • Lives in transitional housing. • Lives in temporary residence including shelters.
IN-CRISIS	• Lives in unsafe and substandard housing • Homeless

By using scales, CAAs are able to more completely describe their successes in helping low-income people. Scales were introduced as a way to measure success since they are easy to understand, and the Network already uses them in their work. For instance, when a CAA or state refers to the number of people who have become self-sufficient as a result of contact with their programs, they are using a two-level scale with the categories of "Self-Sufficient" and "Not Self-Sufficient." However, some CAAs find this simple scale limiting. Self-sufficiency is not an either/or condition; it is one of degrees. CAAs know that no family is completely self-sufficient; nor does any family lack any sign of self-sufficiency. For this reason it makes little sense to think of self-sufficiency in narrow "yes-or-no" terms. Instead, we should think of self-sufficiency as a continuum. A continuum suggests that families are more or less self-sufficient, rather than strictly self-sufficient or not self-sufficient.

Scaling was important for another reason. The Task Force understood that one of the most significant problems facing the Network is the problem of defining self-sufficiency. Because there are so many dimensions to consider—income, employment, education, childcare, and transportation—it is difficult to settle on a single definition of self-sufficiency. Scaling supports CAAs in using those dimensions that more clearly reflect their services and the goals they have selected to impact low-income people. Therefore, the use of a scale or a continuum allows individual CAAs and states to report on their successes without having to conform to a single standard for self-sufficiency.

How Can CAAs Use Scales?

If CAAs and states make the decision to implement scales in their reporting, they can use scales to take their reporting from a level based on the numbers of families served and at what level these families exist, to a level that illustrates the degree of change or movement these families show. By measuring the incremental changes in the conditions of the individuals or communities served, CAAs may clarify how effective services really are. This may take more staff time that may impact the numbers of clients served, but if the use of scaling uncovers the ineffectiveness of a service in providing change, the number of people receiving that service becomes less important. The scaling results provide the agency with the opportunity to modify services to more effectively assist clients.

In addition, measuring incremental change allows an agency to report on the intermediate successes that lead to the goal of self-sufficiency. By comparing scale results taken at two different times, an agency may determine how much short-term progress has been made toward achieving a goal. Agencies using scales may demonstrate multiple interim successes even if a goal has not been achieved. Agencies may use interim successes to provide periodic motivation to their key stakeholders—clients, staff, and funding sources.

Family, Agency, and Community Scales

When the Task Force began its work, others had already developed family scales and states and agencies were using these scales to measure success at the individual/family level. The Task Force decided to focus its efforts on developing community and agency scales. The Task Force developed a community-scaling tool first, and is in the process of developing agency scales. It was believed that successful efforts to improve agency functioning or community conditions should result in improvements for low-income people. A scaling system should be able to account for community and agency level activities more easily than does our existing output reporting system.

Family level scales measure changes one family at a time. The dimensions for change may include status of employment, education for adults and children, family functioning, income, and health.

Agency level scales measure changes in a single agency or a program within an agency. The dimensions for change may include client satisfaction, cultural sensitivity and competency, funds development, and fiscal and administrative health.

Community level scales measure changes in functioning and capacity of community systems and conditions. The MATF Community Scale Summary is shown in **Figure 4-C**. The entire scale can be found in Appendix 4.

An Agency Scale measures organizational functioning capacity, effectiveness of services delivered, and activities undertaken. The Agency Scale may use data collected with a family scale to determine the effectiveness of the case management services, but the family scale itself does not have a category to measure the role of the agency's caseworker or intervention specialist. The quality or capacity of the agency's caseworker in working with the family is an agency level issue.

FIGURE 4-B

Why Would an Agency Use Scales?

1. To get credit for incremental change and progress towards long-term goals.
2. To translate each individual department's achievements into a common reporting format.
3. To facilitate internal communications with staff, the board of directors, and clients.
4. To facilitate external communications with donors, funders, politicians, and the public.
5. To explain why progress has not been made toward achieving long-term goals.

The Community Scaling Tool is:

1. Designed to allow local agencies to demonstrate incremental progress made towards the achievement of long-term, complex goals as they relate to the five dimensions;
2. Designed to help agencies identify when their work produces results at the community level; and
3. Designed to provide a framework for agencies to assess, plan, measure, and reassess.

As agencies work towards achieving the community goals, they also achieve incremental changes that are important to measure and document. Recognizing this, the subcommittee identified five broad areas that contribute to achieving the goals, and that agencies should focus on as they relate to the community.

1. Public policy
2. Equity
3. Civic capital
4. Service and support systems
5. Economic opportunity.

The dimensions are broadly inclusive of both community conditions and community systems. Definitions for the five dimensions and how they are used are explored in Appendix 4.

All MATF scales share a common set of five words that establish a range of thresholds. These five words describe a continuum of conditions for families, agencies, and communities. They are:

1. Thriving
2. Safe
3. Stable
4. Vulnerable
5. In crisis

Early versions of Network scales may use the word "at-risk" instead of the word "vulnerable." The Task Force prefers "vulnerable" because in some human service fields the term "at-risk" carries clinical definitions that are not relevant for these purposes.

Kansas

CAAs worked with the Kansas State office staff to develop a family level matrix system for use statewide. Look for it on the ROMA web site at www.ROMA.gov. The Kansas State office also developed a scaling system that the CAAs could use to assess the partnership that the local agencies have with the State office. The areas of assessment include:

1. Policy Making
2. Policies and Procedures
3. Advocacy
4. Training and Technical Assistance
5. Assessment
6. Information
7. Responsiveness
8. Philosophy and/or Sensitivity

The complete matrix can be found in Appendix 4.

There is a linkage between the family and community level scales. Ultimately, we need to demonstrate how changes at the community level have an impact on households and individuals. The community scale allows an agency to demonstrate and place change into a context rather than simply relying on statistical data to prove effectiveness.

Relying only on statistical data about individual families that paint a picture of the community often does not provide a full account of the impact of the change taking place at the community level.

Figure 4-C uses narrative to distinguish between family, agency, and community thresholds on a 5-level scale. The Community Action Agency serving Marin County, California furnishes this example.

Notes on Family Scales

Family level scales discussions diverge almost immediately onto one of two roads:

1. One road uses scales as a case management tool
2. The other road combines the outcome measurement aspect with casework

Both roads have many smaller paths and branches that provide endless variety to how these tools are used.

Agencies that keep the measurement process separate from the casework process will gravitate towards the models that use a scale with numbers only (no assigned definitions) and, for example, ask the families to pick a number from 1 to 7 that represents how they feel their family resolves conflict. Then the caseworker asks the family what factors they used to pick that number, and is the family happy with that number? If the family is not, the caseworker then asks what number do they want to move to, and how does the family take action steps to move towards that goal? The family defines the values on the scale, and every family within a single caseload uses different definitions. It is extremely important to emphasize that this model uses scales as a casework tool, not an outcome measurement system. Aggregation for outcome reporting is possible when a filter is designed to process the information by relating key data elements to specific (and not necessarily scaled) outcomes.

Agencies that combine the case work and outcome measurement processes will branch off in different directions that produce varying degrees of organizational change. Some agencies build a process where the scaling system is blind to the caseworkers and the clients. The intake forms and updates are designed to collect raw data that a supervisor or computer scores and puts into reports. The casework system itself does not change only the data collection component of it. Caseworkers are not re-trained and the client/caseworker interaction does not change.

Other agencies will actively involve clients and caseworkers by using the scale as the assessment tool, the basis for establishing the goal plans within the casework system, and the reassessment tool. Both clients and caseworkers know the scores and the values of each scale step. Again, the road branches off into two distinct paths. In one model, the caseworkers are given a scaling system with multiple indicators within each level of the matrix. Sometimes instructions are clear for deciding where the client is scored if his/her situation spreads throughout the scale, and other times caseworkers have complete discretion in determining the final score their client will receive. In another model, the caseworkers use a scaling system that utilizes mutually exclusive indicators within each level of the scale. The caseworkers then have fewer variables to contend with and there are fewer areas where bias can be introduced. See **Appendix 4** for examples of scale approaches used in Illinois and Kansas.

FIGURE 4-C: Sample of California Scale

	FAMILY	COMMUNITY	AGENCY
THRIVING	Family systems are strong and healthy, fully functional. Family is achieving its own self-determined goals. Has achieved commonly accepted standards of family well- being. Earned income is sufficient to meet current needs, and enables family to plan & save for future needs.	Social system and infrastructures are strong and healthy. Community is looked to as model of effective and efficient management of community systems. Citizens are safe, healthy, benefit from sound economic development & take pride in community.	Agency is healthy in all respects & excels in key areas. Is visible & influential in the community. Facilitates & participates in collaborative responses to community problems. Makes organizational decisions on basis of sound strategic planning; operations are mission driven. Staff & board are creative and ensure that agency is a "learning" org., promoting growth and development of all agency staff and volunteers.
SAFE	Family is strong and has made significant progress in improving its circumstances; is generally secure as a result of its own efforts. Family economically self-sufficient as demonstrated by absence of dependency on traditional federal 'welfare' entitlement programs. Has a clear vision of its ultimate goals. Intervention is oriented toward further development of family's internal resources.	Community is strong and has made significant progress in improving its social and physical conditions. Has adopted realistic self-sufficiency and strength indicators as targets for community development. Has a clear vision of its goals, mission, & future. Intervention supports community goals and strategies.	Agency is strong and has clear vision/mission. Significant improvements in organization of activities are evident. Staff morale is high. Sound financial management and policy and practices characterize all operations. Agency staffed and governed by competent, committed persons. Intervention is directed toward achieving highest standards of management, practice, & performance.
STABLE	Family is no longer in danger, is ready and willing to change, and is planning for *its future*. There is demonstrable progress toward reduction in dependency. Supportive services are provided to assist families in implementing their plans.	Community is no longer in danger. Broad community consensus (with respect to problems and solutions) and appropriate collaborations are in the process of formulation. Intervention supports and/or participates in collaborative response to community problems. Citizens perceive improvements in community conditions/well-being.	Agency is no longer in danger. Is developing strong internal commitment to change and has developed systems to address organizational weaknesses. Agency has completed comprehensive self-assessment process, and interventions are chosen/guided by the results of that self-assessment.
VULNER-ABLE	Family is secure from immediate threats to health and safety, but has not yet developed or committed to strategies/plans for long-term growth and change. Continuing safety net intervention provides a platform on which the family can build its plans for improving its circumstances.	Community is secure from most critical threats to health and safety of its residents. There are diverse and competing proposals for system change. Intervention facilitates development of common consensus or addresses a specific critical need.	Organization has weathered immediate threats to survival, but is on 'probationary' status. Needs to develop plans for organizational change. Needs strong organizational development support and intervention. May need changes in staffing and/or governance. Has begun to stabilize financial condition.
IN-CRISIS	Family cannot meet its needs. Presently unwilling or unable to work toward positive change. Family systems have collapsed or are in immediate danger of collapse. Strong, comprehensive outside intervention is needed to enable the family to move out of danger.	Community infrastructure is inadequate to meet needs of community and its residents. Social and political fabric is in danger of collapse. Community systems are unwilling or unable to respond to urgent community needs. Strong intervention is needed to prevent collapse or disorder.	Ineffective in fulfilling organizational mission; has weak administrative, governance, or control capabilities. Isolated from key community service delivery systems. Unable to recognize need for change or unwilling to change. Strong outside intervention is needed to prevent organizational failure or bankruptcy.

Illinois

In 1994, more than 50 percent of CAA families reported the need for prevention and intervention services for family violence, mental health problems, drug and alcohol abuse and medical illness. Families also requested more assistance with referrals, including advocacy, and more support to identify and plan for family needs. Additionally, the national trend toward welfare reform required that CAAs take a more active role in helping clients become employed, stay employed, and get more involved in their communities.

In response, CAAs established the Illinois Community Action Family and Community Development (FCD) Program. The goals of the FCD program are to cultivate self-reliance in families at risk of long-term welfare dependency and to work with communities to identify economic opportunities.

The FCD program includes three components. The first is a family development component that focuses on family systems theory, interviewing and family assessment skills, goal setting and planning and group work techniques. The second component is community development that addresses community partnerships, job and educational placements, and safe homes and neighborhoods. The third is an outcome-based program planning and measurement tools component using a Family Self-Sufficiency Scale. This component ensures that Community Action Agency staff focuses on outcomes, instead of process, by using a model measurement tool. See Appendix 4.

The FCD program encourages Community Action Agency staff to participate in an initial 12-day certification training addressing the three components. Upon successful completion of the certification training, the Illinois Community Action Association (ICAA) certifies as Family

As part of the process of developing an agency scaling tool, the MATF is leading a conversation on what characteristics contribute to a "Thriving" Community Action Agency. The conversation about using agency-scaling tools will take place during 1998-99, and the results will be incorporated in the guidelines that MATF will release in 1999. See Appendix 4 for information on the conversation, and register your comments on-line on the ROMA website at www.ROMA.gov.

FIGURE 4-D

Summary of MATF's Community Scaling Tool

		Dimensions				
Thresholds*		Public Policy	Equity	Civic Capital	Service & Support Systems	Economic Opportunity
5	Thriving	Innovative	Achieves Equity and Values Differences	Investing	Comprehensive and Integrated	Vibrant
4	Safe	Supportive	Affirming	Contributory	Preventive	Emerging
3	Stable	Selective or Reactive	Toleration and Awareness	Participating	Comprehensive but Reactive	Stagnant
2	Vulnerable	None or Unenforced	Complacent and Uninformed	Awareness and Education	Responsive but not Comprehensive	Contracting
1	In Crisis	Hostile	Conflict and Fear	Isolation	Non-Responsive	Collapsed

Note to Table: The numbers in the far left-hand column are designed to be interchangeable with the words in that column. The numbers are offered as an alternative to the words because the authors are aware that certain community situations are so volatile that the words may create unintended barriers to communication.

Conclusion

Scaling Tools are used by agencies as a way to measure and demonstrate the changes resulting from activities and programs they offer in support of meeting the National Goals on the community level.

Readers are encouraged to turn to the following sections for additional information:

Appendix 1—Provides a listing of Task Force and Scales and Ladders Subcommittee members. Readers are encouraged to contact members for additional information and assistance.

Appendix 7—Offers a Resource and Bibliography of additional information on developing and using scales

Appendix 3—Provides

1. An example of the Community Scaling Tool,
2. Examples of Tables on the Five Dimensions,
3. Example of A Scale and Subscale Table, and
4. Blank tables readers may pull out and photocopy to use.

SECTION 5—DEVELOPING EFFECTIVE SURVEYS

In This Section

Surveying clients is an important way to collect data regarding the effectiveness of programs and services delivered. By asking clients questions, agencies may gather critical information about the results and changes that took place after the service has concluded. This section provides information on how an agency may collect data from its clients related to the national goals.

Surveying Community Services Program Clients

Government at all levels is increasingly eager to demonstrate the value of its products and services. By asking service recipients or clients for their opinions, and for information about changes resulting from the services, local agencies, state, and Federal governments are joining the ranks of private companies that seek to maintain or improve delivery of services. In the public sector, the impetus to measure how services are affecting clients lives provides the basis for "reinventing" government so that it responds better to citizens' needs.

Information for this section borrows heavily from a study by the Office of the Legislative Auditor, State of Minnesota. Although the original report focused on customer satisfaction surveys, its guidelines provide excellent summary information on how to conduct proper surveys. This information is extremely useful to agencies involved in or considering initiating client survey activities. By following these guidelines, agencies may produce valid and reliable survey data. Valid measures convey the true nature of what is reported. Reliable measures are those that yield consistent results even if data were provided by different staff or by the same person at different points in time.

In preparing its original report, Minnesota staff reviewed literature on performance measurement, relevant sections of performance reports, and an array of technical publications that recommend specific methods and procedures for conducting customer surveys. In addition, they spoke with experts in survey research methods and obtained experts' feedback on the guidelines they compiled from the literature and other published sources.

Measuring Client Input

The general purpose of seeking client input is to document how well agencies are progressing toward the goals of assisting clients and improving the effectiveness of services. By asking clients on a regular schedule how their lives are changing, using the same questions and similar procedures, agencies can produce a set of careful, consistent, quantitative measurements or ratings of their performance and effectiveness at various points in time. For example, an agency may develop a question on self-sufficiency related to agency services and, on a random basis, ask the question for a determined period of time. If similar, sound methods are used and a representative group of clients respond, findings may be safely generalized as to the perception of most clients about the effectiveness of an agency s services.

Client surveys are a form of "feedback" from those who have received services. Feedback may assume many forms, and the conclusion one draws from feedback depends on the amount and type of controls placed over the collection of that feedback. For example, casual comments received from clients may offer insights that help improve services, but only a rigorous, scientific, representative survey of the client population can yield results that may be generalized to all clients.

Figure 5-A contains information on the survey questions formulated by MATF to address the direct measures developed for the national goals. In addition, see a sample survey developed by the CAA network in Iowa in **Appendix 5**. When developing your questionnaire, use the goals and measures your agency has selected as a guide.

FIGURE 5-A

MATF Survey Measures and Questions

The CSBG direct measures and corresponding specific survey questions are listed below. The measures are from the Task Force's National Strategic Plan. The specific data that need to be reported are also briefly discussed below.

MEASURE: Number of clients who consider themselves more self-sufficient since participating in the services or activities of the agency (1k)

Survey question: Do you consider yourself more self-sufficient since participating in the services or activities of this agency?

MEASURE: Number of clients reporting an increase in income since participating in the services or activities of the agency (1l)

Survey question: Has your household income increased since participating in the services or activities of the agency?

MEASURE: Number of households who believe the agency has helped improve the conditions in which they live (2i)

Survey question: Do you believe the agency has helped improve the conditions in which you live?

MEASURE: Number of households participating or volunteering in one or more groups (3g)

Survey question: Do you now participate in, or volunteer for, any community, religious, or social organization?

MEASURE: Number of households who report they feel they are part of the community (3h)

Survey Question: Do you consider yourself to be part of the local community?

MEASURE: Number of households indicating improved family functioning since participating in the services or activities of the agency (6i)

Survey question: Has your family life improved since participating in the services or activities of the agency?

For reporting purposes, agencies should provide both the numbers of clients answering "yes to each question and the total number of clients surveyed for each survey question.

A certain rigor is necessary for purposes of assessing and reporting performance and for using this information as the basis for policy and operational decisions and reports. These reports are the vehicle for ongoing accountability to the public. Only scientific methods can provide the quality of information that agencies need to substantiate their claims of performance and effectiveness. Without such methods, results are subject to numerous uncontrolled sources of potential error. Even when systematic scientific methods are adhered to scrupulously, some error is inevitable in survey results that always must be interpreted with caution. On the other hand, if surveys are properly conducted, they can produce valid and reliable measures of performance that would otherwise not be available.

Guidelines for Client Surveys

The following sections explain the guidelines for planning, constructing, and using client surveys as sources of performance data. The guidelines are based on those that are required or recommended by Federal agencies, the legal system, practitioners, and researchers.

Plan

1. **Conduct client surveys for purposes that are clearly stated and designed to improve services to the public.** Client surveys are a tool for learning about agency services from clients' perspectives, and if done properly, can be a means of evaluating agencies' performance (**Resource Manual for Client Surveys**, OMB, Section 2.1). In the public sector, surveys are never done to improve public relations or to make an agency look or feel good. Rather, they should provide sound direction about how to improve services to citizens, possibly by modifying ineffective services, or by upgrading a method of service delivery.

   Agency managers must actively support the development of any credible survey and see that results are wisely used to improve services. Without such support and follow-up, staff and clients may regard the survey as a costly exercise with little real benefit. At the outset, it is made clear to those involved that the survey is one phase of a long-term effort to document and improve the level of client service. In this sense, planning is a key component to adequately define agency priorities and design a suitable administrative process and questionnaire. Basic issues for planners include determining the scope of the survey, identifying the agency's clients for selected products and services, setting survey goals, developing questions for clients, and deciding how to communicate results.

   Planners must also anticipate the following basic procedures in assigning staff to the survey:

   a) Develop a specific list or "sampling frame" from which to identify and/or sample the population of clients;
   b) Identify a method to collect data, usually by mail or phone, best suited to the agency's information needs;
   c) Develop and pretest a set of standard questions;
   d) Specify how clients will be selected from the client list;
   e) Devise methods to maximize the percentage of participants who complete the survey process;
   f) Ensure that appropriate techniques are used to obtain high quality data from respondents;
   g) Process the data accurately;
   h) Analyze and summarize data;
   i) Explain the results of the analysis; and
   j) Document procedures followed in the course of the survey, data processing, analysis, and presentation of results.

Some of these steps are best conducted by staff with statistical or survey research training; others amount to administrative duties that clerical staff may complete under routine supervision.

2. **Assign and supervise trained staff to be responsible for the survey.** Everyone has ideas about how to conduct surveys, partly because so many occur in the public eye. The Gallup Poll, television polls, and the flood of political surveys done in election years make many people feel like experts. However, there is a science to planning a valid survey, designing questionnaires, processing, analyzing, and interpreting data, and presenting the results in technical reports, memos, and external documents such as performance reports. Network staff need to possess the skills to conduct and use valid surveys and may benefit from training in research design, quantitative methods, public opinion, statistics, marketing, and business communication.

   In many cases the initial planning effort includes the advice of a consultant or staff member with experience in survey research methods. Technical advice may help to streamline the process and eliminate confusing, unintentionally biased, or unnecessary questions, improper methods, and errors of interpretation when data are analyzed. However, the focus of the survey and the general content of the questions best come from program staff who are in a position to know firsthand about service delivery and clients. Then, when the agency has developed its questions, methods, and procedures, the need for technical advice is reduced. In general, surveys are managed actively by agency staff so that they can make maximum use of results at the least cost.

   A practical approach used by some agencies is to establish a "survey team" that is responsible for most of the planning work. The team develops a plan that identifies who will be responsible for each step in the survey process, including contracting an outside consultant, if necessary. After the initial survey, some changes are to be expected. A routine method should be adopted as soon as possible, so that results may be compared meaningfully from year to year.

3. **Follow standard, scientifically valid methods to minimize errors and other potential problems.** All surveys involve potential errors that may introduce uncertainty or bias. For the results to be useful, error must be reduced where possible, or at the very least, agencies should make users aware of its potential impact. There are two basic types of errors: sampling (i.e., a subset of the total population) and non-sampling. **Sampling** errors occur for practical reasons when only a portion of the client population is included in the study. Such errors are unavoidable but measurable. The magnitude of sampling error decreases when the sample is truly random and as sample size increases. Its effect can be estimated and is commonly known as the "margin of error."

   Non-sampling errors are also likely to create problems, but they are difficult to identify and quantify. Common non-sampling errors include: non-coverage (not surveying the right clients); non-response bias (clients' failure to participate);

FIGURE 5-B

Examples of Pseudo Surveys

Media-conducted "straw polls"

The print and electronic media often encourage members of their audiences to write or phone to express their views. But even with hundreds or thousands of replies, these "straw polls" are usually unrepresentative, simply because people who would voluntarily choose to participate are likely to differ in important ways from the overall population. They may be more interested, informed and concerned about the topic at hand and thus hold views different from those of the overall population. A prominent example occurred in 1980 when one of the major networks encouraged viewers to call (at a cost of fifty cents) to indicate whether they thought Jimmy Carter or Ronald Reagan had won the presidential debate.

Congressional questionnaires

The questionnaires that members of Congress send to households within their congressional districts typically are addressed to "Postal Client," and there is no sure way of knowing just who in the household actually completed the survey. Although thousands of these questionnaires may be returned to a congressional office, it is very difficult to ascertain whether the respondents' demographic characteristics and actual opinions on the issues are truly representative of the broader constituency. In some instances, the questions themselves are loaded to guarantee responses compatible with the legislator's own predisposition and record.

Social advocacy efforts

Examples include highly publicized surveys on marital relations. One organization distributed 100,000 extensive open-ended questionnaires to women's groups and to individual women who requested a questionnaire and received about 4,500 replies, a response rate of only 4.5 percent. A columnist wrote: "Readers, I need your cooperation for an important survey. Questions: Have you ever cheated on your mate? How long have you been together? You need not sign your name, but please state your age and indicate whether you are male or female." She received more than 200,000 responses.

In both, the sampling method and the questions generated unrepresentative and misleading results, despite the large numbers of respondents. One researcher claimed that 70 percent of women married five or more years were having extramarital affairs, while 15 percent of the columnist□s married female respondents claimed to have been unfaithful. Both surveys cannot be correct and, indeed, both are overwhelmingly likely to be wrong because of the pitfalls inherent in the sample selection and the actual questionnaires. Allowing citizens to select themselves into a survey guarantees biased results because of the motivations that lead people to participate in the first place.

Source: Asher, *Polling and the Public*, 1992

measurement bias (misinterpreting questions); response bias (failing to answer truthfully); and technical errors in recording, coding, tabulating or analyzing data (Lappin, Figioni, Sloan, p. 24-26). The techniques described in these guidelines and other sources are designed to minimize, but cannot eliminate, such errors because they are often a function of human nature. For example, a client may realize after completing a questionnaire that a wrong answer was checked, or a supervisor may have missed some data errors by a clerk. Generally speaking, agencies are able to avoid major, obvious errors---usually through random

sampling--while others may be controlled or reduced to manageable proportions. In fact, the methods for valid survey research are well- known and often repeated in books and manuals, although "pseudo surveys" can be found, such as those in **Figure 1.2** on the previous page. What was once an academic specialty has now been demystified almost into a "cookbook" recipe.

Identify Clients

4. **Develop demographic data and a list of those who received services that are the subject of the survey.** Those who received agency services are known as "clients." After an agency decides which of its products or services it wishes to study, it must identify which particular groups or individuals actually received the selected products or services during the proposed study period, for example a fiscal year. However, some uncertainty about actual service recipients is not surprising and may be resolved later by direct contact with probable clients.

   Agencies may find that client lists already exist in the form of mailing labels or logs of who received specific products or services. In other cases, agencies may need to develop client lists by reviewing internal records. Ideally, such files include phone numbers, addresses, information on the types of products or services received, and the date of service.

5. **Select all clients from the list or select a random sample of clients large enough to provide accurate estimates.** If the survey results for a sample are to represent the opinions of the specified population of clients, a sample of the correct size should be randomly drawn. The sample need not be purely random but is taken

FIGURE 5-C

Sample Sizes Needed for Populations of Various Size

	For Sampling Error of:		
Population Size	**+3%**	**+5%**	**+10%**
100	92	80	49
250	203	152	70
500	341	217	81
750	441	254	85
1,000	516	278	94
2,500	880	357	95
5,000	880	357	95
10,000	964	370	96
25,000	1,023	378	96
50,000	1,045	381	96
100,000	1,056	383	96
1,000,000	1,066	384	96
100,000,000	1,067	384	96

Note: Sample sizes are shown for the 95 percent confidence level referring to the likelihood that a sample of this size, drawn repeatedly from a population, contains the true population value within the sampling error specified.

Sample sizes are based on the number of completed, usable questionnaires, not the starting sample size. Figures assume maximum variation in responses and should be used if other information is not available.

How to read this table: For a population of 250 whose responses are expected to be evenly split (for example 50 percent yes, 50 percent no), a sample of 152 is needed for results which carry a sampling error of + or - 5 percentage points in 95 of 100 cases.

Source: Priscilla Salant and Donald Dillman, *How to Conduct Your Own Survey* (New York, John Wiley & Sons, 1994), 55.

according to a strict procedure that gives everyone a known chance to be included and precludes personal choice of potential respondents. The sample size needed to produce information with certain levels of precision may be calculated statistically or estimated from a grid such as **Figure 5-C**. As shown, the sample size varies depending on the size of the population, the amount of sampling error agencies and policymakers may tolerate, the amount of certainty that is desired, and the variability of responses (Salant and Diuman, p. 55). Sample sizes generally are based on the assumption of a 95 percent confidence level (that results are within the range bracketed by sampling error), but higher or lower levels of confidence may be used. Interestingly, the laws of probability are such that a sample of about 1,000 is likely to be sufficient whether the population size is 10,000 or 100,000,000. At the other extreme, it hardly makes sense to sample a population of 100 or less. In these cases, the total population of designated clients should be surveyed.

The number of clients agencies choose to sample is also affected by the level of detail agencies wish to use in presenting results. For example, a sample of 400 may be adequate to estimate all clients' perceptions, but not clients' perceptions in each of several service areas. In such cases, each service area is separately identified in the sampling frame, and the overall sample size increased so that an adequate number of respondents is surveyed per area.

Surveys based on questionnaires sent to entire populations are usually termed a "census" but may be treated as though they were a sample from the population since in most cases, a substantial number will not respond. In such cases, the response rate is reported as a percentage, but *does not amount to a random sample of that proportion of clients.*

Sampling error may be defined as a measure of the likelihood that results are close to the true figure among the designated population, had they all been questioned. The extent of sampling error is estimated on the basis of the standard statistical error of the proportion of clients who respond in a certain way, for example, that they had become more self-sufficient. **Figure 5-D** illustrates the amount of sampling error associated with simple random samples of various sizes, depending on the distribution of responses. As shown, smaller samples have higher sampling errors.

Local agencies may tolerate more or less sampling error depending on how the survey information is used. If important decisions are to be based on the survey information, agencies should attempt to obtain a fairly close, precise estimate using (1) a 95 percent confidence level and (2) a sufficiently large sample size to produce sampling error of plus or minus 3 to 5 percentage points. For example, if agencies wish to obtain results that are within 3 percentage points of the actual figure among the population of clients, and they have no existing information about clients' perceptions, they should obtain a random sample of 516 completed questionnaires out of a population of 1,000 to make their estimate with the confidence described above. In this case, about 52 percent of the population would be in the sample, but the percentage would be smaller if the population was larger or agencies chose a lower level of confidence and greater sampling error.

In obtaining data from a representative group of those listed, it is also necessary to prescribe who should complete the questionnaire or interview. Usually the people obtaining services are the obvious choice, but it may take some screening questions to distinguish them from other members of a household. If the client is a family member, someone within the family must be designated, and substitutes discouraged from participating.

FIGURE 5-D

Sampling Error in Percentage Points by Distribution of Question Responses and Sample Size

Distribution of Question Responses	Size of Sample (N)				
(Percent)	800	600	400	200	100
50/50	3.5	4.0	4.9	6.9	9.8
60/40	3.4	3.9	4.8	6.8	9.6
70/30	3.2	3.7	4.5	6.4	9.0
80/20	2.8	3.2	3.9	5.5	7.8
90/10	2.1	2.4	2.9	4.2	5.9

Note: Sample sizes are based on the number of completed, usable questionnaires, not the starting sample size.

How to read this table:

The distribution of sample responses is represented by the proportion of people responding to any question with a particular answer. For a sample size of 800 and a 50/50 distribution of question responses, the sampling error is 3.5 percentage points. A more extreme distribution of question responses has a smaller error range. Suppose that 80 percent of the respondents answer "Yes" and 20 percent say "No." The sampling error in this case would be 2.8 percentage points. That is, each percentage would have a range of plus or minus 2.8 percentage points.

Source: University of Minnesota Center for Survey Research, 1995.

6. **Try to obtain responses from the greatest possible percentage of those selected and check to ensure that those who respond are representatives of clients receiving services being studied.** Two types of response rates are at issue: first, the overall rate of response to the questionnaire, and second, the number of responses to particular questions. Response rates are calculated roughly as the final number who completed questionnaires or interviews minus those who did not due to refusal, divided by the number of eligible participants. If few of the designated clients choose to respond, they are essentially self-selected, and the representativeness of results is questionable in either event. This is because the possibility of non-response bias is directly proportional to the rate of non-response. Non-response bias means that respondents could be systematically different from the rest of the client population. The responses may be overly positive, overly negative, or simply not typical of the agency's clients. Perhaps those who respond have more time and motivation than other clients , for example, those with a grudge, or those who have received exceptionally good service.

To minimize response bias, an agency needs to work to achieve a high response rate. When sound methods and design techniques are used, textbooks show that response rates of 60 to 70 percent may be achieved (Dillman and Salant and Dillman). Other sources suggest as high a rate as 90 percent and as low a rate as 50 percent, excluding fund raising solicitations, mass mailings, and commercial or political appeals that may outwardly resemble legitimate surveys. The latter "pseudo surveys" are deemed successful by their sponsors if they prompt even a small percentage to respond.

Practitioners have found that procedures are now available to assure response rates of at least 50 percent for virtually all survey populations. Among the many techniques that contribute to high response rates are:

1. Minimizing the length of questionnaires;
2. Keeping questions clear, simple, and easy to answer;
3. Including a stamped, self-addressed reply envelope;
4. Assuring confidentiality; attractively formatting questionnaires;
5. Avoiding vague, open-ended questions; and
6. Mailing reminder notes to non-respondents (Ibid, Chapter 7).

In addition, clients are more likely to respond when they are familiar with the subject of the survey, have recently used particular services, and see an opportunity to improve or maintain those services by their participation. There is every reason to believe that Network clients, if accurately identified, will want to state their opinions, given a well designed questionnaire, neutral approach, assurance of legitimacy, and a sense of sincere interest.

Construct and Ask Questions

7. **Write clear questions and response options.** It is difficult, but by no means impossible, to translate technical, complex questions into terms that clients may understand. Otherwise, there is a risk that results may not be meaningful, and in light of the time and money spent on surveys, there can be an unfortunate waste of scarce resources.

   Dangers in question wording include emotional or "loaded" language, as shown by **Figure 5-E** on page 11, as well as boring, dense, clinical, unfriendly, and unnecessary questions. Respondents must understand precisely what is being asked and feel welcome to answer. Agencies may need an outside reviewer to help them avoid jargon. Stay focused on the topic and phrase questions simply, particularly in phone surveys. Ideally, the flow of questions will encourage respondents to complete questionnaires in 25 minutes or less.

FIGURE 5-E

Examples of Loaded Survey Questions

National Right to Work Committee
Are you in favor of allowing construction union czars the power to shut down an entire construction site because of a dispute with a single contractor, thus forcing even more workers to knuckle under to union agents?

Committee Against Government Waste
Were you aware that a good part of why America has been leaning toward nuclear weapons is due to inflated prices of conventional weapons parts?

American Farmland Trust
Do you endorse the idea that a greater number of smaller farms should be encouraged to relieve the growing burden being placed on large farms to fulfill our agricultural needs?

Sierra Club
Our nation is still blessed with millions of acres of public lands, including roadless wilderness areas, forests and range lands. Land developers, loggers, and mining and oil companies want to increase their operations on these public lands. Do you think these remaining pristine areas of your public lands should be protected from such exploitation?

U.S. English
English is the language of the United States by custom, although not by law. In order to avoid the political upheavals over language that have torn apart Canada, Belgium, Sri Lanka (Ceylon), India, and other nations, would you favor legislation designating English the official language of the United States?

Source: Asher *Polling and the Public*

Another equally important aspect of question construction is the categories of response that are offered. Sometimes open-ended questions are used to obtain comments and specific answers, but questions best suited for performance measures are closed-ended, and include several specific options. Possible categories may be based on an ordered set of responses measuring the adequacy of agency performance or the quality of a product or service in light of client expectations or requirements. For ease of response, agencies generally select a few types of response categories and ask respondents to use them throughout the survey.

When questions and response options are finally developed, it is also important for agencies to use them exactly from survey to survey. Even the slightest change in wording may elicit different responses that make it impossible to compare results over time.

8. **Allow for various degrees of perception.** Although it is important to ask clear, simple questions that have only one obvious meaning, it is equally important to allow respondents to express a range of opinion from one extreme to the other. Also, agencies must allow for the possibility that respondents have no opinion or are not sure how to respond to even the clearest questions. Otherwise, there is a risk of muddling informed opinions with others that have no meaningful basis.

If agencies deny respondents a full range of response categories, it will also be difficult to learn much from the results later. For example, by asking simply whether a client was more self-sufficient, results may be limited primarily to the "yes" category. This could include those who are uncertain but inclined to give the benefit of the doubt, those who are positive, those who weighed the facts and decided they were more or less certain, and others. Eventually agencies could use an array of responses (e.g., "much more self-sufficient", "somewhat more self-sufficient", "status unchanged", "somewhat less self-sufficient", and "much less self-sufficient") in studies of client perception and to assess operations. If agencies adopt standard response categories, readers of performance reports gain a more detailed understanding of an agency's accomplishments.

9. **Be neutral throughout.** Just as the wording of a question may influence the response, the wording of the cover letter, questionnaire title, graphic images, and instructions can influence how clients respond, or whether they even return the questionnaire or complete a phone interview.

   Some of the same guidelines used for constructing questions-- simple, neutral, relevant, and interesting-- also apply here. Surveys should include a cover letter or other introduction that establishes the need for the questionnaire and its legitimacy by briefly describing the purpose and tying the purpose to the intended respondent. Also, surveys should provide a contact name, address, and phone. The questionnaire title should use clear, neutral, non-specialized language that is likely to interest the respondent. Graphic images or logos should not suggest a specific opinion or position, and instructions should be carefully worded.

   Agencies should specifically avoid suggestions to the effect that they are already doing a good job, cannot do better without added resources, or have done things already to improve clients' lives.

10. **Ask about several aspects of a client's situation during a specific time period.** There are many different measures of a client's situation, including the six areas in the national goals. If an agency decides to address additional topics, generally questions seek to yield information that agencies may use to improve services. Program managers should design questions that identify what they must do to improve clients' situations.

    At some point in the survey, clients are told the time period for which they are to assess the changes in their situations, such as "within the last year", and "last visit." In other cases, the time period should be clear; for example, "last winter" should be defined in terms of given months in a particular year.

11. **Expect only moderate knowledge and recall of specific services.** It is important to remember that government services are not likely to be uppermost in respondents' minds. Thus agencies should avoid asking for responses about specific activities and services, such as whether a service on a given date affected their situation. Exact answers may look more precise, but are not likely to be correct except for respondents who recall or keep records of their experiences in great detail. We should seek exact information on clients' current statuses that have been influenced by the agency's services but not about specific service events.

Ideally, surveys ask clients to assess their situation soon after receiving services or training, when memories are fresh. Thus, some agencies continually distribute questionnaires to all or some clients for a certain service, and clients return information throughout the year. In other cases, agencies conduct surveys quarterly, yearly, or at other intervals. Asking clients to recall changes in their lives from the distant past increases the likelihood that they will not remember, confuse their situation with something else, or generally have insufficient knowledge to reliably describe their perception. One caution related to the timing of a survey is that agencies should avoid surveying clients too soon after receiving a service but before changes have had time to occur.

12. **Use efficient, well-established data collection methods.** Phone interviews or mail questionnaires are typically used to collect client information. The alternative, face-to-face interview normally is more expensive, requires special training, and is less frequently used. Phone interviews usually yield higher response rates and faster results but generally require more resource trained interviewers, a central location, and an accurate list of clients' phone numbers, among other things. Mail surveys or questionnaires distributed in person, for example, after training sessions, are less expensive but usually require longer periods for questionnaire completion. Otherwise, the two methods of survey administration are quite similar, and the same basic principles apply.

    Differences between the two methods are largely due to the visual demands of the mail questionnaire in contrast to the listening requirements of the phone survey. For a mail questionnaire, the size and length of the form, arrangement of items and amount of white space, use of graphics, size of type, and even color of the paper are important factors (Ibid.). Agencies also need to be aware of who responded to the mail survey, particularly when dealing with responses to household questions. For phone interviews, questions must be brief and simply structured. Interviewers must read all items and be trained and supervised to ensure careful, consistent delivery. In either case, agencies should pre-test questionnaires with a small group of clients before finalization.

    Network agencies may decide initially to simply distribute survey questionnaires when clients receive services or have them available on a counter top. These approaches provide some insight on agency operations. However, they limit the validity of the results. Clients completing the questionnaire are self-selected. Consequently, this is not a random sample, and a high response rate is needed to develop conclusions about the entire client population.

13. **Treat respondents respectfully.** All agency staff must respect respondents' wishes and rights to privacy. Ideally, everyone immediately returns questionnaires, but some people do not, in which case, agencies should never try to coerce responses. Some techniques that help to maximize client response are matters of courtesy, such as minimizing the number of questions and avoiding unnecessary questions. Also, since questionnaires often request information that may be sensitive, most respondents do not want to be personally identified. If questionnaires for some reason seek private or confidential data concerning individuals, agencies should follow the requirements of appropriate laws and

regulations.

Although the identity of individual respondents is irrelevant when discussing overall results, survey administrators need to keep track of who responded so that they may follow-up with non-respondents. If the survey promises anonymity, this means that survey administrators can not connect a specific survey with a particular respondent that precludes follow-up efforts. Thus, questionnaires often include a code number that staff can cross-reference to a master list for mailing reminder notes. For ethical reasons, staff must never specifically discuss who has responded or any other personal information obtained from the survey, especially income or other sensitive information, except, if necessary, among the project team. As a practical matter, the individual identity of respondents is incidental to an agency's needs to hear from representative groups of clients.

14. **Encourage voluntary participation.** In the private sector, it is not uncommon to provide small, tangible rewards as incentives to return questionnaires. For example, questionnaires sometime come with cash, checks, coupons, or stamps on the assumption that recipients will feel obligated to return the favor. In fact, such incentives often help to improve response rates that are otherwise depressed by the commercial nature of such surveys. However, this may not be practical or desirable for local agencies.

    Overall, the best way to generate responses is to design surveys on the assumption that questionnaire recipients are most likely to respond if they expect that the perceived benefits of doing so will outweigh the perceived costs of responding (Dillman, p. 233). Thus, voluntary responses can be obtained by making questionnaires easy to complete, interesting to fill out, and worthy of trust. Likewise, a simple, personal appeal to clients is helpful, telling them that a legitimate questionnaire or phone call is forthcoming, and that their participation is valuable and important but not officially required.

15. **Confirm that respondents are clients.** Client lists should include clients for selected products and services, but occasionally someone on the list does not belong, is an infrequent user of services, or does not fit some other criteria for inclusion. For these reasons, it is always a good idea to determine if the respondent is qualified to answer survey questions. For example, local agencies may wish to focus on a certain group that used a service (e.g., training for employment). In this case, the first few questions should establish that the respondent represents the group and has direct knowledge of the service. Also, when asking about multiple services, questionnaires may include as a response option "do not use this service," or similar wording, to avoid influencing nonusers to give confusing and/or inappropriate information.

Edit and Archive Data

16. **Make every attempt to ensure that data are technically error-free.** Potential errors in data processing should be considered even at the point of designing and administering questionnaires. Some phone surveys rely upon computerized systems to record a coded response for each answer as it is given. A significant advantage of such systems is that the computer automatically guides interviewers to

ask the correct question and prevents obvious mistakes when out-of-range numbers are inadvertently keyed. Similar systems may be designed after mail questionnaires are completed and received, in the interest of correcting errors before they affect results.

Computers and database or statistical software are not always necessary in processing client data, but the use of these tools is highly recommended. Once staff enter all the codes corresponding to survey responses, various statistical analyses may be conducted for different combinations of questions and subsets of respondents, and data can be displayed graphically using commonly available software. But if the answers are not properly recorded and checked at the outset, the results can be invalid. Thus, time spent editing or cleaning-up survey data before analysis is usually time well spent. Essentially this involves checking each individual questionnaire or electronic record of individual responses to see that answers in combination make logical sense, that respondents skipped certain items appropriately, are qualified to respond, and gave one clear response per question.

17. **Justify any changes to original data.** Sometimes in reviewing questionnaires it becomes clear that some respondents did not understand certain questions, that a response category should be added due to write-in responses, or that entire questions are ill conceived. In such cases, agencies should disregard truly erroneous answers, create additional categories of responses, drop questions entirely, and add information if necessary. However, staff should document any such changes to the original data in a project file and follow a set of standard practices in making revisions.

18. **Make it possible for others to independently confirm the results later.** It is fundamental that research should be repeatable by others using the same methods. In the case of survey data used in performance reports, press releases, or other public documents, it is also quite likely that local agencies will be called upon to prove their claims. In addition, new staff may be assigned to conduct client surveys, and the data may be analyzed later by someone unfamiliar with the original project. As a result, it is critical to maintain project files containing enough information so that the original results may be replicated and future data may be similarly processed and analyzed. If such files are developed routinely and recommended procedures followed throughout the survey process, there is little difficulty with others' subsequent attempts to confirm or expand upon the results. Among the items needed by others as they later attempt to confirm results are:

a) Completed questionnaires or the equivalent in electronic form;
b) Cover letters, introductory letters, and/or instructions to respondents;
c) Tabulations and/or computer output showing results;
d) Documentation of client lists, respondent and population characteristics, survey administration, data processing, and analysis; and
e) Reports or memos explaining results.

Analyze Data and Results

19. **Objectively analyze all relevant, usable client survey data.** After data have been collected, recorded, and corrected if necessary, it is

incumbent on agencies to make full use of the information. Sophisticated analytical methods are probably not necessary, since totals, averages, and percentages provide useful information. At the same time, there are statistical analysis packages that are useful and efficient, particularly if the number of completed questionnaires is large, or the agency wishes to know how responses vary among subsets of the sample or client population. For example, there may be important differences in service areas, type of service user, or season. By analyzing data along such lines, agencies may indirectly find the key to improving operations and the effectiveness of services in the future.

By planning data analysis at the beginning of the survey, even before clients are contacted, agencies may anticipate which factors are likely to influence the effectiveness of services, ask the necessary questions, and conduct data analysis accordingly. Also, planners should anticipate what type of statistics analysts should produce--for example, percentages, medians, or averages--and which responses constitute positive changes for clients. Advance planning of data analysis also helps to avoid asking unnecessary questions, while keeping the process open and honest. Otherwise, it may be tempting to ignore certain questions that reveal problems and ineffective services. Of course, as explained above, some questions may not prove to be as useful as expected. If so, this should be documented as the reason for dropping them.

20. **Attempt to explain unexpected or unusual results.** Results that are difficult to explain or unanticipated should be addressed. While it is possible that respondents simply misunderstood a particular question, other options are more likely. First, agencies should ask what they might have done to influence clients' perceptions. Second, circumstances may have changed. For example, a natural disaster may disrupt functions with a predictable decline in services and their effectiveness, or an unexpected legislative appropriation may account for sudden improvement. In cases such as these, where obvious external factors are important, agencies should note them along with other plausible explanations.

When reporting results, agencies should attempt to identify key factors that influence the likelihood of achieving program goals, discuss past performance and plans to achieve targeted future results, and other factors affecting outcomes. Agencies should also make use of these narrative sections to attempt to explain unexpected or unusual results as objectively as possible, without belaboring every possibility. The main emphasis should be on recognizing significant departures from what has been true historically or was projected to occur, particularly when the agency has good reason to know what might have influenced clients' responses.

21. **Ensure that published data are consistent with survey results.** The public trust requires that agencies avoid any attempt to disguise unfavorable results or draw misleading conclusions from surveys. Also, such practices are contrary to professional ethics that demand that public opinion researchers challenge any interpretations that do not seem consistent with the data available (American Association for Public Opinion Research, p. 111). Thus, it is essential that public reports contain the same data as shown by surveys and that the text of reports matches the interpretation of data by analysts who typically summarize results in

internal memos and technical documents.

Also, it is important at a very basic level to ensure that published data on client responses are accurate and consistent with survey results and previous reports, if any. Data should be double-checked to avoid typographical errors. Each piece of client data should correspond directly to what was found.

22. **Interpret results with the appropriate level of precision and express the proper degree of caution about conclusions that may be drawn from results.** As stated above, all data are subject to error, which limits the certainty with which analysts may draw conclusions. Although every possible precaution may have been taken, it is still important to avoid false impressions about the precision of measurement. Because of practical limitations of sample surveys, it is a good idea to caution readers about the margin of error, if applicable, and other possible sources of error. The *New York Times* and *Washington Post* are noted for the way in which they explain sampling error in polls. They include the following disclaimer: "In addition to sampling error, the practical difficulties of conducting any survey of public opinion may introduce other sources of error into the poll." Also, it is important to avoid the impression that surveys definitely prove the agency's case. At best, surveys may provide support for the agency's claim of performance and effectiveness but, as explained above, other factors may be relevant. In addition, agencies should cautiously present specific results. In most cases, rounding to the nearest percentage point is better than reporting percentages to several significant digits which convey a false sense of precision. For example, 88.35 percent should be rounded to 88 percent.

23. **Make note of possibly significant problems and limitations.** Despite extensive planning and pre-testing, there may be inherent limitations on the usefulness of survey information, and agencies must note any that are likely to have a significant effect on readers' interpretations of results. Limitations often are a function of inadequate sampling, client lists, time and financial constraints, unanticipated events, and the desire to fit existing data to a specific use such as a performance report. Possibly the response rate was low and the represented sample could not be checked, or client lists turned out to be rather inaccurate. Possibly limits on time meant that the cut-off date for responses was set too early, or that data reflect only partial information for some clients and not others and for certain periods. If the results nevertheless have some value, such limitations should be frankly disclosed. Otherwise, if problems are insurmountable, agencies should avoid using such data as performance measures.

24. **Provide basic descriptive information about how the survey was done.** The American Association for Public Opinion Research code of professional ethics and practices includes a set of standards for minimal disclosure of essential information about surveys, as shown in **Figure 1.6** on the next page (Ibid. p. 4-5). These standards require that some discussion of survey planning and administration should be included in any public report of results, including performance reports. Among other items, agencies should include:

a) The exact wording of questions;
b) A definition of the population under study and an explanation of how respondents were selected to participate;
c) The size of the final sample;

d) Response (or completion) rates;
e) Sampling error; and
f) The survey method, location, and dates of data collection.

Although it may seem cumbersome to provide such information, it is standard practice for newspaper polls and other organizations to routinely provide much more detail in their reports.

FIGURE 5-F

American Association for Public Opinion Research Minimal Disclosure Standards

1. Who sponsored the survey, and who conducted it.
2. The exact wording of questions asked, including the text of any preceding instruction or explanation to the interviewer or respondent that might reasonably be expected to affect the response.
3. A definition of the population under study and a description of the sampling frame used to identify this population.
4. A description of the sample selection procedure, giving a clear indication of the method by which the respondents were selected by the researcher, or whether the respondents were entirely self-selected.
5. Size of sample and, if applicable, completion rates and information on eligibility criteria and screening procedures.
6. A discussion of the precision of the findings, including, if appropriate, estimates of sampling error, and of any weighing or estimating procedures used.
7. Which results are based on parts of the sample, rather than on the total sample.
8. Method, location, and dates of data location.

Source: American Association of Public Opinion Research, *Code of Professional Ethics and Practices* (Ann Arbor, MI: September 1991), 4-5.

Conclusion

This section presented a set of 24 guidelines for conducting surveys that, if followed by agencies, help ensure that client survey data in performance reports and other public documents are as credible as possible. These guidelines view client surveys as valuable tools for improving service as well as potentially valid sources of performance information. To maximize the benefits of client surveys, agencies should carefully:

1. Plan and administer a series of standard questions,
2. Demonstrate that respondents are reasonably representative of the client population,
3. Do what is possible to avoid errors,
4. Objectively analyze and thoroughly report the results,
5. Document procedures, and
6. Ultimately make it possible for themselves or others later to replicate the results.

Some steps that are recommended to increase the validity and reliability of survey results, such as follow up calls to increase response rates or checking on the representativeness of a sample, contribute to the costs of conducting surveys. But these additional costs, which are marginal at best, are well worth incurring. By taking these cautionary steps, agencies may well protect the original value of their whole effort to measure the effectiveness of their services for clients.

SECTION 6—RETURN-ON-INVESTMENT

In This Section

Return on investment (ROI) is defined, and the reasons for using this tool are explained. Suggestions for working with return on investment are given and steps for calculating ROI are presented.

What is Return on Investment?

Return on investment (ROI) is a form of economic analysis often used to place outcome information in context. Funding sources, especially state legislatures and Congress, are under increasing pressure to show that the dollars that are spent on human services were dollars well spent. ROI examines the tangible relationship of the expenditures for programs to the value of the results produced by those programs. In today's funding environment, positive ROI occurs when the results of a program have a greater economic value than the cost of the program.

Return on investment can demonstrate a program's value through showing the amount of future costs saved and prevented as a result of the service or intervention. Health screening programs such as dental checkups and mammograms are examples of services that can detect health problems in early stages when treatment expenses are lower. Mentoring and tutoring programs enable some students to remain with their grade level peers. The cost of repeating the grade is avoided, and an additional social benefit occurs as well.

ROI is a helpful tool to use when funding sources and board members begin to look at outcome reports for the first time. When an agency counted numbers of clients served or numbers of services provided, the numbers in the reports were high. When an agency begins to shift to reporting outcomes, the numbers are lower, giving the false impression that the agency was less successful. The basic steps for calculating ROI give agencies a context to show the relationship of the numbers of services and clients to the numbers of outcomes, and then establish the value of those outcomes. The basic steps for calculating family level ROI are found in Figure 6-A.

FIGURE 6-A

Steps to Calculate Family Level ROI

1. How many clients are you serving? Who are they?*
2. What services do you give them?*
3. What does it cost?*
4. What does it cost per service delivered?*
5. What happens to the clients as a result of the service?*
6. What does it cost per outcome?*
7. What is the value of a successful outcome?
8. What is the return on investment?

*Source: Based on materials provided by Reginald Carter, The Accountable Agency, Sage Human Services Guide 34. 1983.

Why Use Return on Investment?

Some programs actually generate revenue for agencies, families, and communities. ROI can be used to show the multiple positive effects of these programs. ROI can also:

1. Help public and private human services prepare for future competition and managed services,
2. Demonstrate that human services can generate a measurable short- and long-term positive impact for the client, agency and community,
3. Demonstrate that a modest success can generate a positive return,
4. Identify when policy choices are made for the common good,

5. Identify program deficiencies or environmental issues negatively affecting the delivery of services, and
6. Establish realistic expectations for numbers of successful outcomes in client-level programs.

Return on investment can be expressed in several ways. Agencies must be careful to choose a method that represents their results fairly, but they must also be aware that if their agency's ROI is being compared with another, they must insure that "apples" are being compared with "apples," not "oranges." **Figure 6-B** uses three different methods to demonstrate ROI for an English as a Second Language Program.

FIGURE 6-B

The ABC agency provided placements for 100 individuals to take an English as a Second Language course. All participants were migrant farm workers currently employed at minimum wage. After three months, 36 participants did not complete course requirements (left the area, incomplete classwork, insufficient test scores), 27 participants completed course requirements but did not pass the final exam, and 37 participants completed all requirements, passed the final exam, and received graduation certificates. Graduates are projected to realize a 20% increase in income in each of the next five years ($16,252). The program cost $125,000 to operate.

A. Rate of Success:

$$\frac{\text{37 successful graduates}}{\text{100 units of service}} = 37\% \text{ ROI}$$

B. Absolute Value:

a. 37 successful graduates x $16,252= $601,340 Gross ROI (Family Level)
b. (37 successful graduates x $16,252) - $125,000 total expenditures = $476,340 Net ROI (community level)

C. Ratio

$$\frac{\text{\$ 601,340 (value of successful outcomes)}}{\text{\$125,000 (total expenditures)}} = \frac{4.8}{1} \text{ Relational ROI}$$

(In words, $1 of investment yields $4.8 of return)

*Source: *Return-on-Investment*, Positive Outcomes™, 1987.

If we cannot predict the future, how can we claim success for cost avoidance? How can we credibly attribute success to prevention? Using ROI in the human service industry means using the same methods to establish credibility that industry uses such as:

1. control groups
2. longitudinal studies
3. product testing
4. quality control assurances, and
5. trade associations.

While the expense for each individual agency to establish scientifically credible predictors of success is prohibitive, the members of the Community Services Network can work together, sharing resources in the form of experience, data, and agency capacity. The Monitoring and Assessment Task Force established a subcommittee in 1998 to begin this work on behalf of the network. Look for updates in the near future on this committee's work.

The following discussion lists some cautions about using ROI from the publication *Return on Investment – Guidelines to Determine Workforce Development Impact:*

1. **Harder-to-serve populations may have lower ROI than easier-to-serve populations.** CAAs must be able to accurately distinguish subpopulations within the overall pool of clients they are serving. Agencies serving clients with multiple barriers to success can show high ROI with relatively low numbers of successful outcomes, but this message can get lost or watered down by mixing in pools of clients who do not share the same demographic, historical, or service profiles.

2. **Non-financial factors may outweigh the economic value and ROI for some expenditures.** CAAs may deliver certain services that do not have a high ROI because this role may have been negotiated at the community level as part of developing a community-wide continuum of care. Or the CAA derives a value in goodwill, visibility, or access. These factors are important to consider on a case-by-case basis.

3. **Community data sources and quality vary, making ROI hard to compare between communities. Pre- and Post-test comparisons may be impossible because of lack of data.** CAAs serving multiple communities may be unable to use a particular piece of data to calculate ROI across their entire service territories. Partner organizations may provide certain data for our calculations, but staff turnover or changes in agency capacities may limit the data they provide from one time period to the next.

4. **ROI is an approximation tool. To remain credible, use conservative measures; stick to things you can defend.** As a network, ROI analysis is a way CAAs become accountable to one another. Agencies must be careful to document each data element they use in their ROI calculations, so that if comparisons are made between agencies, differences in service populations, costs for service delivery, and costs per outcome are apparent.

5. **Industry calculates ROI on an annual basis; be careful not to extrapolate short- term program results into long-term savings. Programs with statutory requirements may throw off calculations.** The new time limits imposed by welfare reform provide an excellent example of this cautionary area. Agencies can only claim savings or cost avoidance for the finite amount of time a client would have remained on welfare.

6. **Costs to assemble data (as variables in ROI calculations) may outweigh program costs.** Many CAAs offer a variety of emergency services to transient populations. Some CAAs offer services on an anonymous basis, such as hotlines for suicide and domestic violence interventions. Many CAAs subcontract small portions of programs. In food pantries and clothes closets, the cost per service may be extremely low. Agencies need to balance the cost to collect and analyze follow-up data with the nature of the service and the characteristics of the target population. Sampling, using the survey techniques discussed in the last section, may be a sensible solution.

7. **Ability to measure and document results varies from agency to agency and program to program, producing different quality of ROI Analyses.** The diversity within the CAA network has created a wide range of capacity issues. Abilities to measure outcomes and abilities to generate the cost per outcome information, which is a prerequisite for calculation of ROI, differ among agencies. The Monitoring and Assessment Task Force has established a Training and Technical Assistance subcommittee to assist agencies with materials and products to help agencies develop capacity in both areas.

8. One further caution: **Don't understate the cost of a service.** Agencies must be careful to include all the costs associated with producing the service and the outcome. Be sure to include the relevant portions of in-kind costs as well as actual expenditures:

1. Salaries and benefits, vacation, holidays
2. Administrative and support services
3. Space, depreciation, security
4. Client income transfers: (rent, utility payments, food, clothes, car repair, etc.)
5. Utilities
6. Technology - fax, computer
7. Travel
8. Training
9. Materials, supplies
10. Reporting
11. Presentation

Missouri

As part of each local agency's annual application to the state CSBG office, return on investment calculations are submitted. Effort is concentrated on family-level returns, but community and agency-level calculations help complete the picture.

Conclusion

ROI changes the way we think about human services. If you are making an investment, the investor expects something back! This is a shift in expectations from entitlements (a guaranteed benefit) to the privilege of establishing conditions for receiving a benefit. This can apply to client level, agency level and community level outcomes. **Appendix 6** contains samples of return on investment calculations used in Virginia as part of an annual report to the legislature.

SECTION 7—TECHNICAL ASSISTANCE AND REPORTING

In This Section

Information on the current status of the implementation of ROMA is provided. In addition, this section includes an assessment format, listing of training and technical assistance resources, best practices and highlights of states experiences with ROMA implementation.

Measuring the Status of ROMA Implementation

In July 1997, using a sample of 42 states and 159 CAAs located in nine different states, the Training and Technical Assistance Subcommittee of the Task Force (see Appendix 1) attempted to measure the status of ROMA implementation. To complete this task, the subcommittee developed a framework based on definitions to describe the levels of understanding and activity on the part of states and CAAs.

It was understood that the implementation of ROMA existed at varied levels. To more accurately assess the status of this implementation process, five definitions were developed that correspond to the MATF's Scales framework (Section 4). Following are the definitions used for surveying local agency capacity:

Baseline:

The organization does not recognize the need to incorporate ROMA concepts or processes into its functioning. No training is provided to the staff or board, and management functions have not been modified. No changes have been made to the organization's program management, data collection or reporting systems. Internal and external communications do not present outcome information.

Elementary:

The organization views the shift towards outcome measures as necessary to comply with reporting needs of particular grant sources. The staff does not envision a full-scale transition. Systems have been modified to meet the existing needs of grant reporting. Policy makers have limited knowledge of the transition. Staff confuses outputs with outcomes. Use of basic surveys and scales is primarily verbal.

Basic:

The organization understands the transition to ROMA in the broadest context but has not grasped the magnitude of the change. Some staff can separate outcomes from outputs and can specify outcomes at the agency, community, and family levels. Some staff can distinguish the relative value of different outcomes by contrasting the costs to collect the data with the outcome's usefulness for marketing and reporting. Some staff can calculate return-on-investment values of outcomes, but such information is not actively used in decision making or external communication. Off-the-shelf measurement tools are used to gather primarily immediate or short-term outcomes. Policy makers are aware of the shift towards outcomes and do not obstruct the change; however, they do not see a role for themselves in the transition or have an understanding of how their responsibilities may be impacted.

Intermediate:

The organization views the transition to ROMA as a process that has an impact on areas, but it has not interpreted outcome principles into all programs and all areas of data management. Staff has customized some outcome measurement tools, and planning and working documents are consistent with outcome needs. Many management and policy reports present outcome information, and outcome information is utilized in their planning and decision making processes. Outcome language is used in external and internal communications, although the usage may be inconsistent.

Advanced:

The organization understands the full implications of the transition to ROMA. Training has been extended to all staff levels, and board members understand, support, and communicate with staff in outcome language. The organization has modified reporting systems to produce outcome information. Job descriptions have been modified to include responsibilities for oversight of outcome processes. Managers and policy makers actively use analysis of outcome information in strategic planning, program evaluations, and fiscal reports. The internal documents of the organization utilize outcome language properly and consistently and the organization communicates with its external partners in specific measurable terms.

Table 1--1995 Agency and State Outcome Assessment Matrix Levels by Agency

Level	Ranking of 159 agencies in AR, HI, ID, LA, OR, PA, SD, and VA	Ranking of 42 State Offices
Advanced	0%	0%
Intermediate	5%	20%
Basic	27%	33%
Elementary	55%	33%
Baseline	13%	14%

The 1995 review was revealing. Across the nation many organizations are just beginning to grapple with moving toward ROMA, while many others are pushing forward and integrating ROMA into all facets of their operations. What this means is that there is still considerable need for introductory assistance in understanding and implementing ROMA; however, an estimated 32 percent of the agencies and more than 50 percent of state offices have begun adopting ROMA principles in their organizations. This point is illustrated in **Table 1**.

The primary goal, however, is to ensure that partners in the Network adopt a results-oriented management and accountability system. In light of the varied levels at which ROMA was implemented, a set of suggested implementation goals have been developed and adopted by the OCS and the Task Force. These goals focus on moving the majority of local agencies from an Elementary-Basic functioning level to Intermediate and Advanced levels within three years. The projected goals are illustrated in **Table 2** below.

Table 2--Projected Goals for Building Network Capacity

Y	1997	1998	1999	2000
A	0	5%	15%	25%
I	5%	15%	25%	35%
B	42%	65%	49%	33%
E	53%	15%	11%	7%

Y=Year E=Elementary B=Basic
I=Intermediate A=Advanced

Training and Technical Assistance

There are a number of ways you can access information regarding ROMA implementation. Currently, training and technical assistance is available through the following vehicles:

- **Consultation**

  Members of the Task Force and members of the Subcommittees are available for consultation on specific subjects or on ROMA in general. Training and technical assistance may be provided via paper, e-mail, phone, or in some cases on-site. A list of the Task Force members is in **Appendix 1.**

- **National Conferences and Workshops**

Training opportunities have been or will be offered at the following:

1. NACAA 1998 Conferences and Workshops
2. NASCSP New State Directors Orientation
3. NASCSP Board Meetings and Conferences 1998
4. State Association Meetings
5. Regional Association Meetings

- **Training Materials**

  Following is a listing of training materials that address agencies at various levels of understanding and implementation of ROMA. Please note that some of these materials are still being developed. Notification will be forwarded as materials are completed.

- **ROMA—An Introductory Discussion of Partnerships, Performance and Outcomes** —a script and transparencies used to guide the speaker through an introduction to ROMA. **See Appendix 6.**

- **Audio Tapes** of six selected topics on ROMA.

- **ROMA Knowledge Base**—a compilation of information covering the areas of knowledge and practice necessary to effectively implement ROMA. This document has been developed by the Training and Technical Assistance Subcommittee and is available in **Appendix 4.**

- **ROMA Guide**—a resource for practitioners to use as they implement aspects of ROMA. As materials are produced, they will be made available for inclusion in the Guide.

- **Beyond the Basics** —a training tool designed to take the participant into a more in-depth application of ROMA. This document is currently being developed and is scheduled for release in 1999.

- **Demonstration States** —six pilot states funded to begin addressing ROMA issues.

- **Resource Lists** —see **Appendix 2.**

OCS and the Task Force will continue to provide a mix of training opportunities and a variety of technical assistance approaches. The Task Force will continue to work on tools and concepts such as creating more common language, sharing best practices, developing an agency scale and ongoing assessments of where the state and Community Services Network are in implementing ROMA. In addition, continued OCS funding of both NACAA and NASCSP will support training tracks at all conferences and meetings. Also

in 1998, OCS will utilize its Training and Technical Assistance Program to support several ROMA activities and related issues.

*Best Practices for Implementation

Provide Sufficient Time

The states that first implemented an outcome orientation did so early on before even the formation of the Task Force. This additional time provided these states with opportunities to make mistakes and learn from them. The lessons have included:

1. The process is an evolving one that may take two to three years to get up and running smoothly;
2. All issues will not be resolved before a system is tried; and
3. The process is immensely time consuming because if done right, it affects numerous existing systems—data collection, financial, planning and management.

Build and Maintain Strong, Collaborative Relationships Between States, the State CAA Association and the Local Agencies

Collaboration between the state office and the local agencies and their statewide association is perhaps the most important factor in the successful implementation of outcome measurement and management. When this collaboration is successful, local agencies are co-authors of new system requirements. They become its proponents and see themselves as responsible for its success. Without this process, new state requirements may be seen as burdensome tasks to be undertaken for compliance purposes, not for providing better service to clients.

Be Comfortable with Chaos

Creating a system for determining outcomes of any human and community service system is difficult at best. The CSBG is extraordinarily diverse, with no two local agencies, no less states, operating in exactly the same fashion. Developing an accurate and consistent system of collecting and reporting outcome data will take a number of iterations. This may mean putting a system in place that needs to be modified and adjusted.

Be Comfortable with Conflict

In implementing any kind of change, some conflict should be expected and accepted as part of the process. Conflict may motivate us to ensure that changes are well planned, not randomly or impulsively created. Ongoing discussion between stakeholders is key. By including CSBG outcomes in these discussions, stakeholders may be able to focus on their shared goals for low-income communities and develop greater clarity in their roles in achieving these goals.

Balance Flexibility and Direction

A pressing issue at the state level has been the development of a flexible outcome measurement system. States have chosen a wide range of options for balancing the need for local control and the need for collecting information with statewide aggregability. Some states have left the field wide open, while other states have developed a list of agreed upon measures that agencies will report on. Finally, some states have chosen a limited number of common measures and asked agencies to report on others, as appropriate.

Look Beyond Current Structure and Boundaries

States that have successfully implemented outcome measures have been willing to look beyond the current boundaries of their work. State offices and local agencies have entered into discussions across programs and designed overarching planning and intake systems that serve multiple programs and funding sources. For example, in one state, CSBG funds were used to design a database program and provide training to local agencies, while computer hardware was provided to those agencies needing assistance by the weatherization program. At the local level, one agency realized that they could use a database system designed for LIHEAP, with minor modifications, to track the progress of clients in other programs.

Be Willing to Make and Learn From Mistakes

Creating an environment that tolerates mistakes, in the effort to learn, has been helpful in implementing ROMA. This kind of environment encourages risk taking and the discovery of new ideas. In addition, it has been particularly important in building trust among local agencies and state agencies. When it is okay to try, and possibly fail, people are more willing to try new technologies rather than rely on traditional methods.

Ensure Involvement

Commitment of multiple players at the State and local levels including front-line workers and monitors, along with senior management and planning staff, ensures that issues relating to particular activities are identified and considered. In addition, involving all levels builds a commitment to the new methods throughout state and local organizations.

Develop a Common Language and Definitions

States that have begun to look seriously at the impact of CSBG services have spent time developing agreements among the stakeholders in their states about what terms will be used and how they will be defined.

Allocate Resources Appropriately

Effectively implementing and utilizing outcome measurement systems requires an awareness of what is realistic both in terms of establishing implementation and understanding the data collected. It is important for stakeholders to recognize that it takes time and funds to train front line staff, to redesign computer database systems, and to collect meaningful data. In most cases it will take at least one year to get new outcome- oriented management systems up and running.

Set Realistic Targets

It is important for state offices and local agencies to recognize that 100 percent success is not possible. In fact, depending on the program, a 20 percent change may be both realistic and cost effective. For example, traditional for-profit headhunters only place about 20 percent of their clients. If a local agency were able to match this rate with their clients, who have far greater educational and skill deficits, it would be spectacular.

Use a Continuous Improvement Approach

Many states have used outcome measurements to refine a continuous improvement approach to CSBG services. They have looked not only at the end result of services but at how this knowledge fits into the

planning cycle and connects back to the needs assessment process. In one state, agencies were asked to submit their needs assessments for review and comment prior to their community action plans. This gave agencies the opportunity, if necessary, to improve their needs assessment prior to planning their activities for the future.

Use Data Successfully in Marketing

Agencies and states that have used data successfully to demonstrate what they do are more likely to include the use of outcome measures. They are more likely to understand that while initially resource intensive, a results-oriented approach to management and accountability may protect and increase resources available. It is viewed as another approach to assisting them in telling their story to potential funders.

Conclusion

OCS understands that implementation of ROMA takes time and resources. However, the CSBG community has made great strides in the transition from traditional practices to results-oriented management practices. With additional time and support in the form of training and technical assistance, the majority of agencies that comprise the Community Services Network will be well on their way to successful ROMA implementation.

*Best Practices Source: "Implementing Results-Oriented Management and Accountability for the Community Services Block Grant Program.....A Prelilminary Report on States Efforts. National Association for State Community Services Programs. Jakopic, Julie - Washington, DC, 1997

ROMA...Beyond the Basics

Dear Network Members and Colleagues,

The Monitoring and Assessment Task Force is pleased to present this training tool titled *ROMA...Beyond the Basics*. This presentation represents the vision and work of many people in the Community Action Network and we applaud them for sharing their expertise and resources. *Beyond the Basics* is aimed at helping the Network make significant progress in the orientation, training and implementation of Results Oriented Management and Accountability (ROMA).

The presentation consists of 26 Color Slides with an accompanying page of text for each slide. When presenting *Beyond the Basics*, one has the option to show the entire set of slides or a group of slides that only covers specific information. For example, if training is to cover the topic of Return-on-Investment (ROI), then the slides and text on that topic can be extracted and presented. The slides were developed in Power Point 97 with "no effects." Agencies may obtain an electronic copy of the presentation through the ROMA Website and add enhancements if desired.

Because *Beyond the Basics* is a companion piece to the *ROMA Guide*, cross references contained in the presentation will lead the trainer to more in-depth discussions, information, and other resources contained in the *Guide* or at the ROMA Website <http://38.152.102.181>

The MATF hopes that this presentation will be a catalyst for encouraging collective learning, joint action, and multi-level capacity building among members of the Network. The Task Force is committed to continuing the development of existing resources and exploring innovative approaches that will enhance CAA efforts in strengthening families, communities, and agencies.

The Monitoring and Assessment Task Force
July, 1999

ROMA...BEYOND THE BASICS

A Results Oriented Management
and Accountability Training Tool

Monitoring & Assessment Task Force
Washington, DC
July, 1999

Introduction

ROMA...Beyond the Basics

Three important management concepts are gaining prominence and affecting the way public programs conduct their services: These are: **managing for results; involving customers; and empowering personnel and partners.**

Recognizing this, Donald Sykes, the Director of the Administration for Children and Families' Office of Community Services(OCS), in conjunction with many key leaders of the Community Services Network, established the Community Services Block Grant (CSBG) Monitoring and AssessmentTask Force (MATF) in August 1994 to:

1. Enhance and improve program performance of the network of community action agencies and states toward better outcomes for low-income individuals, families, and communities and;

2. Improve how Community Action Agencies *"tell our story."*

Using a partnership approach to the administration of the community services program, a strategy for developing plans and techniques that focuses on a performance-based model for management is being called **ROMA...Results Oriented Management and Accountability.**

ROMA requires that measures of success be targeted to the performance of programs in the broadest sense. Therefore, the term Community Services Network has been chosen to describe the combination of community-based programs and partnerships that:

- promotes self-sufficiency and vibrant, healthy communities for low-income people;
- is provided by Community Action Agencies or other agencies eligible for funding under the Community Services Block Grant; and
- addresses one or more of the national goals of the Community Services Network.

ROMA emphasizes that each state engage in its own strategic planning process to address how it will contribute to the accomplishment of the national goals. Diversity among program structures and approaches is encouraged and indeed celebrated as customers become increasingly empowered and providers become oriented to using the best means available to achieve goals the Network holds in common.

This ROMA...Beyond the Basics presentation is one of several tools compiled by the Monitoring and Assessment Task Force, utilizing concepts, ideas, and best practices developed by the Network. It is a companion piece to the ROMA Guide for building the capacity to implement ROMA. Additional information and resources can also be found at the ***ROMA Web page:< http://38.152.102.181>***

ROMA IS...

A Common Language
Outcome Focused
Inclusive
Flexible

ROMA is a framework for marrying traditional management functions with a new focus on accountability. It is the **common language** for local agencies to use to respond to the Government Performance and Results Act of 1993 (GPRA) which requires that federally funded programs demonstrate measurable outcomes.

The National CSBG Monitoring and Assessment Task Force is comprised of representatives from local CAAs and CSBG state offices, the national associations, and federal staff from the Office of Community Services and the Head Start Bureau.

The Office of Community Services (OCS) encourages states and local agencies to increase their capacity to function in a results-oriented environment in order to comply with GPRA.

ROMA emphasizes the use of outcome measures to provide the clearest picture of how the Network is affecting the lives of the people and communities it serves. Outcome measures also help us "tell our story."

OCS respects the complexity of the Community Services Network, and understands that a one-size ROMA process does not fit all local needs, priorities, and variations in local agency operation. Agencies are encouraged to select measuring systems that are **outcome focused** and that are appropriate to the agency's current and emerging capacities.

The MATF recommends that agencies explore best practices internal and external to the network as they design their ROMA structure. **Inclusion** of staff, board, clients, and partners (both internal and external) is a key success factor.

ROMA suggests that both state and local agencies have the **flexibility** to adopt measures that are most relevant to the goals and objectives established for their own communities. Individual local agencies should collect data and report on measures that have been agreed to as their priorities.

The Monitoring and Assessment Task Force (MATF) supports an approach to the overall management of CSBG and other programs operated by CAAs that places a premium on empowering low-income people to achieve outcomes mandated in the CSBG legislation. These mandated outcomes correspond to the MATF's goals for family stability, self-sufficiency, and community revitalization.

***Key Point**: At the heart of ROMA is the belief that effective service delivery systems are created by a network of providers who work together to achieve common goals on behalf of their customers.*

The Framework

6 National Goals

3 Focus Areas

The Task Force believes that an outcome-oriented approach to monitoring and assessment must begin with a clear statement of the goals for the program. While developing the goals and measures, the Task Force solicited comments and suggestions from local community action agencies CAAs, and State CSBG program directors. These comments and suggestions were instrumental in directing the Task Force to limit the national strategic plan to a broad "umbrella" of *six national goals*. While all states and CAAs are being asked to report on their activities and services using these goals, the goals are flexible enough to allow local agencies to pursue objectives that meet their unique conditions.

The six goals are:

1. **Low-income people become more self-sufficient** (*Family*)
2. **The conditions in which low-income people live are improved** (*Community*)
3. **Low-income people own a stake in their community** *(Community)*
4. **Partnerships among supporters and providers of services to low-income people are achieved** *(Agency)*
5. **Agencies increase their capacity to achieve results** *(Agency)*
6. **Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive system** *(Family)*

CAAs are not expected to conduct activities or create services designed to reach each goal. It is understood that agencies provide a range of services directed at individuals, families, and community initiatives. In addition, CAAs are continuously looking for ways to improve how they conduct business. Therefore, the Task Force developed the six national goals so that each goal focuses on one of three areas:

1. **One client or *family* at a time;**
2. **a *community* system or condition; or**
3. **an *agency* or programs.**

When addressing one or all three areas of focus, CAAs will be able to connect the national goals to activities in a way that helps gauge progress toward self-sufficiency.

Key Point: *Each state must report on at least one measure under each of the National Goals. The states have flexibility in determining how many measures on which an agency reports. Agencies must report on at least one national goal.*

Family Level Goals
Goal #1 - Low-Income People Become More Self-Sufficient
Goal #6 - Low-income People Achieve Their Potential by Strengthening Family and Other Support Systems

Goals 1 and 6 are designed to measure change to one client or family at a time. The Task Force identified the following dimensions of change at the **family level** for which outcome measures could be developed:

- Income
- Education
- Family Functioning
- Transportation
- Employment
- Health
- Housing
- Basics Needs
- Community Involvement
- Substance Abuse
- Child Care

If an agency has decided to report on the family level Goal 1 - Low -income people become more self-sufficient, it could measure progress in reaching this goal by collecting the following type of information:

- Number of participants seeking employment who obtain it compared with the total number of participants;
- Number of participants maintaining employment for twelve months; or
- Number of households gaining health care coverage through employment.

An agency that measures progress under family level Goal 6 – Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive systems, may choose to collect the following types of information:

- Number if households in crisis whose emergency needs are ameliorated.
- Number of aged households maintaining an independent living situation.
- Number of high consumption households realizing a reduction in energy burden.

There are many ways to define and measure "self-sufficiency" in your local community. Recognizing this, the Task Force has created numerous measures for each goal. Local agencies are being asked to select at least one measure for each goal they are working to achieve. In choosing measures, agencies may use the national list of measures and develop additional measures more applicable to their work.

Key Point: *The Monitoring and Assessment Task Force has developed a comprehensive list of measures for each national goal which can be found in the ROMA Guide or at the ROMA Web Page <http://38.152.102.181>*

Community Level Goals

Goal #2 - Conditions in Which Low-Income People Live Are Improved
Goal #3 - Low-income People Own A Stake in Their Community

[1]**Goals 2 and 3** are designed to measure a community system or condition. If the services of your agency were designed to change a community condition, system, or ownership, you would adopt a goal designed to measure change in community systems; such as Goal 2 – The Conditions in Which Low-income People Live Are Improved.

In developing the **community level goals**, the MATF identified five dimensions of change for which an agency can craft outcome measures:

- Public Policy
- Equity
- Civic Capital
- Services & Support Systems
- Economic Opportunity

If an agency decides to measure change in community conditions, they may collect the following measures:

- Number of accessible, living wage jobs created and/or retained.
- Increase in affordable housing stock through new construction
- Increase in access to community services and resources by low-income people

An agency that measures progress under Goal 3 – Low-income People Own A Stake In Their Community, might select the following measures:

- Increased participation of low-income people in the active management of their housing
- Increase in access to capital by minorities.
- Amount of community investment bought into the community by the Network and targeted to low-income people.

Crafting outcome measures entails a great deal of flexibility and attention to detail. The Task Force struggled over whether all CAAs should report on certain core measures to help ensure more standardization in reporting and a more consistent story of the Network's achievements. In the end, the Task Force decided that greater flexibility would allow time for further exploration of community need, increased local capacity, and greater flexibility in the process.

***Key Point**: In the short term, States will need to aggregate data by goal, meaning that some consistency will be lost. As experimentation continues, a few solid measures will emerge that will allow for standardization at the national level.*

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[1] Source: *Community Scales: A Ladder to the twenty-first Century; Health and Human Services, Washington, DC: Office of Community Services, 1997*

Agency Level Goals

Goal #4 - Partnerships among Supporters and Providers of Services to Low-Income People Are Achieved

Goal #5 - Agencies Increase Their Capacity to Achieve Results

Goals 4 and 5 address collaboration among partners and members of the Network which is key to building an agency's capacity to implement outcome management systems and measure progress toward goal achievement. The Network is currently engaged in a conversation about "what constitutes organizational excellence" with the expectation that a common definition developed by the CAA Network will enhance the development of agency level outcome measures. In the meantime, the Task Force has identified the following types of change related to capacity building and performance of an agency:

- Governance
- Linkages and Relationships
- Compliance
- Cultural Sensitivity and Diversity
- Equity
- Workforce Environment
- Planning, Measurement and Evaluation
- External Communications
- Information Management

Agencies can establish systems and adopt measures that chart progress under Goal #4 – Partnerships Among Supporters and Providers of Services to Low-income People Are Achieved. The following is a sample list of suggested measures that was developed by the Task Force to describe partnerships established and/or maintained with other public and private entities:

- to provide services to low-income people;
- to complete the continuum of care for low-income people; or
- to ensure ethnic, cultural, and other special needs considerations are appropriately included in the delivery system.

A sample list of measures for reporting on progress toward achievement of outcomes under National Goal #5 – Agencies Increase Their Capacity to Achieve Results, is as follows:

- Total dollars mobilized by the agency compared to CSBG dollars;
- Number of Boards making changes as a result of periodic organizational assessments;
- Increase in community revitalization as a result of (agency) programs.

A collaborative approach to implementation helps ensure that ROMA requirements are realistic and not overwhelming, and that those involved understand how outcome measurement is directed at providing better services to families and communities. Involving all will lead to a more thorough and realistic plan, and greater commitment by stakeholders. It will also foster a feeling of empowerment.

***Key Point**: While you may find using the suggested goals and measures easy, implementing an outcome approach agency-wide entails the creation and execution of a plan developed in concert with your partners, board, staff, and customers.*

Distinguishing Between Levels

Family
Agency
Community

[2] Agencies participate in activities that produce outcomes at the family, agency, and community levels. Some activities produce outcomes at all three levels concurrently. Other activities produce results targeted to a specific outcome level. The key to differentiating the outcome levels is answering the following question: **What, specifically, is going to change? The chart below shows the three levels of outcomes or the specific change to take place when working with volunteers:**

Different Family, Agency, and Community Level Outcomes

Program Area: VOLUNTEERING

Outcome Level	Family	Agency	Community
	To obtain job skills To obtain job contacts (networking) To maintain mental alertness To maintain level of human interaction and contact To obtain resources (community garden produce, child care, and recreation opportunities for children)	To increase resources To fulfill program requirements (match, in-kind) To develop technical expertise of staff and/or board To improve_____ (any agency system's capacity or functioning such as MIS, finance, personnel) To increase agency capacity to serve more clients/meet more community needs	To improve service delivery system To increase capacity of service delivery system (volunteer, ambulance, fire companies, town watch, food pantries, RSVP) To reduce isolation of community members (Meals on Wheels, RSVP) To improve conditions of equity (community advocacy groups, NAACP) To change public policy (citizens' advocacy groups) To improve economic opportunity (chamber of commerce)

Key Point: *Family level outcomes occur one family at a time. Agency level outcomes are changes in capacity and performance of agency programs and operations. Community level outcomes measure changes in systems or conditions and are brought about by the actions of a group of people (not an individual.)*

[2] Source: *Community Level Outcomes*,©1997 Eleanor Hunnemann & Frederick Richmond, Positive Outcomes

Measuring Change

Contrast in Levels of Change

[3] Sample of Different Levels of Conditions

	LEVELS OF CHANGE (Dimensions)		
Thresholds	**FAMILY**	**COMMUNITY**	**AGENCY**
Thriving	Family systems are strong and healthy, fully functional. Family is achieving its own self-determined goals.	Social systems and infrastructure are strong and healthy. Citizens are safe, healthy, benefit from sound economic development and take pride in community.	Agency is healthy in all respects and excels in key areas. Organizational decisions based on sound strategic planning. Staff and board are creative and ensure that agency is a "learning organization", promoting growth of all staff and volunteers.
Safe	Family is strong and has made significant progress in improving its circumstances; is generally secure. Family not dependent on traditional federal programs, has clear vision of its ultimate goals.	Community is strong and has made significant progress in improving its social and physical conditions. Has a clear vision of its future with intervention to support goals and strategies.	Agency is strong and has clear vision/mission. Staff morale is high. Agency is staffed and governed by competent, committed persons. Intervention is directed toward achieving highest standards operation
Stable	Family is no longer in danger; is willing to change; is planning for its future. There is demonstrable progress toward reduction in dependency. Support services are provided to assist families in implementing their plans.	Community is no longer in danger. Broad community consensus and appropriate collaborations are in progress. Citizens perceive improvements in community conditions and well being.	Agency is no longer in danger. Is developing strong internal commitment to change and has developed systems to address organizational weaknesses. Agency has completed self-assessment and adopted corrective plan.
Vulnerable	Family is secure from immediate threats to health and safety, but has not yet developed or committed to plans for long-term growth and change. Family continues to need safety net interventions to improve.	Community is secure from most critical threats to health and safety of its residents. There are diverse and competing proposals for system change. Intervention facilitates development of common consensus or addresses a specific critical need.	Organization has weathered immediate threats to survival, but is on "probationary" status. Needs to develop support and intervention. May need change in staffing and/or governance. Has begun to stabilize financial condition.
In-Crisis	Family cannot meet its needs. Presently unwilling or unable to work toward positive change. Family systems have collapsed. Outside intervention is needed to move out of danger.	Community infrastructure is inadequate to meet needs of community and its residents. Social and political fabric is in danger of collapse. Community systems are unwilling or unable to respond to urgent needs.	Ineffective in fulfilling organizational mission; has weak administrative, governance, or control capabilities. Strong outside intervention needed to prevent organizational failure or bankruptcy.

[3] Exerpt: *The Family, Community & Agency Development Matrices*, 1996, William S. Hamilton & Community Action Marin

Outcomes Objectives Are SMART

- **The World of Outcomes**
- **Types of Outcomes**
- **Outcome Characteristics**

The world of outcomes can be better managed if the organization comes together and adopts [4]agreed upon terms and definitions to help guide the crafting of appropriate performance measures. Outcome objectives should be **SMART**:

- **S**imple, clear and understandable
- **M**easures an end, not a means to an end
- **A**chievable
- **R**ealistic
- **T**ime Specific and identifies a specific group of clients

In shifting to a ROMA approach, agencies will be writing their objectives in an outcome language in addition to traditional measures of process and services provided. For example, Instead of stating that we will "refer 500 clients to the Section 8 Housing Program," outcome language would state that those 500 clients were "placed on the Section 8 waiting list, and of those, five clients received Section 8 assistance and reported stability after three – six months." The above outcome scenario or story provides a description of what happened after the referral was made, and has the characteristics of a SMART outcome objective.

[5]Outcomes are the result of a program activity compared to its intended purpose. Quality or customer satisfaction and effectiveness indicators may all be used to measure outcomes. It is sometimes useful to distinguish between the "end" outcome and the "intermediate" outcomes that lead to the ends desired, but are not themselves "ends."

For example, a 36-month employment program aimed at increased self-sufficiency for custodial fathers may involve a sequence of measurable outcomes that include improved interview skills, increased job search skills, enhanced self-esteem, achievement of employment. Once this sequence of "intermediate outcomes" is achieved, ***then*** fathers demonstrate improved post-employment retention skills employers take advantage of tax incentive demonstrate a change in behavior toward vulnerable populations, and provide on the job training incentives. ***Then*** employment is retained for 2 years or more, ***and*** housing, nutrition, transportation, health insurance and child care are stable; ***and*** the client/family becomes more self-sufficient (**final outcome**.)

There are several types of outcomes in addition to those that focus on duration (i.e. Intermediate, short-term and long-term.) Outcomes can also measure the direction of an activity, such as positive, neutral, or negative. Other types of outcomes include those that are unintended, developmental, and dependent.

Key Point: *Any type of outcome can occur at any level—Family, agency, or community.*

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[4] Reference: *Lexicon of GPRA Terms, Implementation of the GPRA*—CFO Council/May 1995
[5] *Lexicon of GPRA Terms*, May 1995

Tips for Writing Outcome-Based Objectives

- **Establish the Size of the Pool**
- **Specify Time Frame**
- **Estimate # of Clients**

[6]Establish the size of the pool. Include in your objective the total number of clients you believe will be served with the funds allocated for this a specific objective. For example, if your agency provides affordable housing, you might identify a *pool* of 1000 unduplicated families that are eligible for housing assistance. Of these families, eviction of 390 families is stopped for 30 days (time frame) as a result of providing rental assistance.

The estimated number of clients who will achieve the outcome within the time frame of the grant may be a very small number of the total clients served. For example, of the 390 families provided rental assistance, 50% will retain housing for 3 months; 25% will retain stable housing for 6 months.

As mentioned, improving family functioning, community conditions and organizational excellence requires flexibility and recognition that "one size" does not fit all.

[7] Illustration

National Goals: 1, 2 Program Title: Housing Level of Focus: Family

Service Category	Problem as identified by Needs Assessment	Total Client Pool*	Specific services provided by staff or volunteers	Outcome, including number of clients to achieve this specific outcome	Measurement Tool	Measurement Time/Process
Housing	Housing is unaffordable. Average rent is too high	1,000	**Eligibility screening for emergency payments**	Eviction stopped for 390 families Of these families, 50% retain stable housing for 3 months; 25% retain stable housing for 6 months	**Mail Surveys, questionnaires, and case records with housing stability scale**	Four and seven months after a payment clients asked if their housing situation is stable
	Same as above		**Help clients apply for transitional housing program that includes job training**	36 clients apply; 4 clients accepted into transitional program which subsidizes rent while improving ability of family to secure higher paying job. 90% retain stable housing for 3 months. 75% retain stable housing for 6 months	**Case records with housing stability scale and questionnaires**	Same as above

Key Point: *Although the total number of clients served may be small compared to the pool, it is important that this number be reported accurately. It is this honest account of the outcomes achieved at different stages of service delivery that can bring agencies closer to answering the "so what" question.*

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[6] Used with permission Copyright © 1997 Eleanor Hunnemann & Frederick Richmond, Positive Outcomes™

[7] Used with permission: Hunnemann and Richmond, Positive Outcomes™ *Outcome-based Objectives Worksheet Sample*

More Tips...

- **Formulate Objectives Together**
- **Classic Mistakes To Avoid**

[8]For each national goal selected by an agency, management will have to formulate specific objectives designed to achieve that goal. Most objectives are aimed at effectively providing services or safeguarding assets and accounting for the investment of resources. Management will typically choose a specific set of objectives, taking into account a range of factors, such as: program budgets, environmental risks and opportunities, systemic strengths and weaknesses and other relevant conditions. Agencies might discover that some of their objectives are conflicting due to timeliness vs. quality, resource allocation or factors. To help ensure that SMART objectives are selected, program managers must formulate objectives together. Joint planning can help agencies strike a balance in establishing priorities and developing minimum standards for each objective.

[9]When writing outcome objectives, agencies should avoid some of the following classic mistakes:

1. Comparison to a Moving Target – By June 30, 1996, the average tenth-grader will score higher than the national average in both math and reading levels.

   Hint: Without specifying the year, we don't know which national average we're using. When agencies pick measures which themselves change, they risk not receiving credit for interim progress. For example, if the students in the school improved their scores by 10 points, and that would have been enough to exceed the 1994 national average, but the 1995 national average itself increased by 10 points, so the school could neither receive credit for meeting this objective nor for improving the test scores from one year to the next.

2. Desired Outcome Does Not Occur and Cannot Be Measured Within the Time Frame of the grant. For example, by June 30, 1996, 50 families receiving housing payments to avoid eviction or prevent foreclosure will report that their housing situation is stable one year after the intervention.

   Hint: Unless the families were all enrolled on the very first day of the one-year grant period, we will not be able to conduct follow-up within the grant period.

3. Service (activity) is Stated as Outcome. For example, by June 30, 1996, 40 children of the outreach center clients will receive healthy cooking and eating information.

   Hint: This example lists activities, not outcomes.

4. Percentage Change May be Statistically Impossible to Achieve. For example, by June 30, 1996, 25 adults will increase their reading levels by 50%.

   Hint: If the client's pre-test is 70 on a 100 point scale, he must increase his reading level by 35 points to be successful. 35 plus 70 points equals 105 points, which is impossible to achieve. The objective would be better stated as achievement of a specific score or, alternatively, phrased as a decrease in the barriers or gap between pre and post-test results.

Key Point: *ROMA represents a framework containing many options for selecting specific goals, objectives, activities and outcomes; and for measuring actual results. Agencies should pick and choose the specific parts of ROMA that are appropriate for them. More hints and examples on writing objectives can be found in the ROMA Guide and Webpage: http://38.152.102.181*

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[8] Reference: *Lexicon of GPRA Terms, Implementation of the GPRA*—CFO Council/May 1995

[9] *Classic Mistakes* - Used with permission Copyright © 1997 Eleanor Hunneman & Frederick Richmond, Positive Outcomes™

Steps to Measuring Performance

- **Identifying Targets and Benchmarks**
- **Using Indicators and Measures**
- **Measuring Achievement**

[10]Peter Drucker stated that, "Both achievement and accountability are only possible when performance is measured against specific, limited, clearly defined targets." A benchmark is a comparative standard for evaluating accomplishments against exemplars of excellence. A benchmark is a targeted goal that is beyond current capabilities, but for which the organization is striving.

Once an agency's board and management staff develop a written vision/mission statement, adopt entity-wide goals, and create SMART objectives, it's important to then involve program managers and staff in the process of identifying quantifiable benchmarks or targets as steps aimed at achieving objectives.

For example, the objective of issuing Low-income Home Energy Assistance (LIHEAP) payments promptly could have a target of issuing payments within 14 days. Such a target provides a specific quantitative benchmark by which achievement of the objective can be measured. There are several methods which may be used to set targets for a particular objective, such as current figures, improvement on current figures, average behavior, best practice, best achievable practice with current resources (frontier) and management decision given resources.

Once the targets have been identified, the second step in performance measurement is to identify appropriate performance indicators and performance measures for each goal level selected (Family, Agency, Community.) For example, if Goal 5-"Agency improves it's Capacity to Achieve Results" is selected, then an **indicator** might be "the percentage of the workforce completing training in new tracking technology." A performance **measure** might be "the number staff trained that utilize the new technology to prepare accurate outcome reports, and the **outcome** might be "improved agency effectiveness in conducting outcome monitoring.

The third step in performance measurement is to measure achievement using indicators and measures. There are several ways to describe those indicators and measures: (efficiency measures; effectiveness measures; input indicators; outcome indicators; impact indicators; and significant indicators (trends in achievement over time).

Measuring achievement addresses how an agency measures efficiency, effectiveness, cost, quantity, volume and other areas of the operation. Once the indicators and measures to be used are selected, data must be gathered. Reliable data is crucial, and agencies must determine whether gathering the data would be cost-effective. Improvements in management information systems may be needed in order to produce the data necessary to analyze internal and external systems that sustain outcome-oriented management.

***Key Point**: Developing outcomes is a long-term process. Outcome-oriented management changes the way an organization does business. Staff must view this new way as central to their work and not as an additional isolated activity.*

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[10] Lexicon of GPRA Terms, *Implementation of Government Performance and Results Act* – CFO Council/May 1995

Performance Measurement Steps Con't

- **Analyzing The Results**
- **Interpreting Results**
- **Reporting Performance**

[11]Analyzing the results is the fourth step in performance measurement. There are five areas of analysis that can guide agencies in answering this question:

- Trend or time series analysis examines the behavior of a variable over time. For example, we could chart the percentage of children under 5 years old enrolled in Head Start against the number of eligible children in "Our Town" over a period of time.

- Variance analysis compares the actual results for a variable with a "comparator," such as a normative standard, a budget, or a target. For example, we could compare the percentage of children under 5-years old enrolled in Head Start in Our Town with a planned target percentage for that area.

- Cross-sectional analysis compares an attribute of one entity with the same attribute of another entity. For example, we could compare the percentage of children less than 5 years old enrolled in Head Start in Our Town against those enrolled in 5 different towns.

- Structural or decomposition analysis breaks a variable into its component parts. For example, the participation cost per child broken down into direct costs, indirect costs, and service delivery costs.

- Causal or statistical analysis isolates the factors causing changes to a variable. Causal analysis could be used to identify the *reasons* why the percentage of children under 5 years of age enrolled in Head Start is significantly higher in Our Town as compared with another town.

Interpreting results, the fifth step in performance measurement, helps identify trends, comparisons and causes of results. Using the results of the analysis described in step four, we can identify reportable trends, compare them with similar programs or entities and isolate the causes. For example, a trend analysis might reveal that there has been an alarming increase in the number of children eligible for Head Start in the last 2 years, which would be a reportable observation. Comparisons also provide useful information—it's interesting to know the actual results, but it is more useful to know the actual results compared with an average, the best, a target, or the budget.

The final step in performance measurement is to report performance measurement results by writing the discussion and analysis using charts, graphs and narratives. Reporting causes of program results is very important. Reports are much more useful when the causes of trends are explained rather than just reported. This information is useful to decision makers in drawing attention to higher organizational levels to address the causes that are not controllable by program managers. The discussion and analysis should be brief. Rather than summarizing several indicators and measures, it may be preferable to **choose a few key indicators** that are representative, or that warrant special attention.

Key Point: *Performance measurement reporting is not an easy process. It should begin with a clear understanding of the mission of a program and the preparation of strategic plans that define goals, objectives and targets to be achieved. In developing their strategies to overcome implementation barriers, CAAs should have established measurable targets, defined methodologies for measuring progress and implemented systems to gather essential data.*

[11] Source: Excerpts from *Government Accountants Journal*, Summer 1992

Outcome Based Planning

- **What is ROMA Planning?**
- **What's Included in the Plan?**
- **Who Should Plan?**

[12]Collaboration among the state office, the statewide association, and the local agency is key to successful planning and implementation of ROMA. ROMA planning helps you deliver better services to customers. Outcome planning improves your program management by providing a roadmap and a method for checking on your progress. A well developed plan establishes a firm basis for your priorities and performance measures and gives you good information on which to base decisions regarding funding and service delivery.

An outcome-based plan includes:

- An assessment of the current situation including a customer needs assessment survey, an analysis of resources available, and an assessment of the current strengths and weaknesses, current opportunities, and threats to the program.
- A mission statement and a vision statement that puts customers first
- A list of goals and objectives
- A discussion of the approach or strategies to accomplish the goals and objectives
- A list of the performance measures that will be used to measure progress toward achieving the goals and objectives

Everyone should plan. OCS must comply with the GPRA of 1993 and should help all community action partners plan together to achieve shared commitments. States must include all the elements of a plan in their applications for grant funding.

CAAs are required to plan and, for many boards, strategic planning will be the normal function most affected by ROMA. It is also the easiest area to make the transition. Operational areas take longer to convert. A board may spend three hours deriving a ROMA-based strategic plan, which will require 3 years of work for the staff to provide valid data and feedback for evaluation and modification of future plans. Realistic 2 and 3-year time frames should be established for the conversion. During that time, the board may be called upon to interact with funding sources pressuring the agency for quicker transition, i.e. unrealistic demands for data or unrealistic numbers of positive outcomes.

CAAs are responsible for preparing their CAA plans, conducting their needs assessments and engaging customers, partners and stakeholders in the planning processes. States are responsible for preparing their applications for CSBG funds, which include elements in a statewide community action plan which summarize and aggregate each CAA plan.

Overall, the way plans fit together is a reflection of what partnerships exist and how they work. The federal government, states, and CAAs will fit together in different ways in different places- - with all partners in the Network working to achieve the same goals.

Key Point: *Training and technical assistance efforts should focus on using the planning process to foster team building and partnerships that improve services to low-income people.*

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[12] Source: Implementing Results-oriented Management and Accountability For CSBG, A Preliminary Report On States Efforts, NASCSP J. Jakopic, June, 1997

Outcome Measurement Tools

SCALES...

A continuum that describes different states or conditions of status

[13] The movement away from measuring outputs that say nothing about the impact of the services, to measuring outcomes that attempt to describe the effect of an agency's programs requires use of measurement tools such as scales.

A scale is a continuum that describes different states or conditions of status. It has a beginning point and an ending point, with increments in between to help measure change. One example of a scaling tool we us daily is a thermometer. Inside a room, the thermometer is built into a thermostat to regulate temperature and therefore provide us with comfort. The scale begins at 50 degrees and ends at 90 degrees, with each increment of 1 degree marked in between. Although we could communicate with each other solely using the numerical indicators of degrees, we generally use words we have learned to associate with certain temperatures. Inside a house, 50 degrees is "cold," and 90 degrees is "hot." The number we associate with "comfortable" is generally around 70 degrees.

We can take the concept of scales and apply it within human services systems to help agencies get credit for what they are actually accomplishing. A scale, or a continuum, better describes the different states or conditions of low-income people and agency efforts to serve them. The Task Force supports use of scales as a way to measure success since they are easy to understand, and the members of the Network already use them in their work. For example, when a CAA or state refers to the number of people who have become self-sufficient as a result of contact with their programs, it is using a two-level scale with categories of "self-sufficient" and "not self-sufficient." However, some CAAs find this two-level scale limiting, since self-sufficiency is not an either/or condition; but one of degrees. A continuum suggests that families are more or less self-sufficient, rather than strictly self-sufficient or not.

Because there are so many dimensions to consider—income, employment, education, childcare, housing and transportation—it is difficult to settle on a single definition of self-sufficiency. Scaling supports CAAs in using those definitions that more clearly reflect their service and the goals they have selected to impact low-income people. Therefore, the use of scales or a continuum allows individual CAAs and states to report on successes without having to conform to a single standard for self-sufficiency.

By implementing scales in their reporting, CAAs can take their reporting from a level based on numbers of families served and the types of services provided, to a level that illustrates the degree of change or movement these families show. By measuring the incremental changes in the conditions of the individuals and communities served, agencies may clarify how effective services really are. This may take more staff time and impact the numbers of clients served, but if the use of scales uncovers the ineffectiveness of a service in providing change, then lower numbers of people served could be less important.

Key Point: *Measuring incremental change allows an agency to report on immediate successes that lead to the goal of self-sufficiency. Scaling helps agencies demonstrate multiple interim success even if a long-term goal is not achieved. Interim success can be used to provide periodic motivation to its key stakeholders—clients, staff and funding sources.*

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[13] Source: *ROMA Guide*, MATF citation permission by Hunnemann and Richmond, Positive Outcomes

Scale Thresholds

- **Measuring Incremental Change**
- **Early Recognition of Successes**

As discussed previously, the Task Force developed the six national goals so that each goal focuses on one of three areas—*family, community or agency.*

- *Family level scales* measure changes one family at a time. The dimensions for change may include status of employment, education for adults and children, family functioning, income, and health.
- *Agency level scales* measure changes in a single agency or a program within an agency. The dimensions for change may include client satisfaction, cultural sensitivity and competency, funds developed, and fiscal and administrative health.
- *Community level scales* measure changes in functioning and capacity of community systems and conditions. The dimensions for change may include public policy, economic opportunity, and service and support systems.

Scales help agencies measure progress toward long-term goals and get credit for incremental change. In addition, scales can help translate each individual department's achievements into a common reporting format, and facilitate communications among internal and external stakeholders. Scales can help partners adopt the common language that defines success or that explains why progress has not been made toward achieving long-term goals.

Similar to the thermometer that helps us "describe" the degree of change in temperature, the scale developed by the MATF shares a common set of five words that establish a range of thresholds. The five words describe a continuum of conditions for families, agencies and communities. They are:

1. Thriving
2. Safe
3. Stable
4. Vulnerable
5. In Crisis

While the above words can help agencies knit the three levels of work together, the Task Force encourages refinement and use of existing family/individual level scales and the community scale recently released to the Network. As part of the process of developing an agency scaling tool, the MATF is leading a conversation on what characteristics contribute to a "thriving" Community Action Agency. The family and community scales are linked together and will ultimately help the Network demonstrate how changes at the community level have an impact on households and individuals.

***Key Point**: Measuring incremental change is key to our ability to develop an accurate account of changes in the conditions leading to individual and community improvements. Much of our time, energy, and resources are invested in changes that take place along a continuum leading to self-sufficiency.*

Sample Community Scale

1. **Thriving**
2. **Safe**
3. **Stable**
4. **Vulnerable**
5. **In-Crisis**

[14]Summary of MATF's Community Scaling Tool

	DIMENSIONS					
	Thresholds	**Public Policy**	**Equity**	**Civic Capital**	**Service & Support Systems**	**Economic Opportunity**
5	**Thriving**	**Innovative**	**Achieves Equity and Values Differences**	**Investing**	**Comprehen-sive and Integrated**	**Vibrant**
4	**Safe**	**Supportive**	**Affirming**	**Contributory**	**Preventive**	**Emerging**
3	**Stable**	**Selective or Reactive**	**Toleration and Awareness**	**Participating**	**Comprehen-sive but Reactive**	**Stagnant**
2	**Vulnerable**	**None or Not Enforced**	**Complacent and Uninformed**	**Awareness and Education**	**Responsive but not Comprehen sive**	**Contracting**
1	**In Crisis**	**Hostile**	**Conflict and Fear**	**Isolation**	**Non-Responsive**	**Collapsed**

Note to Table: The numbers in the far left-hand column are designed to be interchangeable with the words in that column. The numbers are offered as an alternative to the words because the authors are aware that certain community situations are so volatile that the words may create unintended barriers to communication.

The community scale illustrates how the five words that describe the scale continuum relate to five broad areas. As agencies work towards achieving goals, they also achieve incremental changes that are important to measure and document. The dimensions listed in the table are broadly inclusive of both community conditions and community systems.

CAAs and states wishing to adopt scales as a way to measure incremental change in conditions can find a comprehensive discussion on scaling tools and some best practices in Appendix 4 of the *ROMA Guide* and on the *ROMA Website at: http://38.152.102.181/committees/scales.html*

Key Point: *Scales allow an agency to demonstrate and place change into a context rather than simply relying on statistical data to prove effectiveness. Statistical data about individual families can paint a picture of the community that does not provide a full account of the impact of change taking place at the community level.*

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[14] *Community Scales: A Ladder to the twenty-first Century; Health and Human Services, Washington, DC: Office of Community Services, 1997*

More Measurement Tool

EFFECTIVE SURVEYS

"FEEDBACK"

[15]Surveying clients is an important way to collect data regarding the effectiveness of programs and services delivered. By asking clients questions, agencies may gather critical information about the results and changes that took place after the service has concluded.

Government at all levels is increasingly eager to demonstrate the value of its products and services. By asking clients their opinions, and for information about changes resulting from the services, local agencies, state and Federal governments are joining the ranks of private companies that seek to maintain or improve delivery of services. In the public sector, the impetus to measure how services are affecting clients' lives provides the basis for "reinventing" government so that it responds better to citizens' needs.

States and CAAs can use surveys to seek information on how well agencies are progressing toward the goals of assisting clients and improving the effectiveness of services. By asking clients on a regular schedule how their lives are changing, using the same questions and similar procedures, agencies can produce a set of careful, consistent, quantitative measurements or ratings of their performance and effectiveness at various points. For example, an agency may develop a question on self-sufficiency related to agency services and, on a random basis, ask the question for a determined period of time. If similar, sound methods are used and a representative group of clients responds, findings may be safely generalized as to the perception of most clients about the effectiveness of an agency's services.

Client surveys are a form of "feedback" from those who have received services. Feedback may assume many forms, and the conclusion one draws from feedback depends on the amount and type of controls placed over the collection of that feedback. For example, casual comments received from clients may offer insights that help improve services, but only a rigorous, scientific, representative survey of the client population can yield results that may be generalized to all clients.

The Task Force formulated survey questions that address the direct measures developed for the national goals. When constructing survey documents and protocols, it's important to remember that a certain rigor is necessary for assessing and reporting performance, and for using this information as the basis for policy and operational decisions and reports. These reports are the vehicle for ongoing accountability to the public. Only scientific methods can provide the quality of information that agencies need to substantiate their claims of performance and effectiveness. Without such methods, results are subject to numerous uncontrolled sources of potential error.

Section 5 of the *ROMA Guide* provides guidelines for planning, constructing, and using client surveys as sources of performance data. The guidelines are based on those that are required or recommended by Federal agencies, the legal system, practitioners, and researchers.

Key Point: *If surveys are properly conducted, they can produce valid and reliable measures of performance that would otherwise not be available*

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[15] Source: *ROMA Guide* with citation from the State of Minnesota, Office of the Legislative Auditor

SURVEYS

MATF
Sample Survey Measures and Questions

MATF Survey Measures and Questions

The CSBG direct measures and corresponding survey questions are listed below. The measures are from the Task Force's National Strategic Plan. The specific data that need to be reported are also briefly discussed below.

MEASURE: Number of clients who consider themselves more self-sufficient since participating in the services or activities of the agency (1K)

Survey Question: Do you consider yourself more self-sufficient since participating in the services or activities of this agency?

MEASURE: Number of clients reporting an increase in income since participating in the services or activities of the agency (1l)

Survey Question: Has your household income increased since participating in the services or activities of the agency?

MEASURE: Number of households who believe the agency has helped improve the conditions in which they live (2l)

Survey Question: Do you believe the agency has helped improve the conditions in which you live?

MEASURE: Number of households participating or volunteering in one or more groups (3g)

Survey Question: Do you now participate in, or volunteer for, any community, religious, or social organizations?

MEASURE: Number of households who report they feel they are part of the community (3h)

Survey Question: Do you consider yourself to be part of the local community?

MEASURE: Number of households indicating improved family functioning since participating in the services or activities provided by the Agency (6l)

Survey Question: Has your family life improved since participating in the services or activities of the agency?

Key Point: *For reporting purposes, agencies should provide both the number of clients answering "yes" to each question and the total number of clients surveyed for each survey question.*

RETURN-ON-INVESTMENT

What is ROI?

Steps to Calculate Family Level ROI

Return-on-Investment (ROI) is a form of economic analysis often used to place outcome information in context. Funding sources, especially State legislatures and Congress, are under increasing pressure to show that the dollars spent on human services were dollars well spent. ROI examines the tangible relationship of the expenditures for programs to the value of the results produced by those programs.

ROI is a helpful tool to use when funding sources and board members begin to look at outcome reports for the first time. When an agency counted the number of clients served or numbers of services provided, the numbers in the reports were high. When an agency begins to shift to reporting outcomes, the numbers are often lower, giving the false impression that the agency was less successful. The basic steps for calculating ROI give agencies a context to show the relationship of the numbers of services and clients to the numbers of outcomes, and then establish the value of those outcomes.

[16]The basic steps for calculating family level ROI begin by answering the following questions:

1. How many clients are you serving? Who are they?
2. What services do you give them?
3. What does it cost?
4. What does it cost per service delivered?
5. What happens to the client as a result of the services?
6. What does it cost per outcome?
7. What is the value of a successful outcome?
8. What is the return-on-investment?

Some programs actually generate revenue for agencies, families, and communities. ROI can be used to show the multiple positive effects of these programs. ROI can also:

- Prepare for future competition and managed services;
- Demonstrate that human services can generate a measurable short-and long-term positive impact;
- Demonstrate that a modest success can generate a positive return;
- Identify when policy choices are made for the common good;
- Identify program deficiencies or environmental issues negatively affecting the delivery of services; and
- Establish realistic expectations for numbers of successful outcomes in client-level programs.

Key Point: *In today's funding environment, positive ROI occurs when the results of a program have a greater value than the cost of the program.*

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[16] Source: Based on materials provided by Reginald Carter, *The Accountable Agency*, Sage Human Services Guide 34, 1983 and Eleanor Hunnemann & Frederick Richmond, *Return-on-Investment*, Positive Outcomes™, 1997

ROI

3 Different Methods for Calculating ROI

[17]While ROI can be expressed in several ways, agencies must be careful to choose a method that represents their results fairly. They must be aware that if their agency's ROI is to be compared with another, they must insure that "apples" are being compared with "apples", not "oranges." The following illustrates three different methods for calculating ROI:

The ABC agency provided placements for 100 individuals to take an English as a Second Language course. All participants were migrant farm workers currently employed at minimum wage. After 3 months, 36 participants did not complete the course requirements (left the area, incomplete class work, insufficient test scores), 27 participants completed the course requirements but did not pass the final exam, and 37 participants completed all requirements, passed the final exam, and received graduation certificates. Graduates are projected to realize a 20% increase in income in each of the next five years ($16,252). The program cost $125,000 to operate.

A. Rate of Success:

$$\frac{\text{37 successful graduates}}{\text{100 Units of Service}} = 37\% \text{ ROI}$$

B. Absolute Value:

a. 37successful graduates x $16,252 =$601,340 Gross ROI (Family Level)
b. (37 successful graduates x $16,252) - $125,000 total expenditures = $476,340 Net ROI (Community Level)

C. Ratio

$$\frac{\text{\$60,340 (value of successful outcomes)}}{\text{\$125,000 (total expenditures)}} = \frac{4.8}{1} \text{ Relational ROI}$$

(In words, $1 of investment yields $4.8 of return)

Using ROI in the human service industry means using the same methods to establish credibility that other industries use, such as:

1. control groups
2. longitudinal studies
3. product testing
4. quality control assurances, and
5. trade associations.

The economic stability of many human service organizations will be determined by how well they utilize ROI as a tool to adequately describe the value of their programs and services.

Key Point: *If we cannot predict the future, how can we claim success for the cost avoidance or savings? How can we credibly attribute success to prevention?*

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[17] Source: *Return-on-Investment*, Hunnemann & Richmond, Positive Outcomes™, 1997

RETURN-ON-INVESTMENT

Cautions for Using ROI

Agencies and states practicing the use of ROI should include in-kind costs in calculating the cost of service. [18]Adapting ROI from industry for use in human services may require significant increase of skill and knowledge and there are some cautions for using ROI. These are:

- Hard-to-serve populations may have lower ROI than easier-to-serve populations.
- Non-financial factors may outweigh the economic value and ROI for some expenditures.
- Community data sources and quality vary, making ROI hard to compare between communities. Pre-and post-test comparisons may be impossible because of lack of data.
- ROI is an approximation tool. To remain credible, use conservative measures; stick to things you can defend.
- Industry calculates ROI on an annual basis; be careful not to extrapolate short-term program results into long-term savings. Programs with statutory requirements may throw off calculations.
- Costs to assemble data (as variables in ROI calculations) may outweigh program costs.
- Ability to measure and document results varies from agency to agency and program to program, producing different quality of ROI analysis.

A detailed discussion of the above cautions can be found in Section 6 of the ROMA Guide. In addition, the MATF has established an ROI committee focused on the introduction of cost-benefits analysis and ways to calculate ROI as applied to the non-profit sector. Missouri and Virginia have introduced this method of measuring monetary gain or loss of resources invested in human services. CAAs can demonstrate cost savings, cost avoidance and income generation utilizing ROI models.

Key Point: *ROI changes the way we think about human services. If you are making an investment, the investor expects something back! This is a shift in expectations from entitlement (a guaranteed benefit) to the privilege of establishing conditions for receiving a benefit.*

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[18] Source: *Return on inve$tment—Guidelines to Determine Workforce Development Impact*, Dennis Benson, Appropriate Solutions, 1996 and Return-On-Investment, ©Positive Outcomes™1997

ROI MODELS

- **Cost Savings**
- **Cost Avoidance**
- **Revenue/Income Generating**

Adopting Return-on-Investment (ROI) models is central to adequately describing the benefits derived from investment of public and private dollars in CAA programs. As CAAs engage more partners and investors in achieving outcomes for families and communities, they must also become adept at calculating and justifying the "investment" made in improving conditions.

Having a method for calculating the best estimate of what returns to expect will help agencies make better decisions regarding their capacity to enter into performance-based contracts.

Creating accountability systems that support the shift to an outcome-based framework for planning, organizing, directing, and conducting self-evaluations is incomplete without developing a method for determining "what difference we made in the family, agency and community conditions.

Cost Savings – ROI can demonstrate cost savings from the service intervention. For example, Health Screening

Cost Avoidance – ROI can demonstrate the prevention of further expenditures as a result of the service intervention. For example, TANF reduction in welfare expenditures.

Revenue/Income Generation - ROI can demonstrate that the intervention resulted in increasing income or revenues. For example,

- Employment (disposable income)
- Contract MIS (agency discretionary funds)
- Out-of-home placements (economic impact)

Before entering into performance-based contracts, *all* costs, including in-kind costs and volunteers associated with delivering a service, must be included when calculating ROI. These costs should include, but may not be limited to:

- Salaries, benefits, vacation, holidays
- Administrative and support services, materials, and supplies
- Space, utilities, depreciation, security
- Client income transfers: rent, utility payments, food, clothes, car repair, etc.
- Technology: fax, computers, internet services
- Travel and training
- Materials, supplies
- Presentations, reports, evaluation

***Key Point**: Running an organization without having SMART outcome objectives and performance measures tied to a Return-on-Investment calculation method, is like trying to row a boat without an oar. Without that little tool called an "oar", you risk floating aimlessly, standing still in the water, becoming exhausted paddling by hand, or simply drifting out to sea...never having counted the cost of taking the journey.*

TECHNICAL ASSISTANCE

- **Agency Self-Assessment**
- **ROMA Web Site: <http://38.152.102.181**
- **Electronic Networking Group**
- **ROMA Guide & Training Tool**

In addition to the *ROMA...Beyond the Basics* presentation, the MATF has developed and introduced several tools and best practices to the Network for use by CAAs, partners and communities in the implementation of ROMA systems.

Agency Assessment

[19] In 1997, using a sample of 42 states and 159 CAAs located in nine different states, the Training and Technical Assistance Subcommittee of the Task Force attempted to measure the status of ROMA Implementation. The subcommittee developed a framework that helps agencies measure 'implementation readiness" along continuum or scale ranging as follows: **baseline, elementary, basic, intermediate, and advanced.** A full description of these implementation levels is available in the *ROMA Guide*, Section 7.

ROMA Website

MATF has launched a *ROMA Website* that contains a mix of training opportunities and a variety of technical assistance approaches. It is here that the Network shares best practices and outcomes from demonstration projects, and obtains the latest tools and techniques for local capacity building. Information regarding upcoming conferences and highlights from previous conferences is available. In addition, a list of Task Force and Committee members, reports and updates are posted. Connect to the ROMA Website at <http://38.152.102.181>

ELECTRONIC NETWORKING GROUP

The *Electronic Network Group (ENG)* was launched March 8, 1999 with more than 100 subscribers. The ENG envisions helping groups of people in the community action network bridge historical barriers of time and distance to creatively organize ourselves into new electronic communities of interest. The ENG provides a forum for partners to discuss ROMA issues, identify best practices, share information, and explore innovative approaches to implement ROMA. The ENG can be accessed through the ROMA Website and contains a library of documents and discussions. The ENG is a virtual community that can be accessed through the ROMA Website or by contacting Arnie.Anderson@state.mn.us.

ROMA GUIDE AND VISUAL TRAINING TOOLS

The latest tools developed by the Task Force are the *ROMA Guide* and a companion piece titled *ROMA ...Beyond the Basics. Both* tools can assist the Network with training for boards, staff and partners. *The Basics* is a set of overhead/slides that includes written text to stimulate dialogue and learning around specific topics contained in the *Guide*. The *Guide* is available in a three-ring binder, allowing for future updates and inclusion of new materials developed by the Network. To obtain these tools contact HHS/Office of Community Services (OCS) or the ROMA Website <http://38.152.102.181>

[19] MATF *ROMA Guide*, July, 1999

Summary

Party Hearty, Early and Often

[20]Outcome measurement and achievement of results makes it easy to identify when success has occurred. However, achieving success is not the final step in the journey toward developing accountability systems. Next comes the art of having fun! When we take the time to celebrate success, we:

- Remember the original conditions (from whence we came)
- Honor the process of growth, transformation, and change
- Affirm that we have the power to realize our dreams, and
- Provide inspiration to others.

ROMA techniques help us identify when change has occurred. When our agencies only measure success in terms of outputs in numbers, we will not identify change. We are finding ways to count and report how many activities we accomplished. That isn't change.

Change is the hardest thing to do. It deserves acknowledgement. It doesn't matter whether the agency is changing, the community is changing, or an individual is changing. The fact that *change has occurred* is extremely important. If it isn't the kind of change we expected or desired, we now can investigate what happened. If it is the change we wanted, we can celebrate joyfully.



Key Pont: *Change is hard. Measuring change doesn't have to be difficult. Celebrating change can be downright fun!*

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[20] *The Guide to Implementing ROMA for CSBG Agencies in Tennessee*, Part 2, 1999 permission granted by Eleanor Hunnemann

ROMA...Beyond The Basics



A Results Oriented Management and Accountability Tool

The Monitoring & Assessment Task Force
Washington, DC
July, 1999

Introduction

ROMA...Beyond The Basics

ROMA Is...

A Common Language
Outcome Focused
Inclusive
Flexible

The Framework

6 National Goals

3 Focus Areas

Family Level Goals

Goal #1 - Low-Income People Become More Self-Sufficient

Goal #6 - Low-income People Achieve Their Potential by Strengthening Family and Other Support Systems.

Community Level Goals

Goal #2 - Conditions in Which Low-income People Live Are Improved

Goal #3 - Low-income People Own A Stake in Their Community

Agency Level Goals

Goal #4 - Partnerships Among Supporters and Providers of Services to Low-Income People Are Achieved

Goal #5 - Agencies Increase Their Capacity To Achieve Results

Distinguishing Between Levels

FAMILY

AGENCY

COMMUNITY

Measuring Change

Contrast In Levels Of Change

Outcome Objectives Are SMART

- The World of Outcomes
- Types of Outcomes
- Outcome Characteristics

Tips For Writing Outcome Objectives

- Establish The Size of The Pool
- Specify Time Frame
- Estimate # of Clients

More Tips...

- Formulate Objectives Together
- Classic Mistakes To Avoid

Steps to Measuring Performance

- Identifying Targets and Benchmarks
- Using Indicators and Measures
- Measuring Achievement

Performance Measurement Steps Con't

- Analyzing The Results
- Interpreting Results
- Reporting Performance

Outcome Based Planning

- What is ROMA Planning?
- What's Included in the Plan?
- Who Should Plan?

Outcome Measurement Tools

SCALES....

A Continuum that describes different states or conditions of status

Scale Thresholds

- Measure Incremental Change
- Provide Early Recognition of Successes
- Establish the Continuum of Conditions

Sample Community Scale

SCALE THRESHOLDS

Thriving
Safe
Stable
Vulnerable
In-crisis

More Measurement Tools

Effective Surveys

"Feedback"

Surveys

MATF
Sample Survey Measures and Questions

Return-on-Investment (ROI)

What is ROI?

Steps to Calculate Family Level ROI

Calculating ROI

3 Different Methods For Calculating ROI

More ROI

Cautions for Using ROI

ROI MODELS

- Cost Savings
- Cost Avoidance
- Revenue/Income Generating

Technical Assistance

- Agency Self-Assessment
- ROMA Web Page: http://38.152.102.181
- Electronic Networking Group
- ROMA Guide and Training Tool

Summary

Party Hearty,

Early and Often!

APPENDIX 1 - LISTING OF TASK FORCE AND SUB-COMMITTEE MEMBERS

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Appendix 2—Sample Goals and Measures

This appendix contains sample goals, measures and outcomes. The MATF encourages CAAs and State CSBG Offices to work jointly in crafting their outcome structure and monitoring procedures.

OCS' Monitoring and Assessment Task Force
National Goals and Outcome Measures

Effective October 1, 1999

For each goal that corresponds to the work your agency does, select at least one measure to report on, based on a current needs assessment survey. If you feel that none of the measures under a particular goal is a good measure of the work actually done by your agency, create a measure that more accurately reflects the work you do. In addition, note that some of the measures could easily apply to other goals as well as the one under which they are listed; use them wherever they seem most appropriate to you.

In measures below, number, wherever it appears, is to be expressed in two parts: the actual count, and the baseline total. For example, when the measure is number of households maintaining employment, express it as a factor of the total number of households served by the agency (e.g., 27 out of 86). Do not indicate percentages (e.g., 31.4% or even 31 out of 100, unless your baseline total is actually 100 households); the data need to be aggregated with that of other agencies before percentages are calculated.

GOAL 1: (SELF-SUFFICIENCY)
LOW-INCOME PEOPLE BECOME MORE SELF-SUFFICIENT

Direct measures:

a. Number of participants seeking employment who obtain it [as compared with the total number of participants].
b. Number of participants maintaining employment for a full twelve months.
c. Number of households in which adult members obtain and maintain employment for at least ninety days.
d. Number of households with an annual increase in the number of hours of employment.
e. Number of households gaining health care coverage through employment.
f. Number of households experiencing an increase in an annual income as a result of earnings.
g. Number of households experiencing an increase in annual income as a result of receiving allowable tax credits, such as the earned income and childcare tax credits.
h. Number of custodial households who experience an increase in annual income as a result of regular child support payments.
i. Number of participating families moving from substandard housing into stable standard housing, as compared with the total number of participating families.
j. Number of households which obtain and/or maintain home ownership.
k. Number of minority households which obtain and/or maintain home ownership.
l. Number of people progressing toward literacy and/or GED.
m. Number of people making progress toward post-secondary degree or vocational training.
n. Other outcome measure(s) specific to the work of your agency.

Survey question measures:

o. Number of clients who consider themselves more self-sufficient since participating in services or activities of the agency.
p. Number of clients reporting an increase in income since participating in the services of the agency.

Scale measures:

q. Number of households which demonstrated movement up one or more steps on a scale or matrix measuring self-sufficiency
r. Number of households achieving positive movement in self-sufficiency as demonstrated by an increase of at least one point in an overall score of a Family Development Scale.
s. Number of households achieving stability in the _____ dimension of a Family Development Matrix.

GOAL 2: (COMMUNITY REVITALIZATION)
THE CONDITIONS IN WHICH LOW-INCOME PEOPLE LIVE ARE IMPROVED

Direct Measures:

a. Number of accessible, living wage jobs created and/or retained.
b. Increase in assessed value of homes as a result of rehabilitation projects.
c. Increase in proportion of state and federal funds allocated for meeting emergency and long-term needs of the low-income population.
d. Increase in access to community services and resources by low-income people.
e. Increase in available housing stock through new construction.
f. Increase in the availability and affordability of essential services, e.g. transportation, medical care, child care.
g. Other outcome measure(s) specific to the work done by your agency.

Survey question measures:

h. Number of households who believe the agency has helped improve the conditions in which they live.

Scale measures:

i. Number of communities which demonstrated movement up one or more steps on a scale or matrix measuring community self-sufficiency, community health, or community vitality.
j. Number of communities achieving stability in the _____ dimension of the Community Scaling Tool.

GOAL 3: (COMMUNITY REVITALIZATION)
LOW-INCOME PEOPLE OWN A STAKE IN THEIR COMMUNITY

Direct measures:

a. Number of households owning or actively participating in the management of their housing.
b. Amount of "community investment" brought into the community by the Network and targeted to low-income people.
c. Increase in minority businesses owned.
d. Increase in access to capital by minorities.
e. Increased level of participation of low-income people in advocacy and intervention activities regarding funding levels, distribution policies, oversight, and distribution procedures for programs and funding streams targeted for the low-income community.
f. Other outcome measure(s) specific to the work done by your agency.

Survey question measures:

g. Number of households participating or volunteering in one or more groups.
h. Number of households who say they feel they are part of the community.

Scale measures

i. Number of communities which demonstrated movement up one or more steps on a scale or matrix measuring community self-sufficiency, community health, or community vitality.
j. Number of communities achieving stability in the _____ dimension of the Community Scaling Tool.

GOAL 4:
PARTNERSHIPS AMONG SUPPORTERS AND PROVIDERS OF SERVICES TO LOW-INCOME PEOPLE ARE ACHIEVED

Direct measures:

a. Number of partnerships established and/or maintained with other public and private entities to mobilize and leverage resources to provide services to low-income people.
b. Number of partnerships established and/or maintained with other public and private entities to complete the continuum of care for low-income people.
c. Number of partnerships established and/or maintained with other public and private entities which ensure ethnic, cultural, and other special needs considerations are appropriately included in the delivery service system.
d. Other outcome measure(s) specific to the partnerships created by local agencies.

Survey question measures:

e. Number of principal partners who are satisfied with the partnership.
f. Partner's rating of the responsiveness of the agency.

Scale Measures:

g. Number of agencies which demonstrated movement up one or more steps on a scale or matrix measuring agency partnership capacity.
h. Number of agencies achieving stability in the _____ dimension of an agency partnership capacity scaling tool.
i. Number of agencies that achieve and maintain commitments from other service and resource partners to carry out agency mission.
j. Number of agencies that establish and maintain commitments to provide resources to partner organizations that serve agency customers.
k. Number of agencies that establish and maintain coordination of agency and non-agency resources to create a programmatic continuum of services with outcome-based objectives establishes and maintains a selection process which ensures that low-income community members are elected in a public process.

GOAL 5:
AGENCIES INCREASE THEIR CAPACITY TO ACHIEVE RESULTS

Direct measures:

a. Total dollars mobilized by the agency.
b. Total dollars mobilized by the agency as compared with CSBG dollars.
c. Number of boards making changes as a result of a periodic organizational assessment.
d. Number of programs which have become more effective as a result of research and data (their own as well as others).
e. Number of programs which have become more effective as a result of needs assessment surveys.
f. Number of families having their situation improved as a result of comprehensive developmental services.
g. Increase in community revitalization as a result of programs.
h. Number of agencies increasing their number of funding sources and increasing the total value of resources available for services to low-income people.
i. Number of agencies leveraging non-CSBG resources with CSBG resources at a ratio greater than 1:1.
j. Number of agencies where board composition accurately represents the ethnic diversity of the service territory.
k. Number of agencies where customers served accurately represents the ethnic diversity of the service territory.
l. Number of agencies where staffing component accurately represents the ethnic diversity of the service territory.
m. Number of development contacts as a result of outreach programs.
n. Number of special populations showing improvement as a result of programs aimed at the population.

o. Number of clients showing improvement as a result of emergency services received.
p. Other outcome measure(s) specific to the work done by local agencies.

Scale measures:

q. Number of agencies that achieve and maintain compliance with all applicable Federal, State, and local statutes, regulations, and requirements.
r. Number of agencies that achieve and maintain a governance process that is inclusive, representative of, and accountable to the community.
s. Number of agencies that achieve and maintain a workforce environment which empowers and develops its employees, has open communications, pays its employees a living wage, and is mission-driven.
t. Number of agencies which achieve and maintain a planning, measurement, and evaluation system which creates a programmatic, continuum of services with outcomes-based objectives, and where the measurements of programs are used to improve services.
u. Number of agencies that achieve and maintain communication and feedback processes that engage all stakeholders.
v. Number of agencies that establish and maintain a process where evaluations are used to improve services.

GOAL 6: (FAMILY STABILITY)
LOW-INCOME PEOPLE, ESPECIALLY VULNERABLE POPULATIONS, ACHIEVE THEIR POTENTIAL BY STRENGTHENING FAMILY AND OTHER SUPPORTIVE SYSTEMS

Direct measures:

a. Number of aged households maintaining an independent living situation.
b. Number of disabled or medically challenged persons maintaining an independent living situation.
c. Number of households in crisis whose emergency needs are ameliorated.
d. Number of participating families moving from homeless or transitional housing into stable standard housing.
e. Number of households in which there has been an increase in donation of time to volunteer activities (not mandated by welfare-to-work programs).
f. Number of households in which there has been an increase in children's involvement in extracurricular activities.
g. Number of high consumption households realizing a reduction in energy burden
h. Number of households moving from cultural isolation to involvement with their cultural community.
i. Other outcome measure(s) specific to the work done by your agency.

Survey question measure:

j. Number of households indicating improved family functioning since participating in the services or activities of the agency.

Scale measures:

k. Number of households moving from crisis to stability on one dimension of a scale.
l. Number of households moving from vulnerability to stability on one dimension of a scale.
m. Number of households moving from a condition of crisis to a condition of vulnerability on one dimension of a scale.

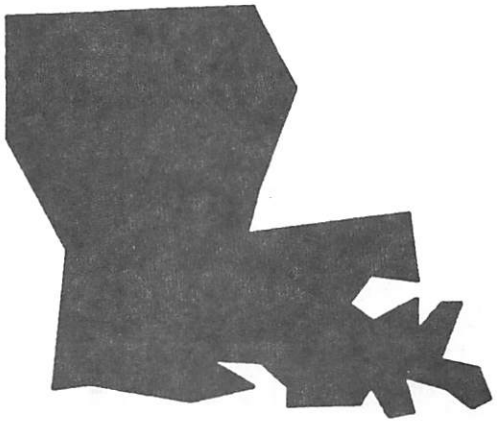
Tracking Changes to the National Goals and Outcome Measures

This chart is provided so that agencies can track changes to the National Goals and Outcome Measures, which will go into effect on October 1, 1999. In the first column, we have indicated whether there were changes to the measure, if it has moved to another place in the document, and if the language was altered. In the second column, we have indicated if the measure has been added, moved, or altered since the original October 1996 document.

Old	New
Goal 1	Goal 1
a. brackets added	a. no change
b. no change	b. no change
c. no change	c. no change
d. no change	d. no change
e. no change	e. no change
f. no change	f. no change
g. no change	g. no change
h. no change	h. no change
i. no change	i. no change
j. moved to n	j. new
k. moved to o	k. new
l. moved to p	l. moved from Goal 2, b, language altered
	m. moved from Goal 2, c, language altered
	n. moved from j
	o. moved from k
	p. moved from l
	q. new
	r. new
	s. new
Goal 2	Goal 2
a. accessible, living wage added	a. accessible, living wage added
b. moved to Goal 1, l, language altered	b. moved from d
c. moved to Goal 1, m language altered	c. replaced placeholder measure e
d. moved to b	d. replaced placeholder measure e
e. replaced with c, d, e	e. replaced placeholder measure e
f. moved to Goal 6, measure g, language altered	f. moved from g
g. moved to f, language altered	g. moved from h
h. moved to g	h. moved from i
i. moved to h	i. new
	j. new
Goal 3	
a. moved to Goal 6, measure e, language	a. moved from c

altered	
b. moved to Goal 6, measure f, language altered	b. moved from d
c. moved to a	c. replaced placeholder measure e
d. moved to b	d. replaced placeholder measure e
e. replaced with c, d	e. new
f. no change	f. no change
g. no change	g. no change
h. no change	h. no change
	i. new
	j. new
Goal 4	Goal 4
a. moved to Goal 5, a	a. replaced placeholder measure c
b. moved to Goal 5, b, language altered	b. replaced placeholder measure c
c. replaced with a, b, c	c. replaced placeholder measure c
d. no change	d. no change
e. no change	e. no change
f. language altered	f. language altered
	g. new
	h. new
	i. new
	j. new
	k. new
Goal 5	Goal 5
a. moved to d, language altered	a. moved from Goal 4, a
b. moved to c, language altered	b. moved from Goal 5, b
c. moved to e, language altered	c. moved from b
d. replaced with f, language altered	d. moved from a
e. replaced with g, h, i, j, k	e. moved from c
f. moved to p	f. moved from d
	g. replaced e
	h. replaced e
	i. replaced e
	j. replaced e
	k. replaced e
	l. moved from Goal 6, c
	m. moved from Goal 6, d
	n. moved from Goal 6, f
	o. moved from f
	p. new
	q. new
	r. new
	s. new

	t. new
	u. new
Goal 6	Goal 6
a. no change	a. no change
b. no change	b. no change
c. moved to Goal 5, l, language altered	c. moved from e
d. moved to Goal 5, m, language altered	d. moved from g
e. moved to c	e. moved from Goal 3, a
f. moved to Goal 5, n, language altered	f. moved from Goal 3, b
g. moved to d	g. replaced placeholder Goal 2, f,
h. moved to i	h. new
i. moved to j	i. moved from h
	j. moved from i
	k. new
	l. new
	m. new



LOUISIANA

Goals and Outcomes....State Plan Exerpts

June, 1998

5 XYZ Agency - Goals and Outcomes, Section 675(c)(13)(E):

a. Complete the table below for each CSBG supported activity.

Summary Table For CSBG Supported Activities and Services

Service Area	Need Identified	Estimated Number Applying for Assistance (Client Pool)	Description of Services Name and describe services provided to address identified needs. Include CSBG/IS Identification Numbers in parenthesis after each service described.	Goals and Outcomes Indicate the unduplicated number of clients you plan to assist under each service provided and describe the outcomes accomplished as a result of the services provided, including the number achieving the outcomes. Include the number and letter for the Task Force's Goal and Outcomes in parenthesis after each outcome.	Planned Date to Accomplish Outcomes	Method used to Measure Outcomes
Employment	Lack of Job Skills	400 Individuals	Skills Training (1.6) Agency with the assistance of JTPA will provide youth with a four week job skills training class. Classes will include instruction for clerical & retail sales position and on-site job supervision.	400 Youth (16-21) will be provided with skills training classes and 50 of those clients will obtain employment after completion of training during the summer months. (1a)	9/30/98	Agency & client records
		140 Individuals	Skills Training (1.6) Agency with the assistance of JTPA funding will provide adult clients with a six week job skills training class. Classes will include instruction for clerical & retail sales positions.	140 clients will be provide with skills training and 50 of those clients will obtain employment for at least 90 days after completion of training (1c)	12/31/98	Agency & client records
		5 Individuals	Skills Training (1.7 a) Agency with the assistance of Green Thumb will provide senior citizen clients with job skills training.	2 clients will maintain employment for a full 12 months (1b).	12/31/98	Agency & client records
Education	Lack of education	338 Individuals	Head Start (2.4) Agency, with the assistance of parent volunteer will make Head Start classes available to need clients.	338 Pre-school clients will be provided with Head Start training and all will obtain educational and developmental skills (2b).	12/31/98	Agency & client records
	Lack of high school diploma	300 Individuals	GED (2.6) Agency, with the assistance of JTPA funding, the school board and the technical colleges will make GED classes available to needy clients.	300 clients, who did not complete high school, will be provided with educational instructions and 50 will obtain a GED (2g).	12/31/98	Agency & client records
Income Management	High cost of energy	10 Households	Weatherization (3.3) Agency using DOE funding will provide low-income home dwellers an increased level of protection from harsh exterior conditions through minor home repairs or upgrades.	10 households will have their energy bills reduced as a result of energy conservation measures and have more income available to meet other needs (2h)	12/31/98	Agency & client records
Housing	Lack of adequate housing	46 Households	HUD Section 8 Rental Assistance (4.4a) Agency will provide low-income households with counseling, certifications, rental assistance payments and housing inspections.	22 households will move from substandard housing into stable standard housing (1i).	12/31/98	Agency & client records

ervice Area	Need Identified	Estimated Number Applying for Assistance (Client Pool)	Description of Services Name and describe services provided to address identified needs. Include CSBG/IS Identification Numbers in parenthesis after each service described.	Goals and Outcomes Indicate the unduplicated number of clients you plan to assist under each service provided and describe the outcomes accomplished as a result of the services provided, including the number achieving the outcomes. Include the number and letter for the Task Force's Goal and Outcomes in parenthesis after each outcome.	Planned Date to Accomplish Outcomes	Method used to Measure Outcomes
mergency ssistance	High cost of utilities	600 Households	CSBG Emergency Utility Assistance (5.3) FEMA (5.3) and LIHEAP (5.3) Agency will assist households with utility cut-off notices meet utility payments, not to exceed $300 per family per year from the combined funds.	550 households will have their emergency utility needs ameliorated through the payments of utility bills and the prevention of utility cut offs. (6e).	12/31/98	Agency & client records
	Lack of food	14 Households	Emergency Food Assistance (5.6) Community Food & Nutrition (5.6) Each program may issue food vouchers not to exceed $100 per family per year and the combined vouchers may not exceed $200 per family.	7 households that have no food will obtain food and have their emergency needs ameliorated (6e).	3/31/98 (every quarter)	Agency & client records
	Lack of rental payments High cost of utilities	5 Households	CSBG Emergency Rent Assistance (5.6) and FEMA (5.6) Agency Will make rental payments, not to exceed $600 per family per year from the combined programs, for households that have received eviction notices.	5 households will have their emergency shelter needs ameliorated because the agency provides rental payments and thereby prevents eviction (6e).	12/31/98	Agency & client records
lutrition	Lack of sufficient food	4700 Households	USDA Surplus Commodities (6.2) Agency will distribute surplus USDA commodities to eligible households each quarter. Commodities will consist of food items such as butter, flour, rice, potatoes, canned goods, etc.	4450 needy households will obtain food, 50 will be moved from a crisis situation (unable to obtain adequate food to meet minimum food needs) to a situation where they are nutritionally stable for 30 days and have sufficient food for three nutritional	3/31/98	Agency & client records
	Lack of sufficient food	425 Households	Child & Adult Care Food Program (6.4) Agency will provide Head Start client with daily nutritional meals.	338 head start enrollees will maintain a nutritionally stable diet through the provision of a sufficient food supply-three meals a day. (6h)	12/21/98	Agency & client records

Service Area	Need Identified	Estimated Number Applying for Assistance (Client Pool)	Description of Services Name and describe services provided to address identified needs. Include CSBG/IS Identification Numbers in parenthesis after each service described.	Goals and Outcomes Indicate the unduplicated number of clients you plan to assist under each service provided and describe the outcomes accomplished as a result of the services provided; including the number achieving the outcomes. Include the number and letter for the Task Force's Goal and Outcomes in parenthesis after each outcome.	Planned Date to Accomplish Outcomes	Method used to Measure Outcomes
Linkage	Lack of jobs	1000 Individuals	Information and Referral (7.1) As part of the agency's information and referral efforts, it will make referrals to the Employment Service through the CSBG network and JTPA.	Clients will obtain information and will be referred to other agencies for assistance, about 200 will be referred to the Employment Service and 25 of these clients will obtain and maintain employment for 90 days (1c).	6/30/98	Agency & client records
	Child development needs	175 Individuals	Head Start (7.3) Head Start parents and other volunteers will participate in Head Start activities by volunteering their services in the classroom, kitchen and on field trips.	175 individuals will show an increase in volunteer services at the Head Start centers (3a).	12/31/98	Agency & client records
	Lack of transportation	560 Individuals	Transportation (7.4) Provided transportation to low-income individuals to grocery stores, local government facilities, schools, places of employment, other service providers, etc.	550 needy individuals will be provided with necessary transportation services. Of these, 100 elderly individuals will obtain transportation to facilities for goods or services needed by them to maintain an independent living situation (able to live at home rather than a public or private facility) (6a).	6/30/98	Agency & client records
	Brokerage and Advocacy Needs	Not applicable	Brokerage/Advocacy (7.10) Agency will conduct or participate in forums to explain what community action is and solicit cooperation from the public and private sectors in meeting the needs of disadvantaged individuals.	200 public and/or private organizations will participate in parish forums and 20 will enter into written cooperative agreements with this agency to work together to meet the needs of the parish's disadvantaged individuals (4c)	12/31/98	Agency records

Service Area	Need Identified	Estimated Number Applying for Assistance (Client Pool)	Description of Services Name and describe services provided to address identified needs. Include CSBG/IS Identification Numbers in parenthesis after each service described.	Goals and Outcomes Indicate the unduplicated number of clients you plan to assist under each service provided and describe the outcomes accomplished as a result of the services provided, including the number achieving the outcomes. Include the number and letter for the Task Force's Goal and Outcomes in parenthesis after each outcome.	Planned Date to Accomplish Outcomes	Method used to Measure Outcomes
Health	Lack of transportation	30 Individuals	CSBG Transportation (9.1) Agency will provide transportation for individuals with medical needs to medical facilities.	30 elderly disabled or medically challenged individuals will be provided with transportation to medical services. Of these, 23 will obtain transportation to facilities providing goods or services needed by them to maintain an independent living situation (able to live at home rather than a public or private facility) (6b).	3/31/98	Agency & client records
Health	Lack of other health programs	500 Households	Medicaid (9.10) Agency will process client applications for Medicaid services and submit them to the Office of Family Support.	375 needy individuals will increase their access to medical services because of Medicaid certifications. (2h)	12/31/98	Agency & client records

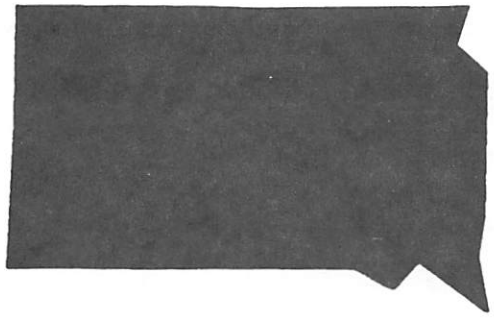
5. **Goals and Outcomes, Section 675(c)(13)(E):**

a. **Complete the table below for each CSBG supported activity.**

Summary Table For CSBG Supported Activities and Services

Service Area	Need Identified	Estimated Number Applying for Assistance (Client Pool)	Description of Services Name and describe services provided to address identified needs. Include CSBG/IS Identification Numbers in parenthesis after each service described.	Goals and Outcomes Indicate the unduplicated number of clients you plan to assist under each service provided and describe the outcomes accomplished as a result of the services provided, including the number achieving the outcomes. Include the number and letter for the Task Force's Goal and Outcomes in parenthesis after each outcome.	Planned Date to Accomplish Outcomes	Method used to Measure Outcomes

Service Area	Need Identified	Estimated Number Applying for Assistance (Client Pool)	Description of Services Name and describe services provided to address identified needs. Include CSBG/IS Identification Numbers in parenthesis after each service described.	Goals and Outcomes Indicate the unduplicated number of clients you plan to assist under each service provided and describe the outcomes accomplished as a result of the services provided, including the number achieving the outcomes. Include the number and letter for the Task Force's Goal and Outcomes in parenthesis after each outcome.	Planned Date to Accomplish Outcomes	Method used to Measure Outcomes



SOUTH DAKOTA

Goal and Measures

FY - 1998 State Plan

Vision: To stimulate and focus available federal, state, and local resources upon the goal of removing obstacles and solving the problems which block the achievement of self-sufficiency.

Mission: To provide a range of services and activities that have a measurable and potentially major impact on the causes of poverty.

A. FY-1998 GOALS, OBJECTIVES AND OUTCOME MEASURES

The goals and objectives for South Dakota's FY-1998 Community Services Block Grant program are as follows:

Goal 1: (Self-Sufficiency) Low-Income people become more self-sufficient

Objective a: Provide information and referral to other service providers.

Objective b: Provide work experience/training (including Green Thumb, Job Training Partnership Act [JTPA], Community Work Experience Program [CWEP], TANF [Temporary Assistance for Needy Families] work program, weatherization, contractors, etc.)

Objective c: Provide employment assistance (uniforms, tools, license fees, etc.)

Objective d: Create jobs through Revolving Loan Fund projects

Objective e: Provide technical assistance and training for entrepreneurs and businesses.

Objective f: Provide household financial counseling.

Objective g: Provide tax counseling (Earned Income, SHIINE [Senior Health Information and Insurance Education], child care, employment)

Outcomes:

1. Number of persons seeking employment who obtain it, as compared with the total number of participants.
2. Number of participants maintaining employment for a full twelve months.
3. Number of households in which adult members obtain and maintain employment for at least 90 days.
4. Number of households with an annual increase in number of hours of employment.
5. Number of households gaining health care coverage through employment.
6. Number of households experiencing an increase in annual income as a result of earnings.
7. Number of individuals able to obtain/maintain work because of employment assistance.
8. Number of jobs created or maintained as a result of revolving loan funds.
9. Number of clients gaining job skills as a result of agency work site. (Summer youth program, CWEP, TANF, Green Thumb, etc.)
10. Number of households experiencing an increase in annual income as a result of receiving allowable tax credits, such as the earned income, childcare, or employment tax credits.

increase in annual income as a result of regular child support payments.

12. Number of individuals/businesses reporting improved business stability through technical assistance and training. (survey)
13. Number of clients who consider themselves more self-sufficient since participating in services or activi. of the agency (survey)
14. Number of clients reporting an increase in income since participating in the services of the agency. (survey)

Goal 2: (Community Revitalization) The conditions in which low-income people live are improved.

Objective a: Provide referrals to adult education programs: educational/literacy (English as a Second Language, Literacy programs, Career Learning Centers, Adult Basic Education)

Objective b: Provide referrals to adult education programs: post-secondary (Vocational/Technical Institute, college, etc.)

Objective c: Provide child/youth education programs (Head Start/school supplies/summer recreation, etc.)

Objective d: Provide weatherization for substandard homes.

Objective e: Provide housing preservation repairs.

Objective f: Provide housing for low-income individuals and families. (Self-Help, Heartland House, Affordable Housing, etc.)

Objective g: Provide nutritious meals for Head Start children and elderly nutrition sites (congregate/home-delivered).

Objective h: Provide opportunities to enhance food budget (garden project/Fare Share/Share SD etc.)

Objective i: Provide affordable transportation to services.

Objective j: Provide emergency services to qualifying individuals and families.

Outcomes:

1. Number of participants enrolled in educational and literacy programs who attend regularly.
2. Number of people enrolled in post-secondary education.
3. Number of participants enrolled in post secondary education as a result of agency assistance with fees, application process, etc.
4. Number of families improving their developmental opportunities through Head Start and Early Head Start.
5. Number of children able to participate in school as a result of receiving school supplies.
6. Number of youth able to participate in recreation opportunities.
7. Number of individuals who maintain safe, stable environment in shelter program as a result of CAA funding (Heartland House and shelters).

conditions as a result of rental/mortgage assistance/deposits.

9. Number of families able to achieve home ownership through agency's administration of self-help and affordable housing projects.
10. Number of participating families living in housing that has been upgraded to decent, safe and sanitary.
11. Number of homes made more energy efficient through weatherization projects.
12. Number of homes made safe by having furnaces replaced.
13. Number of households using energy-saving information.
14. Average percent annual reduction in fuel use.
15. Number of households who maintain stable living conditions as a result of emergency energy assistance.
16. Number of individuals who maintain/improve health status through medical equipment and air conditioner programs.
17. Number of persons who improved their access to services because of transportation.
18. Number of individuals who temporarily maintain nutritional status as a result of three days emergency food supply.
19. Number of individuals who had more resources because of growing food in a garden.
20. Number of individuals who temporarily maintain comfort through clothing assistance.
21. Number of households who believe the agency has helped improve the conditions in which they live. (surve
22. Number of individuals who improved their nutritional status through nutrition programs. (Head Start, congregate, home-delivered, commodities, Share SD, Fare Share, etc.) (survey)

Goal 3: Low-Income people own a stake in their community.

Objective a: Increase participation in community and school.

Objective b: Provide housing counseling.

Objective c: Provide housing brokerage/advocacy.

Objective d: Leverage resources for low-income people.

Outcomes:

1. Number of households in which there has been an increase in hours of volunteering. (survey)
2. Number of households in which there has been an increase in children's involvement in extracurricular activities. (survey)
3. Number of households owning or actively participating in the management of their housing.
4. Amount of "community investment" brought into the community by the Network and targeted to low-income people.

Goal 4: Partnerships among supporters and providers of services to low-income people are achieved.

Objective a: Mobilize goods, services, and cash for participants.

Objective b: [illegible] Administration) funds for counties

Objective c: Participate in new and renewed agreements with other partners.

Objective d: Develop positive relationships with principal partners (minimum of three).

Outcomes:
1. Total dollars mobilized by the agency compared with CSBG dollars.
2. Number of new and renewed agreements reached.
3. Number of principal partners who are satisfied with the partnership/agency. (survey)
4. Partners' rating of training and technical assistance. (survey)

Goal 5: Agencies increase their capacity to achieve results.

Objective a: Conduct, annually, an organizational assessment.

Objective b: Utilize research, data, and needs assessments to support and guide program development.

Objective c: Provide staff committed to comprehensive developmental services for individuals/families.

Objective d: Provide staff committed to community revitalization.

Objective e: Leverage funding resources for agency programming for low-income individuals/families.

Outcomes:
1. Number of Boards which have conducted a periodic organizational assessment.
2. Number of agencies which have used research, data (their own as well as others), and needs assessment surveys, to support and guide program development.
3. Number of staff hours per year committed to comprehensive developmental services for families.
4. Number of volunteer hours per year committed to community revitalization. (CAT Teams, Volunteer Service Network, etc.)
5. Number of staff hours per year committed to community revitalization.
6. Number of funding sources

Goal 6: Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive systems.

Objective a: Provide home care (or other) services to disabled and elderly low-income.

Objective b: Make developmental contacts for ongoing client services.

Objective c: Develop programs targeted to special populations.

Objective d: Provide emergency services/supplies (food, clothing, small appliances, medical equipment, personal hygiene items, etc.).

Objective e: Provide counseling and guidance for families at risk (financial, teenage parenting, parenting, etc.)

Outcomes: 1. Number of aged households maintaining an independent living situation. (60+)
2. Number of disabled or medically challenged persons maintaining an independent living situation.
3. Number of developmental contacts, as compared with the total number contacts.
4. Number of programs targeted to special populations, as compared with the total number of programs.
5. Number of households in crisis whose emergency needs are met through agency services.
6. Number of requests for emergency services, as compared with the total number of requests for services.
7. Number of households indicating improved family functioning since participating in the services or activities of the agency. (survey)

Appendix 3—Planning: Key Success Factors

This appendix contains information on how some states have developed plans and models for measuring performance. In addition, a list of best practices and common barriers are c ontained in the NASCSP Preliminary Report on States Efforts.

Also included is lexicon or glossary that can be applied when planning and implementing outcome management and monitoring.

IMPLEMENTING RESULTS-ORIENTED MANAGEMENT AND ACCOUNTABILITY FOR THE COMMUNITY SERVICES BLOCK GRANT (CSBG):

A Preliminary Report On State Efforts

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TABLE OF CONTENTS

INTRODUCTION 1

PURPOSE OF THIS REPORT 1

RESEARCH METHODS 2

FINDINGS 3
- NATIONAL OVERVIEW 3
- GENERAL BEST PRACTICES 3
- COMMON BARRIERS 9

A RANGE OF MODELS 12
- CALIFORNIA 12
- NEW YORK 14
- OREGON 15
- PENNSYLVANIA 17

OTHER EFFORTS AROUND THE NATION 19
- CONNECTICUT 19
- DELAWARE 20
- ILLINOIS 20
- KANSAS 21
- MINNESOTA 22
- NEW HAMPSHIRE 23
- NORTH CAROLINA 23
- TEXAS 24
- WASHINGTON 24

ACKNOWLEDGEMENTS 25

IMPLEMENTING RESULTS-ORIENTED MANAGEMENT AND ACCOUNTABILITY FOR THE COMMUNITY SERVICES BLOCK GRANT (CSBG): A Preliminary Report On State Efforts

INTRODUCTION

In the 1994 re-authorization of the Community Services Block Grant (CSBG), states were asked to secure from all grantees community action plans that included a "description of outcome measures to be used to monitor success in promoting self-sufficiency, family stability and community revitalization (Section 675(c)(13), Community Services Block Grant Statutory Assurances -- As amended by Public Law 103-252, Human Services Amendments of 1994)." This legislative requirement is representative of numerous demands for increased accountability of government programs.

There has been an emerging belief that government programs should be assessed in a more business-like fashion. As businesses are responsible to stockholders, government should be accountable to taxpayers. Further, this accountability should include end results, not just how funds were spent and what was purchased. In 1993, spearheaded by Vice President Gore, the Government Performance and Results Act (GPRA) was enacted by Congress. The Act calls for "the establishment of strategic planning and performance measurement" with strategic plans and annual performance plans for all government programs by September 1997.

Similar pressure has also been felt by many state governments. The Oregon Progress Board developed 259 standards for measuring statewide progress and institutional performance, the "Oregon Benchmarks." These measures are being used to develop a shared vision for the state and track efforts to bring that vision to fruition. In Minnesota, state agencies are being asked to provide their testimony to the state legislature on a form that asks about the mission, goals, results and collaborations for each program.

PURPOSE OF THIS REPORT

In light of these pressures, NASCSP set out to assist states in their effort to respond. In October of 1995, the outset of this project, NASCSP surveyed the state CSBG offices to ascertain what was being done at the state or local level to begin looking at outcome measures. Fewer than 25% had any firm plan. This report has been developed to describe how states have developed plans

and models for describing the results of CSBG supported services. In addition, this report provides the opportunity to explore a variety of models of measuring performance and managing the challenges of implementing these models.

This report serves to:

- identify state-of-the-art performance management and measurement techniques being used for CSBG in the states, as well as identify significant challenges and solutions to overcoming them;
- provide a description of how these new models have been created and
- provide roadmaps to those wrestling with similar issues in developing systems for their states and agencies.

RESEARCH METHODS

Based on the findings of the October 1995 survey, NASCSP conducted in-depth interviews with state CSBG offices in 13 states. In addition, site visits were conducted in 4 states including interviews with state staff and community action agency staff.

While not all states were interviewed, every attempt was made to include large and small states, urban and rural states and those representing a wide range of approaches.

In addition, relevant published materials including state plans and research describing performance measurement efforts of other programs were reviewed.

Without the willingness of participants to spend their time and share both their successes and difficulties, this report would not have been possible. In interviews and visits with state and local agency offices, informants were assured of confidentiality in order to gain a realistic sense of their activities. As a result, in the findings section of this report, events are reported without respect to the particular state in which they occurred. However, following the findings is a detailed description of the four different models developed by California, New York, Oregon and Pennsylvania. Finally, there are short descriptions of how another nine states have begun looking at outcomes.

FINDINGS

NATIONAL OVERVIEW

In terms of federal programs, the CSBG is a leader in developing a nationwide, flexible performance measurement system. The goals and measures developed by the Office of Community Services' National Monitoring and Assessment Task Force (MATF) have provided a framework that has influenced most state officials as they have developed systems in their individual states. It has also served as a focal point for discussion and created the basics of a common language.

Across the nation, much progress has been made since the original NASCSP survey. The Michigan Family Independence Agency commissioned a study by Public Policy Associates to examine what other states had been doing in the area of performance. According to this study, released in December 1996, all states now require some kind of performance goals or measures by their local grantees, yet only 10% reported that their current system was "very effective."

In general, states that got a jump on developing an outcome focus did so for a variety of reasons:

- a statewide emphasis from the governor or state legislature on performance measurement;
- commitment to innovative management on the part of the state CSBG office; and/or
- pressing political need within the state to demonstrate the value of the CSBG program.

The models used are varied. In some states, outcome measurement has become part of the existing management and planning system. In others, the whole statewide planning process has been redesigned. For example, Oregon developed the Omniplan, a single planning tool used by agencies for CSBG, the Low Income Home Energy Assistance Program, the Weatherization Assistance Program and the other programs administered by the Department of Housing and Community Services. In some states, uniform aggregable measures have been developed for all agencies to use; in others, agencies have chosen measures particular to their specific local efforts.

What follows is a list of trends that made it possible for states to successfully implement methods of examining the outcome of CSBG services and a list of the major challenges faced.

GENERAL BEST PRACTICES

1. Providing Sufficient Time.

The states which first implemented an outcome orientation had an early beginning, before the MATF began in 1995 to develop its list of goals and measures. This was true for a variety of

reasons including statewide interest in looking at standards and impacts, pressure from the local agencies to develop more meaningful reporting systems, and/or concern from particular funders about what difference their funding was making. For a few states, this meant at least some focus on impact from the creation of the CSBG in 1981; for others, it meant specific efforts beginning in 1993 and 1994.

This additional time has provided these states with opportunities to make mistakes and learn from them. The lessons have included: that the process is an evolving one that may take 2-3 years to get up and running smoothly; that all issues will not be resolved before a system is tried; and that the process is immensely time consuming because if done right, it affects numerous existing systems -- data collection, financial, planning and management.

2. Building and Maintaining Strong, Collaborative Relationships Between States, the State CAA Association and the Local Agencies.

Collaboration between the state office and the local agencies and their statewide association is perhaps the most important factor in the successful implementation of outcome measurement and management. When this collaboration is successful, local agencies are co-authors of new system requirements. They have become its proponents and see themselves as responsible for its success. Without this process, new state requirements are seen as burdensome tasks to be undertaken for compliance purposes, not providing better service to clients. In this environment, data collection is regarded as a low priority and often suffers.

It has also been true that a few states have seen outcome measurement as simply a reporting issue and asked for very little from the local agencies. However, some of the agencies in these states who see outcome measurement as a way to improve services and management, view the state as at minimum, unsupportive.

3. Being Comfortable with Chaos.

Creating a system for determining outcomes of any human and community service system is difficult at best. This is particularly true of a program like the Community Services Block Grant (CSBG). The CSBG is extraordinarily flexible, with no two local agencies, no less states, operating in exactly the same fashion. Developing an accurate and consistent system of collecting and reporting outcome data will take a number of iterations and adjustments. States who have put systems in place quickly have, as one CAA plannner describes it, "been willing to build an airplane in flight." Rather than waiting to develop a system that all stakeholders agree is

perfect, they have implemented imperfect systems, found the problems and continued creating and modifying accordingly.

4. Being Comfortable with Conflict (at least temporarily).

For many states, looking at the outcome of service efforts represents a significant change in how services are viewed and agencies and programs are managed. This transformation is dramatic and as a result, often not smooth and not completely supported by all parties. In fact, in implementing any kind of change, some conflict should be expected and accepted as part of the process. Conflict ensures that changes are thought out and planned, not randomly or impulsively created.

If there is existing tension between stakeholders, such as between the state office and the state CAA association, change can bring the conflict to the surface. A number of states found that the transformation of the CSBG has exacerbated such tensions. Most of these conflicts concerned the role of the state association -- was the association (as a grantee) an extension of the state office or was it an advocacy organization for the local grantees, or could it effectively be both? In these cases, ongoing discussion between the state office, the association and the local agencies was required. By including CSBG outcomes in these discussions, stakeholders were able to focus on their shared goals for low-income communities and families and to develop greater clarity in their roles in achieving these goals.

5. Looking at Challenges From Many Perspectives Simultaneously.

Most states and agencies began developing outcomes by looking first at organizational missions and goals and developing measures from these discussions. Inevitably, a practical member of the discussion would raise the issue of what data was regularly available to measure such things, and the burden of adding data collection elements. In other states, people started by looking at what data they currently collect, and then tried to find measures the existing information could be fit into. Outcome measures should tell the story of the impact of CSBG efforts reliably and credibly, with as little burden as possible. To be successful, discussions need to incorporate both perspectives, as well as consider the impact of changes on staff, financial and operations systems.

6. Balancing Flexibility and Direction.

A pressing issue at the national and state levels has been how flexible an outcome measurement system should be. The MATF clearly wanted to create as flexible a system as possible. While

numerous measures have been suggested, as long as a measure can be tied to one of the six national goals, any measure can be used. On the other hand, some states have pressing state needs for aggregable data to report to the state legislature. States have chosen, through collaborative discussion, a wide range of options for balancing the need for local control and information with statewide aggregability of data based on:

- pressures to provide statewide information;
- the number of agencies within the state; and
- the complexity of the measures that agencies want to collect.

Some states have left the field wide open, asking that local agencies report outcome data using any measures that are relevant to their particular efforts. Other states have developed a list of agreed-to measures that all agencies will report on. Finally, some states have chosen a limited number of common measures, and asked agencies to report on others as appropriate.

7. Looking Beyond Current Structure and Boundaries.

A major result of this effort to look at CSBG outcomes has been a shift from looking at individual program effects to overall changes experienced by clients and communities. This has required local agencies and states to look across programs not only for their effects but for ways to collect data, track clients and support each other in looking at outcomes. States who have successfully implemented outcome measures have been willing to look beyond the current boundaries of their work. State offices and local agencies have entered into discussions across programs and designed overarching planning and intake systems that serve multiple programs and funding sources. For example, in one state, CSBG funds were used to design a database program and provide training to local agencies, while computer hardware was provided to those agencies needing assistance by the weatherization program. At the local level, one agency realized that they could use a database system designed for LIHEAP, with a few small modifications, to track the progress of clients in other programs. Other agencies reorganized their staff system based on how clients were served, rather than by program funding source.

8. Willingness to Make and Learn From Mistakes.

Creating an environment that tolerates mistakes in the effort to learn has been helpful in creating innovations that focus on overall outcomes rather than program activities and in balancing the local and state needs. This kind of environment encourages the taking of risks and the discovery of new ideas. This has been particularly important in building trust between local agencies and state agencies. When it is okay to try and possibly fail, people are more willing to try new

technologies rather than rely on traditional methods that produce known results. This is the kind of environment that has produced new measurement tools such as scales in addition to the use of traditional hard data.

9. Ensuring the Involvement and Commitment of Multiple Players at the State and Local Levels.

Successful efforts have also involved training for and decision-making by multiple levels within both the state offices and the local agencies. Rather than involving only senior management and/or planning staff, front line workers and monitors have been included, ensuring that issues relating to particular activities are identified and considered. Also, by involving all levels, commitment to the new methods is built throughout state and local organizations, rather than just at the top with begrudging efforts by front-line staff.

10. Developing a Common Language and Definitions.

While dictionary definitions of outcome, result and impact are strikingly similar, stakeholders need clear definitions and distinctions between terms. States that have begun to look seriously at what difference CSBG services make, have spent time developing agreements between the stakeholders in their states about what terms will be used and how they will be defined.

11. Allocating Resources Appropriately.

Effectively implementing and utilizing outcome measurement systems requires an awareness of what is realistic both in terms of establishing implementation and understanding the data collected. In terms of implementation, it is important that stakeholders recognize that it takes time and funds to train front line staff, to redesign computer database systems, and to collect meaningful data. For most states, it will take at least a year to get new outcome oriented management systems up and running.

12. Setting Realistic Targets.

In terms of interpreting results, many service providers have operated under the assumption that anything less than 100 percent success is failure. This belief has often been a major source of resistance to tracking results. In reality, this standard is not used by any other industry because it is untenable.

It is important for state offices to recognize that, depending on the program, a 20 percent change may be both realistic and cost effective. For example, traditional for-profit headhunters only place about 20 percent of their clients. If a local agency were able to match this rate with their clients, who have far greater educational and skill deficits, it would be spectacular.

13. Using a Continuous Improvement Approach.

Many states have used the introduction of outcome measurement to refine a continuous improvement approach to CSBG services. They have looked not only at the end result of services but at how this knowledge fits into the planning cycle and connects back to the needs assessment process.

In one state, agencies were asked to submit their needs assessments for review and comment prior to their community action plans. This gave the agencies the opportunity, if necessary, to improve their needs assessment, prior to planning their activities for the year. Another state focused on the needs assessment methodology. Their goal was to make sure that each agency got out into the community and learned both what the community saw as needs and how the community perceived the agency itself. Program and outcome efforts were then directed toward meeting community needs and measuring success in doing so.

14. Using Data Successfully in Marketing.

Agencies and states that have used data successfully to demonstrate what they do are more likely to accept the addition of outcome measures to the data they currently collect. They are more likely to understand that while initially resource intensive, a results-oriented approach to management and accountability can protect and even increase resources available.

In the last few years, states and agencies have begun collecting data describing client characteristics. This initially took major investments of staff time and funds. However, many states and local agencies have found that being able to describe the population served has assisted them in identifying needs and resources to meet those needs. These states and agencies see the potential for a similar return on the investment in implementing results-oriented management and accountability. Some agencies have already begun to use outcome data to focus their priorities to more effective strategies. Others have added the names of those who have become self-sufficient to their speaker lists and even to their donor lists.

COMMON BARRIERS

In addition to the best practices discussed above, there were several barriers or areas of resistance that states encountered as they began to develop outcome measurement systems. Most of these barriers were the result of concerns about the resources that would be required by the new systems and about the unknown consequences of measuring outcomes.

1. Measuring Outcomes Takes Resources Away from the Poor.

There is no question that designing and implementing data collection and management systems takes resources of time, technology and money and that these expenses can seem daunting. In the short-term, implementing outcomes may in fact reduce some services. Over time, however, most organizations have come to see that these investments can return resources through better management, as well as preserving and increasing funding.

2. Lack of Success Will Cost Agencies Funds.

Many agencies were concerned that those agencies producing weaker outcome data would be penalized, even though the result may be due to economic forces beyond their control, such as factory closings.

At this point no state funding formula has been altered to include outcomes. This is unlikely to change until a clear understanding of what constitutes a reasonable outcome has been agreed upon. Further, a commitment has been made to examine state and agency results within some contextual understanding of the environment in which the state or agency is operating.

Another concern frequently expressed is that the movement to results-oriented management and accountability will affect the magnitude of the client numbers reported. This will happen in multiple ways. As agencies move from counts of service units to counts of outcomes, even if the same number of individuals are served, these new numbers will be smaller, as it may take 27 service units to produce 3 outcomes. Also, as agencies increasingly move to provide family development and other long-term services rather than focus on emergency services, it is likely that the greater investment necessary will result in fewer people being served. As these new numbers are reported it will be crucial to educate the public about what they mean and why they differ from previous kinds of reports.

3. Being Successful Will Cost Agencies Funds.

Some agencies have been concerned that using outcome measures could mean they would work themselves out of a job. For example, if an agency is very successful in helping families increase their incomes above the poverty line, then there will be fewer low-income families in their area and their funding could decrease. While this has yet to happen, understanding the context of efforts will be important as outcome measurement becomes part of how business is done, and attention will need to be paid to rewarding rather than inadvertently penalizing those who are successful.

4. CSBG Represents Only a Small Portion of My Agency Budget -- Why Should I Go Through All this Trouble?

This has been a barrier for many agencies who see outcome measurement as taxing resources and not as a useful management tool. The CSBG is a small portion of many agencies' budgets, however, it is often one of few funding sources that support the infrastructure of agency administration and operation. As such, it is also then a part of many of the activities provided by the agency. While there has been pressure to look at the results of CSBG supported services, other programs are beginning to ask similar questions. Starting now, with CSBG, provides the opportunity for states and agencies to make the shift toward examining performance and learn what works and what doesn't, without funding being tied to the findings.

5. Should Only Those Services Supported by CSBG be Covered -- What About Other Programs?

Because outcome measurement and management involves looking at client outcomes, not funding stream outcomes, it can seem awkward and cumbersome. At the same time, most programs are now being asked to address the issue of what difference they have made. The systems created for CSBG have, with this in mind, largely been flexible. In general, they have allowed for the development of measures relevant to multiple funding sources and measures that focus on the outcomes as experienced by the client (whether family or community), not as produced by a particular funding source. These systems have in many cases served as models for other programs and can be readily adapted to provide information for other funding sources.

6. This Is Just a Fad.

Some agencies and states have been resistant to investing significant time and financial resources in adopting an outcome orientation because they believe that this is just another management system fad like "management by objectives" and "total quality management." It is probably true that as time passes other management techniques and expectations will be developed and implemented, however it is clear that more and more funding sources are looking for outcome accountability. More and more often funds are being tied, not to services provided, but to outcomes achieved.

7. Lack of Agency Capacity.

Another source of resistance has been concern about how well equipped the agency is to adopt this shift. While agency leadership may appreciate the importance of results-oriented management and accountability, they may not see how they can implement it given limited staff, time and funds. Technical assistance may be necessary to help these agencies identify ways to begin the transition.

8. This Is Trying to Change What Services We Provide.

Some agencies have seen the effort to look at outcomes as a policy shift that will force them to give up providing emergency services and to only provide intensive, long-term services. While certainly a shift in service priorities may be appropriate in some communities, it is not necessary to do so to implement an outcome orientation.

It is not necessary to change what services and activities agencies provide, but to change how those efforts are thought about and described. It is not necessary to stop providing meals to seniors, but to stop talking about it only in terms of how many meals have been served to how many seniors. It is necessary to add what happened because those meals were served. For example, for many seniors, the delivery of meals makes it possible for them to remain living independently, which both maintains their quality of life and saves the costs of institutionalization.

A RANGE OF MODELS

As you look across the nation, there is a wide variety in the ways states have begun looking at outcomes of CSBG services. Presented here are descriptions of four different approaches states have taken.

CALIFORNIA

In California, the process of addressing the need to identify CSBG outcomes was driven primarily by the California CSBG Information Systems Committee, established by the California Department of Community Services and Development (CSD) and composed of members of the state CSBG network and CSD staff. From the beginning, the development of a process for capturing outcome information was seen as evolutionary and a product of a collaborative learning process between the state office, the local providers and their customers that would take several years to evolve.

Before developing a process, several guiding principles were agreed upon:

- The outcome system should encourage each agency to report the full depth and breadth of the impact of their activities.
- Outcomes should be replicable and aggregable.
- The outcome reporting system should accommodate multiple programs and their reporting systems (such as LIHEAP).
- Outcomes and their indicators should be stated in strength-based terms.
- The outcome system must recognize the interdependence of the family, agency and community.

The system created in California to describe outcomes is a scaling approach that relies on a set of three charts or matrices describing family, agency and community development. Each matrix has five data rows, each describing a level of attainment -- in-crisis, vulnerable, stable, safe and thriving.

Each matrix has a series of column headings addressing particular dimensions of measurement for particular areas of service. For example, the family development matrix includes columns for shelter, food & clothing, transportation, health & safety, social/emotional health and competence, finances, etc. The agency development matrix includes columns for such areas as self-sufficiency impact, client satisfaction, planning and evaluation, and governance. The community development matrix includes such areas as public policy, civic capital, service and support

systems, and economic opportunity. To assure local flexibility the indicators and measures within the columns are locally determined within certain general parameters.

The use of the matrices was phased-in over a three year period. In the first year, a few select agencies tried using the new system. In the second year, agencies were given the option of using the matrices or the old reporting system that primarily focused on services units. Roughly half of the agencies chose the new system. In year three (1997), all agencies have moved to the matrix system.

In using the matrix system, agencies were not expected to look at outcomes for all dimensions of each matrix, but at those relevant to the work they do. So, if an agency works primarily on stabilization of families, they might concentrate on the levels of in-crisis, vulnerable and stable on the family development matrix. If an agency has no transportation program for families, they would not be expected to track outcomes in that column of the family development matrix.

Initially, agencies were given broad descriptions of what each level meant for each matrix and each agency defined each cell. During the pilot effort, it became clear that for purposes of usefulness and aggregability, more guidance and greater inter-agency consistency was necessary. As a result, narrative descriptions of each cell of each matrix are being prepared. Agencies will be given the opportunity and flexibility to further define the indicators especially relevant to local conditions that would be used to measure their progress toward these standardized outcomes.

As expected, the system is continually evolving and being improved. Current efforts include developing new reporting and automation procedures and formats, developing sub-scales for the community matrix and adopting the community scaling tool being developed by the Office of Community Services' Monitoring and Assessment Task Force.

While the matrices themselves are a striking innovation in looking at the impact of human services in general and CSBG in particular, those involved would say that the process of developing them has been equally innovative and important. The cooperative and trusting effort of the state and the agencies has been a driving force in providing an environment conducive to spawning new ideas and experimentation. There has been an exchange of information between other state CSBG departments and several California agencies to develop and refine the model. There was great openness in trying multiple alternatives, rather than hoping to find the one, "right" method. There was also the opportunity to experiment and learn from mistakes and make beneficial changes.

NEW YORK

One of the ways the CSBG office in New York sees its role is to make it easier for CAAs to assist low-income families and communities. The focus in New York was to create an environment in which the local agencies could build on what they were already doing, but begin to change the way they thought about their work by looking at the outcomes of their efforts. In many ways, New York used a conservative strategy to implement a results-oriented approach. As a starting point, for 1996, local agencies were asked to tie the narrative descriptions of success that they report, to one of the six goals developed by the MATF. While there was no other major change in 1996, agencies had the chance to work with the state office on what changes would be required in later years.

For 1997, agencies were asked to select measures for the MATF goals they would use to measure success, on an agency-wide basis. Reporting on agency level measures represented a major shift from looking at results program by program to looking at the sum total of what the agency as a whole accomplished. Each agency could select any measures they wanted, but were asked to try them for two years. This would make it possible for each agency to establish a baseline for their measures in year one and compare them to year two. If a measure proves to be unworkable after the second year, it can be changed.

Agencies were provided training on outcome measures and results-oriented management and accountability in preparation for selecting measures and preparing their community action plans. Also, for several years the state had been working with the CAAs in the area of family development, creating a Family Development Specialist Certification Program. This program placed an emphasis on what goals were achieved by the families assisted and led the way for agencies to begin to think about what their other programs achieved.

As in all states, there was still some initial resistance to implementing an outcome orientation. There seemed to be three primary concerns: tracking outcomes takes resources and training, difficulty dealing with reporting not just on CSBG funds, and being concerned that their level of effort (previously captured in units of service) would no longer matter. The state has worked closely with agencies around these concerns. Training has been provided. Also, by looking at units of service in conjunction with results, agencies have begun to explore describing their work in terms of return on investment; i.e., what was achieved for a particular level of investment.

The reciprocal sharing of data in New York has also helped in overcoming resistance. The agencies in New York provide fairly comprehensive reports to the state, however, they make these reports annually. From these annual reports, the state then can prepare its annual Management plan and respond to requests for data from other state agencies, state legislators, the National Community Action Foundation, and even the annual Community Services Block

Grant/Information System Survey conducted by the National Association for State Community Services Programs (NASCSP). The state also compiles a report that is provided to agencies so they can see how they are faring, relative to their peers. This makes the data collection effort, while comprehensive, useful to the agencies and ultimately streamlines the time they spend reporting information.

OREGON

In Oregon, the move toward an outcome orientation came from a number of sources. The state legislature adopted a set of 259 benchmarks to assess the progress of the state toward strategic goals. These "Oregon Benchmarks" became the basis for establishing budget priorities within the state government. This statewide focus led all organizations and programs receiving state funds to look at the results of their services, not just CSBG or CAAs. This environment helped move forward the process of adopting an outcome orientation.

The Department of Housing and Community Services, which administers the CSBG, developed a new planning process to incorporate the Oregon Benchmarks. The Department also administers the Low Income Home Energy Assistance Program, the Weatherization Assistance Program, the HOME program as well as a number of other programs that serve low-income families and communities. Rather than continue to have grantees for each of these programs provide a program specific plan, the Department, along with a committee of representatives of the local agencies, developed the "Omniplan" to be used by the agencies for the two year funding cycle beginning in 1995. Using the Omniplan, local agencies provide integrated workplans and budgets for all emergency assistance, stabilization, self-sufficiency and capacity building programs funded by the Department, rather than separate plans for each funding source.

The Omniplan had two major effects in terms of implementing an outcome orientation. It required programs within agencies to work closely together and it required tying services to results related to specific items of the Oregon Benchmarks.

The application for funding portion of the plan consists of four sections: summary narrative, goals and objectives, the allocation plan, and the budget. Then the plan includes three reports to be filed quarterly -- one each for client characteristics, services and outcomes. To complete the first four sections, programs had to work together to jointly consider the community needs assessment and planning process and to describe how the continuum of agency services would work to meet those needs.

In implementing the Omniplan, a tremendous emphasis was placed on revitalizing the relationship between the agencies and the community through the needs assessment process.

Agencies were expected to go into their communities, not rely on needs assessments of other organizations, and work with community leaders and residents in determining their desired outcomes.

Within this planning process, agencies were asked to identify goals that would work to meet stated needs and provide an outcome-based objective to measure progress toward each goal. Finally, they had to describe what services they would provide to meet the objectives and relate them to the appropriate statewide standards described in the Oregon Benchmarks. This introduced the concept of adding results to the planning process -- identifying needs, setting goals and objectives, designing methods to meet the needs and *identifying what impact their efforts had.*

The Omniplan process should ultimately save agencies time when compared to filing five or more separate program plans, however it is much more difficult than any one of the separate plans would be. In many agencies, programs have been operated as separate entities organized around funding streams. The Omniplan forces programs to interact and organize around client needs, not program boundaries. This has laid considerable groundwork for shifting to a results-oriented accountability and management structure, which focuses on client outcomes rather than program service units.

Clearly the Omniplan represented tremendous change and was not uniformly seen as a wonderful process. There were concerns about the burden of additional data collection. Agencies believed that to add the new elements, they would need to stop gathering some of the data they currently collect and therefore be unable to track trends. The Omniplan process also will require changes in how financial systems function. Finally, making the changes to operations, data collection and financial systems is expensive and not worth it if this new system isn't going to last.

Agencies were also concerned about the ramifications of not meeting their outcome objectives. The outcome objectives are seen as a planning tool. If they are met, that's great. If not the state will work with the agency to learn why not -- was the objective unrealistic, was there a program change, etc.

These concerns and others were raised with the state CAA association and an intense dialogue between the state office and the association began. The outcome of this process however has been a clearer understanding of the importance of the plan and a set of measures that will be used statewide. Perhaps even more importantly, working through the issues about the Omniplan ultimately brought the state, the association and the agencies together, helped them more clearly define roles and improved the relationships between stakeholders.

Because the Omniplan preceded the work of the OCS Monitoring and Assessment Task Force, agencies and the state office in Oregon have gone back to look at how to meld the expectations of both systems. A staff person has been added in the state office to assist agencies in this process. The agencies in Oregon have agreed on eight outcome measures they will all use to demonstrate progress within the six OCS goals. These measures are:

- the number and percent of participants currently engaged in employment or self-sufficiency programs obtaining, maintaining or improving employment status for at least 90 days or more per year;
- the number and percent of households in the core caseload surveyed during the 1997-99 reporting period that indicate that they consider themselves more self-sufficient since participating in agency services or activities;
- the number and percent of other organizations in the community who also serve low-income people who believe the agency has helped improve the conditions in which they live;
- the number and percent of families in an agency's core caseload who moved from homelessness or transitional housing to stable housing.
- the number and percent of client households surveyed during the 1997-99 reporting period who indicate that they feel they are part of the community in which they liye since participating in the agency programs;
- the ratio of non-CSBG dollars leveraged to CSBG dollars and the total dollars leveraged;
- the increase in the number of funding sources and total funds raised by the agency; and
- the number and percent of agencies which have service plans linked to need assessments.

PENNSYLVANIA

Pennsylvania approached the issue of results-oriented management and accountability from a unique direction, with the emphasis not on particular goals or measures but on making outcomes and "outcome thinking" part of how agencies conduct their business. Beginning with a two-day statewide conference held in November of 1994, the state embarked on a process of ensuring that agencies not only began to look at what happened as a result of services, but to integrate an outcome orientation into all facets of how the agency performed. The primary goal of the training was to help agencies move from a program or service-oriented management process to one that focused on outcomes, across programs and services.

Subsequently, the Pennsylvania state office, through a contract with the state CAA association assessed not only what training and technical assistance agencies might need to implement an

outcome-based management system, but also what skills and resources they already had. The agency assessment looked at nine different dimensions of agency management[1]:

- Outcome thinking - the degree to which the agency has moved in shifting from a service oriented management process to an outcome-oriented management process.
- Applied technology - the degree to which an agency uses outcome measurement tools.
- Management implications - the extent to which management practices have been adapted to handle outcome information.
- Board communication - the extent of the Board of Directors' awareness of, support for and ability to communicate with the staff in outcome concepts and language.
- Internal outcome application - the extent to which outcome concepts are incorporated into the day-to-day functioning of the agency.
- External outcome application - the extent to which outcome language and concepts are used in the communications the agency has with its community partners.
- Staff development - the extent of training provided to staff on the numerous areas of the transition to outcome-based management.
- Applied communications - the consistency with which an agency uses outcome language and concepts.
- Service delivery system - the extent of an agency's ability to measure outcomes within its existing service delivery system.

The assessment revealed a wide range in abilities for each dimension. It also revealed that for most dimensions, at least one agency in the state was a leader. Based on the needs identified by the assessment, the state office and the state CAA association worked to create relevant assistance, building on and using as resources the existing strengths that were also identified. Training in basic and intermediate outcome-based management was provided across the state. Currently, peer-to-peer training modules are being created in five areas: return on investment, management information systems development, scaling tools, internal communications, and external communications. These models will be used to develop a cadre of peer trainers who can share their expertise and act as resources with other agencies in the state.

A re-assessment of the agencies is planned to measure the success of these training efforts and to identify further training and technical assistance needs.

While the emphasis has been on management, there are some reporting requirements. Similar to New York, agencies will be asked for their 1997 reports, to tie to a specific outcome their anecdotal narratives describing successes. For 1998, they will be asked to identify what

[1] The Agency Outcome Matrix Assessment and Scales©1996, Positive Outcomes™, Eleanor Hunnemann & Frederick Richmond, Managing Partners, Harrisburg, Pennsylvania.

measures they are using, who or what they apply to and what they have found. These reporting requirements are deliberately flexible and broad, with no uniformity mandated.

OTHER EFFORTS AROUND THE NATION

The four models presented above were chosen to demonstrate the wide ranging strategies states have taken in implementing results-oriented management and accountability. Numerous other states have also begun looking at the results of CSBG services. Below are brief descriptions of the activities and approaches being used in some of these states.

CONNECTICUT

- Convened task force of state and local stakeholders.
- Developed statewide measures that are now being tested. In the first reporting period, all agencies were able to report on at least some of the measures and data were reported for all the measures by at least some of the agencies. The measures chosen were:

  1. Percent of participants enrolled who achieve appropriate program benchmark
  2. Percent of participants making repeat requests for emergency services
  3. Percent of clients paying more for housing than the affordable housing standard
  4. Number of clients linked to appropriate maintenance services
  5. Participation on boards, committees or tenants groups
  6. Percent clients living at the same address for two years
  7. Percent of clients voting in the most recent election
  8. Number of new and renewed joint agreements
  9. Completion of community needs assessment
  10. Number of funding sources accessed
  11. Number of new programs/funding sources accessed
  12. Percent of programs targeted to special needs populations
  13. Percent of children receiving age appropriate immunizations and screening for lead poisoning

- Statewide Needs Assessment Survey
- Statewide Outcomes Survey
- Local ability to add measures/outcomes

DELAWARE

- Conducted a statewide needs assessment in 1994 in which all community forums identified comprehensive case management and support services as the number one anti-poverty strategy.
- Developed a comprehensive case management project in two counties. First State Community Action Agency, the state-wide community action agency, set up the project in conjunction with eight subcontractors. The project mandated the use of full-time case managers with position descriptions including comprehensive client assessment, development of a goal/action plan with clients to overcome barriers to self-sufficiency, use of an outcome-based reporting system and an average caseload of 20 participants.
- Used a three-point scale (no progress, some progress and major progress) to measure client progress toward goals. Clients were working toward an average of 6.7 goals. The 6 most common goals were:

  1. Permanent Housing - obtain permanent housing that is affordable, clean, safe and has adequate space;
  2. Money Management Skills - develop and successfully follow a family budget for three consecutive months;
  3. Employment - obtain full-time employment for desired career goal(s) or upgrade previous employment status;
  4. Emergency Housing - obtain a temporary housing/living arrangement;
  5. Career Goals - identify a career goal for employment that can realistically be achieved;
  6. Transportation - learn how to drive, have access to a car or obtain other means of transportation.

- Also implemented an outcome-based system for examining agency performance in the project. A five point scale was used (inadequate, minimally acceptable, satisfactory, very satisfactory, excellent), based on the percentage of clients and families demonstrating some or major progress. The majority of agencies scored "very satisfactory," meaning that 70% or more of clients demonstrated some or major progress, with at least 25% demonstrating major progress toward their goals.

ILLINOIS

- Convened a CAA/State CSBG Office Task Force on the implementation of Assurance 13 of the 1994 CSBG reauthorization.
- Established the blend of the new requirement for "goals and outcome measures" with the 13 year-old Illinois requirement for annual "performance measures."

- For Program Year 1997, adopted specific goals and measures from the MATF list to establish uniform direction and results in the state-mandated CSBG programs which include: job creation, education, outreach and referral, emergency services and family and community development.
- Made optional the application of goals and measures for other CSBG contractual elements.
- Established minimum requirements for a client need/satisfaction survey to be used by all Illinois CAAs.
- Conducted regional and statewide training on implementing CSBG outcome measurement.
- Introduced the possible use of "avoidance measures," developed by one of the CAA Task Force members. These measures focus on problems avoided through CSBG-generated interventions and include such items as the number of families kept from experiencing hunger and the number of households remaining in safe housing due to the provision of utility, rent or mortgage assistance, home repair, etc.
- Supported CAA capacity building efforts to conduct comprehensive family case management by trained and "certified" CAA outreach workers utilizing self-sufficiency scales. The certification program entails 68 hours of classroom training and includes three semester hours of college credit.
- Continued the state mandate that at least 10% of CSBG funds (per CAA) be spent on private sector job-creating economic development resulting in at least one job being created and filled with a CSBG eligible client for each $10,000 of blended public/private lending (preferred method) or other expenditure.
- The Task Force will be active throughout the 1997 implementation process to refine and adjust the CSBG goal and outcome measure process to make it valued by those who must use it.

KANSAS

- Convened a task force with membership from each CAA and the state office.
- Chose to implement a uniform, statewide system, primarily based on a family development scale.
- Developed statewide uniform descriptors for each cell of the scale.
- Field testing with different agencies exploring different options including: using different sampling methods; applying scaling to different client groups -- case management, Head Start, or agency-wide; and trying different follow-up periods -- 3 months, 6 months.
- Agencies are also developing and testing their own data collection instruments.

MINNESOTA

- The Wilder Foundation worked with state office, state association and local agencies on using an outcome-oriented approach. Their training included overview, setting goals, selecting indicators, and data collection.
- The process started out flexible, but ended up with common statewide measures for each of six programming goals. This was not accomplished by focusing on the goals and measures level, but by also looking at the pragmatic practical aspect of how measurement and tracking would actually take place. Partners identified existing valid reliable data elements and built from there.
- Both the common measures and the data orientation were in part tied to the fact that the CAAs use a common data collection software so all were familiar with similar technical possibilities and a group modification was cost effective.
- Statewide move toward an outcome orientation, Minnesota Milestones (similar to the Oregon Benchmarks), created an environment that also pressured/fostered progress.
- The statewide measures used for the six program goals are:

1. ECONOMIC SELF-SUFFICIENCY - number or percentage of unemployed participants who have employment at termination of program.
2. HEAD START - number and percent of children enrolled who have all immunizations up-to-date prior to program departure, number and percent of children completing Head Start who have identified health needs met by the time of program completion, and number and percent of families in Head Start who have identified social service needs met by program completion.
3. LIHEAP - Number and percent of LIHEAP eligible families with incomes below $12,000 who as a result of CAA services, pay no more than 70% of their overall energy cost.
4. TRANSPORTATION (customer satisfaction survey of transportation programs) - number and percent using transportation for basic needs, number and percent reporting on-time and accessible services, and number and percent reporting high satisfaction with vehicle and operational safety.
5. HOUSING The number and percent of persons and households who were at-risk of losing their housing, who at the 3-6 month follow-up, report they now have stable housing.
6. SENIORS - The number and percent of senior food program participants who report improved health status following program participation; the number and percent of all senior program participants who report increased social contact and reduced isolation as a result of program participation; the number and percent of senior volunteers who report satisfaction with volunteer roles and responsibilities; the number and percent of all senior program participants who report that they have obtained needed services as a result of agency action.

Agencies are expected to report on the measures that have been developed that apply to programs they operate.

- The emphasis has been on developing a system that will ensure data integrity. For each of the measures, each data element has been identified and defined. For example, to obtain the data for the economic self-sufficiency measure, five data elements are involved: employment status when entering the program, employment status when leaving the program, hours of employment when terminating the program, hourly wage at that time, whether or not the employment is temporary at that time.

NEW HAMPSHIRE

- All agencies use the same client database system.
- Agencies, working with the state office, chose four measures that will be used statewide: total dollars mobilized by the agency, ratio of the total dollars mobilized to CSBG funds, and a two measures for LIHEAP -- reduction in energy burden and funds raised for the LIHEAP Incentive Program.
- Each agency will develop and report on one other measure of their choosing.

NORTH CAROLINA

- Since 1981 the agencies in North Carolina have been required to identify performance, efficiency and impact measures for the programs they operate. In 1990, the state developed standardized measures for each statutory category. As a result, thinking about the outcome of service efforts was not an entirely new concept and significant groundwork had been laid for developing an outcome orientation.
- The state community action agency association, with assistance from the state office, has conducted several workshops on measuring outcomes and tying them specifically to the work of the CAA. In other words, looking at employment of program participants; not the community level of unemployment.
- Revised the standard measures to ensure that they were outcomes (not outputs)
- Revised the reporting system to account for the fact that individuals can have multiple outcomes and that multiple programs can have the same outcomes.

TEXAS

- Began looking at outcomes in 1995, by using $50,000 of CSBG discretionary funds to set up an annual incentive award program for the agencies that helped the greatest number of families leave poverty. This has re-focused the attention of the agencies from responding to immediate crises to focusing on the longer term well-being of those served.
- Developed two-stage planning process with needs assessments reviewed prior to submission of community action plans. The state office worked closely with the agencies to ensure that, prior to developing community action plans, each agency had a realistic reliable picture of the needs of their community. This also led to changing the focus of state monitoring efforts from looking at client activities, to looking at how the agency was perceived in the community.
- Developed a statewide data collection and reporting system. The state office provided CAAs with hardware, software *and training* in how to use the system. This made possible not only electronic reporting to the state office, but also has assisted agencies in developing communication with their main offices from remote outside locations. This has proved particularly helpful in rural areas where intake centers may be off-site.
- Along with developing the statewide data system, the state office also developed and assisted the agencies in developing a statewide family case management program. Each agency in the state is now involved in providing on-going in-depth services to at least some of the families they serve.

WASHINGTON

- Convened a volunteer work group composed of one third of the state's community action agencies, two state CSBG staff, an instructor in program assessment from Seattle University and the Executive Director of the state CAA Association. Meeting over a two year period, developed a workbook of CAA programs. Each CAA program description in the workbook includes a clearly defined goal and outcome with a list of acceptable methods for collecting outcome information. Methods include standards for how large or small a sample should be taken to be valid.
- Using the workbook, eliminates additional expense to the CAA since it identifies outcomes from its existing data collection system. The new system also creates the basic infrastructure that CAAs can use to develop a program mission and clear, reasonable statements of long-term goals to which performance will be assessed.

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SUGGESTED TERMS AND DEFINITIONS FOR RESULTS ORIENTED MANAGEMENT AND ACCOUNTABILITY (ROMA)

Activity
Activities are what a program does with its inputs—the services it provides—to fulfill its mission. Examples are sheltering homeless families, educating the public about signs of child abuse, and providing adult mentors for youth. Program activities result in outputs. (United Way)

Benchmarks
Performance data that are used for comparative purposes. A program can use its own data as a baseline benchmark against which to compare future performance. It also can use data from another program as a benchmark. In the latter case, the other program often is chosen because it is exemplary and its data are used as a target to strive for, rather than as a baseline. (United Way)

Impact
The direct or indirect effects or consequences of achieving program goals. (OMB)

Indicator
(Outcome) indicators are the specific items of information that track a program's success on outcomes. They describe observable, measurable characteristics or changes that represent achievement of an outcome. For example, a program whose desired outcome is that participants pursue a healthy lifestyle could define "healthy lifestyle" as not smoking; maintaining a recommended weight, blood pressure, and cholesterol level; getting at least two hours of exercise each week; and wearing seat belts consistently. The number and percent of program participants who demonstrate these behaviors then is an *indicator* of how well the program is doing with respect to the outcome. (United Way)

Input
Inputs are resources a program uses to achieve program objectives. Examples are staff, volunteers, facilities, equipment, curricula, and money. A program uses *inputs* to support *activities*. (United Way)

Measure
The means used for assessing the achievement of objectives. Measures may be quantitative or qualitative, objective or subjective. The particular form of measurement used is dependent on the objective to be measured, the availability of opportunities for measurement and the cost of the measurement process. (United Way of Cincinnati)

Milestones
Key accomplishments or threshold points through which project participants must pass if it is to be successful. (Williams, Webb & Phillips)

Outcome
The benefits or changes for clients, households, or a community that are produced during or after participation in program activities. (Tennessee)

Outcome indicator
Specific items of information that track a program's successes on outcomes. They describe observable, measurable characteristics or changes that represent achievement of an outcome. (United Way)

Outcome measure
An assessment of the results, effects or impact of a program activity compared to its intended purpose. (OMB)

Outcome target
(Outcome) targets are numerical objectives for a program's level of achievement on its outcomes. After a program has had experience with measuring outcomes, it can use its findings to set targets for the number and percent of participants expected to achieve desired outcomes in the next reporting period. It also can set targets for the amount of change it expects participants to experience. (United Way)

Output
Products of a program's activities, such as the number of meals provided, classes taught, brochures distributed, or participants served. Another term for "outputs" is "units of service." A program's *outputs* should produce desired *outcomes* for the program's participants. (United Way)

Output measure
A tabulation, calculation or recording of activity or effort that can be expressed in a quantitative or qualitative manner (OMB)

Performance
The accomplishment of actions that transform inputs (through a process) to outputs and outcomes. (OMB)

Performance Indicator
A particular value or characteristic used to measure outputs or outcomes. (OMB)

Scale
An instrument that is used to measure an outcome on a continuum. It is used to show incremental progress, stabilization, or decline. (Tennessee)

DEFINITION SOURCES

These definitions came from the following sources:

OMB Primer on Performance Management, 2/2/95.

Tennessee: The Guide to Implementing ROMA for CSBG Agencies in Tennessee, Tennessee Department of Human Services.

Williams, Web & Phillips: Outcome Funding: A New Approach to Targeted Grantmaking.

Utah: Governor's Office of Planning and Budget, November 1993.

United Way: Measuring Program Outcomes: A Practical Approach, 1996, United Way of America.

Martin and Kettner: Measuring the Performance of Human Service Programs (1996).

Appendix 4—Developing and Working with Scales

The following appendix provides additional information covered in Section 4—Developing and Working with Scales. it is recommended that readers review Section 4 prior to using the materials contained in this appendix. In addition, readers are reminded to contact members of the Task Force and Scales and Ladders Subcommittee to receive additional information and assistance.

Community Scales:

A Ladder to the Twenty First Century

A Proposal to the Community Services Block Grant Monitoring and Assessment Task Force for Measuring Change at the Community Level

A First Glance to Answer

- What is a Scale? What is a Community?
- What is the Framework?
- Why use This Tool? Assessing, Planning, Measuring, and Reassessing
- How do I use this Tool? Six Quick Steps

The Community Scaling Tool

- Definitions of Dimensions: Public Policy, Equity, Civic Capital, Service and Support Systems, Economic Opportunity
- Relationships of Family, Community, and Agency Scales
- Current Examples of Programs, Non-Service Strategies and Institutional Change

Acknowledgments, Resources and Bibliography

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Introduction

For over 30 years, Community Action Agencies have been at work helping improve the conditions in which low-income people live and helping low-income people gain a greater stake in their communities. Nationwide, the strategies these more than 1,000 agencies use are varied, reflecting the diversity of each locality's resources and pressures. This document presents a framework in which local programs can relate the commonalities of their struggles and results at the community level. The framework can also be used to stimulate collaborations between Community Action Agencies and their local partners.

The National Community Services Block Grant Monitoring and Assessment Task Force has established two national goals for explaining the results of the work the Community Action Network does at the community level: 1) **The conditions in which low-income people live are improved,** and 2) **Low-income people own a stake in their community.** The Task Force Subcommittee on Scales and Ladders recommends the framework of the Community Scaling Tool as one way to ***quantify the results*** of individual agency efforts to affect changes in public policy, equity, civic capital, service and support systems, and economic opportunity. These two goals, these five dimensions, and the narrative descriptions of these categories were carefully crafted to accentuate the values the Community Action Network has held as the focus of its work for the last three decades.

The Community Scaling Tool is designed to allow local agencies to show the incremental progress that is made towards the achievement of long-term, complex goals. Parallel tools (see introductory table on page 4) can be used to measure the incremental changes families and agencies make in their efforts to achieve stability and become self-sufficient. Family and agency level scaling tools are not featured in this document. This paper is designed to help agencies identify when their work produces results at the *community level*, and then provide a framework for assessing, planning, measuring, and reassessing.

The framework described in this paper was developed through a collaborative effort of the members of the National Community Services Block Grant Monitoring and Assessment Task Force Committee on Scales and Ladders. The opinions expressed in this document are those of its authors, and do not necessarily reflect those of the Monitoring and Assessment Task Force or Office of Community Service, Department of Health and Human Services.

July 1, 1997

Introductory Table* Contrasting Family, Community, and Agency Scales

	Interventions, Strategies, and Activities produce change in:		
National Goals	1 & 6 1. Low-income people become more self-sufficient. 6. Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive systems.	2 & 3 2. The conditions in which low-income people live are improved. 3. Low-income people own a stake in their community.	4 & 5 4. Partnerships among supporters and providers of services to low-income people are achieved. 5. Agencies increase their capacity to achieve results.
Unit of measure	**One client or family at a time** (consumers, individuals, enrollees, participants, households)	**A community condition or system** (wards, boroughs, counties, townships, parishes, SMSAs, territories, districits,neighborhoods)	**An agency or program** (agency, employee group, department, bargaining unit, project, program)
Scale Level & type of change	Family Level Scale measures change in levels of family functioning, attainment, and achievement	Community Level Scale measures change in levels of systems functioning, systems capacity, & community conditions	Agency Level Scale measures change in levels of capacity and performance
Dimensions of change	• income • education • family functioning • transportation • employment • housing • basic needs • community involvement • substance abuse • child care • health	• public policy • equity • civic capital • service & support systems • economic opportunity	• goverance • relationships & linkages • compliance • cultural sensitivity • workforce environment • planning • measurement and evaluation • external communications • information management
Scale Thresholds	• Thriving • Safe • Stable • Vulnerable • In Crisis	• Thriving • Safe • Stable • Vulnerable • In Crisis	• Thriving • Safe • Stable • Vulnerable • In Crisis
Aggregation level	agency or program	agency or state	state or agency

*Note to Introductory Table: This table contrasts the differences in scales which measure outcome for families, the community and individual agencies. The working paper which follows discusses ONLY community scales, community level outcomes, and strategies to effect community level change. For a more detailed discussion on the relationship between community and family scales, see the explanatory section on page 17.

What is a Scale?

A scale is simply a continuum which describes different states or conditions of status. It has a beginning point and an ending point, with increments in between to help us measure change. One example of a scaling tool we use daily is a thermometer. Inside a room, the thermometer is built into a thermostat to regulate temperature and therefore provide us with comfort. The scale begins at 50 degrees, ends at 90 degrees, with each increment of 1 degree marked in between. Although we could communicate with each other solely using the numerical indicators of degrees, we generally use words we have learned to associate with certain temperatures. Inside a house, 50 degrees is "cold," and 90 degrees is "hot." The number we associate with "comfortable" is generally around 70 degrees.

We can take the concept of scales and apply it within human services systems to help agencies get credit for what they are actually accomplishing. Scaling tools offer several unique advantages to the Community Action network.

First, scales can be used to measure concepts that are not easily quantified. Agencies are using scales to gauge progress toward economic self-sufficiency, degree of agency development, amount of community investment, and other concepts that are otherwise difficult to measure. Scales allow agencies to assign values to easily identified, discrete conditions, and to combine these values into a single measure of a complex idea like self-sufficiency. The experience of a number of agencies across the country demonstrates that scales are an efficient means of gathering data on program outcomes.

Second, scales allow agencies to measure intermediate steps. By comparing scale results taken at two different times, one can determine how much short-term progress has been made toward a long-term goal (such as self-sufficiency). Agencies using scales can demonstrate multiple interim successes even when the ultimate goal may not have been achieved. Agencies can build the celebration of interim success into their operations, thereby providing periodic motivation to all the stakeholders: the clients, the staff, and the funding sources.

Third, by using a common framework, scales can be aggregated. Aggregation is important because it allows agencies to present data on a number of clients, states to present uniform data on a number of agencies, and the Office of Community Services to present consistent nationwide information. In the tool proposed in Table 1 on page 7, the following words create a consistent continuum which could be used for aggregating each dimension: Thriving, Safe, Stable, Vulnerable, and In Crisis.

What is a Community?

This tool is designed to help agencies place in context the work they perform which achieves results at the community level. The table on page 7 represents the MACRO context of the discussion: in the broadest terms, what are the goals for community impact resulting from strategies and activities sponsored by the agency? A community, in this context, is not necessarily restricted by established legal or geographic boundaries. ***The term "community" can be used to describe any grouping of individuals who share common distinguishing characteristics (including residency).***

We often speak, for example, of the "low-income" community, or the "religious" community, or the "professional" community. The individual members of these "communities" may or may not reside in a specific neighborhood, county, school district, or voting ward, but an agency may be enacting strategies that will have measurable affect on them. The proposed tool allows agencies the flexibility to define the target "community" in ways that are most appropriate for the situation.

What is the framework?

The Community Scaling Tool consists of five scales arranged in a matrix format (see Table 1). The scales share a common set of five words which establish a range of thresholds: Thriving, Safe, Stable. Vulnerable, and In Crisis. For the purposes of this document, the five scales within the matrix will be referred to as "dimensions" of the overall community. These dimensions are designed to be broadly inclusive of both *community conditions* and *community systems*:

- Public Policy refers to both the formal written policies of the community as well as the unstated norms adhered to by the general population. Zoning ordinances are an example of a formal, written public policy. Zoning ordinances may or may not be ignored by the public and simultaneously enforced or unenforced by local officials.

- Equity covers both economic and social distributions of power, opportunity, access, and freedoms. Sexism, racism, and classism are all equity issues.

- Civic Capital captures any activity which a person participates in outside of their immediate family unit including volunteer, social and recreational, religious, and citizenship activities. Civic Capital can also refer to a group of people extending their participation in the community beyond their usual sphere, such as coporate service projects.

- Service and Support Systems include all social and human services, public safety, health, education, child care, housing, justice, infrastructure, and government services. Gaps in the "safety net," the extent of collaboration between agencies, and the comprehensiveness of services are examples of community conditions and systems interactions within this dimension.

- Economic Opportunity captures the business climate, the labor market, the diversity of the economic base, entrepreneurship, capital stakeholding, and capital resources. Examples of activities within this dimension include strategies to attract or retain jobs, increase job retention and promotion, match labor skill levels with available jobs, and improve new business success rates.

Each of the five community dimensions in Table 1 contains a set of summary descriptive word(s) which describes a continuum of conditions. The summary descriptive word(s) at the threshold levels of "Safe" and "Thriving" capture the vision and values the members of the Community Action Network have brought to their work for over thirty years. The descriptors in the threshold level of "Stable" often refer to conditions many communities consider "normal;" however, "normal" in the lives of many low-income people, and their communities, is a situation which begs for change. General narrative descriptions for each dimension are found in Tables 5-9.

To reiterate a major point, the dimensions of community are broadly stated. There is a functional reason for this large scope: agencies must be able to interpret their local conditions and strategies as appropriate. Each agency approaches its community problems and opportunities with strategies tailored for that community. The "cause" of a particular community condition can vary widely between communities, and the approach to "remedy" that cause will vary based on local resources and motivations. Agencies need the flexibility to explain the problems of their communities and correlate appropriate solutions.

For example, three different agencies operate a first-time home buyers' program in three different counties. One agency runs the program because local pressure from the Community Reinvestment Act created a pool of funding. The agency considers this an Equity issue because capital was not available in the target neighborhoods in proportion to the dollars the residents of the neighborhoods were investing in the local bank. A second agency runs the program because it could offer credit counseling, case management, and other services packaged together which creates a pool of applicants more likely to be financed. This agency considers their project as an expansion of the Service and Support System. A third agency offers the service in conjunction with a coalition of commercial concerns which are trying to stabilize neighborhoods (by increasing home ownership) in order to attract and maintain business/manufacturing jobs. This agency runs the program as part of an overall approach to increasing Economic Opportunity.

TABLE 1
COMMUNITY SCALING TOOL

THRESHOLDS*		DIMENSIONS				
		PUBLIC POLICY	EQUITY	CIVIC CAPITAL	SERVICE & SUPPORT SYSTEMS	ECONOMIC OPPORTUNITY
5.	Thriving	Innovative	Achieves Equity and Values Differences	Investing	Comprehensive and Integrated	Vibrant
4.	Safe	Supportive	Affirming	Contributory	Preventive	Emerging
3.	Stable	Selective or Reactive	Toleration and Awareness	Participating	Comprehensive but Reactive	Stagnant
2.	Vulnerable	None or Unenforced	Complacent and Uninformed	Awareness and Education	Responsive but not Comprehensive	Contracting
1.	In Crisis	Hostile	Conflict and Fear	Isolation	Non-Responsive	Collapsed

*Note to Table 1: the Numbers in the far left-hand column are designed to be interchangeable with the words in that column. The numbers are offered as an alternative to the words because the authors are aware that certain community situations are so volatile that the words may create unintended barriers to communication.

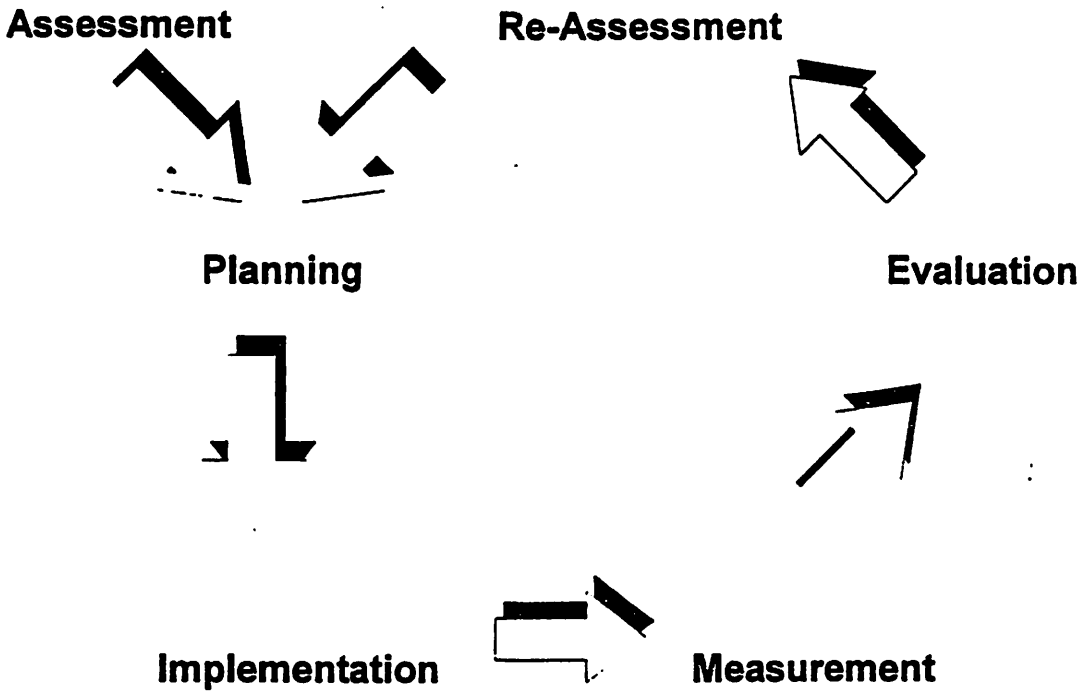
Why Use This Tool?

The proposed Community Scaling Tool can be used to facilitate a number of processes within the daily operations and annual cycles of an agency. Because the five dimensions of the tool are designed to be broadly inclusive of the major components of "community," the tool is helpful in examining both *conditions* in the community and *systems* of interaction. Therefore, ***an agency can use the same tool as the framework to assess community problems, plan interventions to effect change, measure incremental progress towards change, and re-assess agency strategies*** (see Figure 1). Once staff become familiar with the tool, they will see the additional benefit of using the same, common framework to assess, plan, measure, and re-assess a wide variety of programs and approaches, such as the change in the attitudes of a local advisory board, the effectiveness of collaboration between social service providers, the availability of work experiences for teenagers, the correlation between child care and adult employment, the extent of gaps in the service delivery system, the change in conditions associated with poverty, and the range of volunteer opportunities available to youth, adults, and the elderly.

The tool can be used internally, with an agency's strategic planning process, to identify goals and timelines for the action steps the agency will take to achieve a community level outcome. An agency may correlate its goals with the Community Services Block Grant (CSBG) Monitoring and Assessment Task Force (MATF) National Goals, and the action steps may be reported on within the funding cycle for CSBG. Because many community level outcomes are

achieved by continuous work through several annual funding cycles, the tool gives agencies a consistent framework to place their annual activities in the context of the long-term goals.

Figure 1: Using the Community Scaling Tool in Assessment, Planning, Measurement, and Re-Assessment



The tool can also be used externally to facilitate better communication, strategic planning, public relations, and cooperation among the local players in a collaborative process. By presenting the framework of the scaling tool to guide discussion, the agency can place the work of the collaboration into the greater context of the community—an essential element of effective advocacy. The local collaboration may opt to adapt the definitions of incremental change to reflect their specific conditions, and the agency can still respond to requests for information that can be aggregated by using the dimensions outlined in the template.

And finally, the scaling tool creates an environment in which an agency can explain the lack of change at the community or family levels instead of trying to justify all activities as having measurable community impact. The scaling tool can explain lack of change because of the shortage of resources, mitigating factors, or other variables which apply to family and community level change. Environment factors that present barriers to change for individuals, such as the lack of affordable day care or an inadequate number of jobs which pay a living wage, can be explained in context using this tool.

A Cautionary Note: This tool was designed specifically to be broadly inclusive of community conditions and systems in part, to provide an agency with a comfort zone in which they can raise questions about troublesome community problems. The authors were acutely aware that any tool designed to show progress towards community solutions could potentially be used to assign blame or failure to agencies unable to show success.
Therefore, agencies are encouraged to:

- understand the distinctions between family level, agency level and community level outcomes. Only use this to for assessing, planning, measuring and reassessing community level change.

- establish realistic indicators for change which represent the total range of possible community-wide solutions. Do not select indicators solely on the basis of whiter those indicators make your agency look successful when compared to other community partners.

See Table 2 for a complete listing of the advantages of using the Community Scaling Tool.

Table 2

Dispelling the Myths About the Community Scaling Tool

What the Tool Can Do	What the Tool Cannot Do
• help agency stakeholders see their organization and its activities in the context of their community • differentiate between achievement of short-term, intermediate and long-term goals (incremental change) • show a direct relationship to community collaborative strategies developed to achieve those goals • explain in a simple, flexible practical way a local agency's needs, strategies, and programs to multiple funding sources • enhance communication between partners in a collaborative effort • provide a context to help explain unanticipated outcomes • provide a mechanism for agencies to compare themselves to their peers • create a safe environment for agencies to raise questions about troublesome community problems • provide "strengths-based" language to discuss community problems with collaborative partners • evaluate the collective impact of multiple strategies over several grant periods • provide a context for "modeling behaviors" of agencies which serve as community catalysts • show a direct relationship of an agency's day-to-day activities in advocacy with community level systems changes • help agencies focus their efforts on particular community concerns • allow aggregation of systems changes which result from diverse implementation approaches • help understand and explain the social, political, and economic conditions which produce barriers to change for families and communities	• exclude the role of community partners so a single agency gets all the credit for systems changes • hold a single agency responsible for community level outcomes over which the agency has no control • alleviate the need to report demographic and outcome information for families and individuals • replace formal impact evaluations required by certain funding sources • demonstrate the community impact of a single funding source

How do I use this tool?

The Community Scaling Tool can be used by an agency to assess community conditions and systems, plan for change, measure whether change has or has not occurred, determine the amount of change, and re-assess the agency's continued interventions. ***The agency must ask itself, "What, specifically, is going to change?" as a result of the planned interventions and strategies.*** If the answer is a condition of Public Policy, Equity, Civic Capital, Economic Opportunity, or a Service and Support Systems change, the agency should identify specific indicators it will seek to measure whether or not change has occurred. (For other possible answers to this question, see page , Relationship of Family, Community, and Agency Scales.) See Table 3 for six quick steps for using the Community Scaling Tool.

An agency will use the specific indicators to create a subscale applicable to its work. An agency may use only one column (dimension) of this matrix to describe its work on a specific community problem, or it may find that its activities bridge several dimensions. An agency would create a subscale for each dimension for which it wishes to show results.

Table 3
Six Quick Steps for Using the Community Scale

Step 1: **Assess**	Using the Community Scale as the framework for assessment, are there problems or opportunities in which your agency can provide needed and appropriate intervention? If yes, continue. (You might also ask "Why" was our agency represented at community meetings this month/year?)
Step 2: **Analyze**	Is the problem or opportunity one that can be changed by effecting change in community systems or conditions? Does your agency, alone or in collaboration with others, have the ability to achieve change at the community level? If you answered yes to both of these questions, continue. (If no, consider Family level measurement tools if you are effecting change one client/family at a time, or Agency level measurement tools if you need to increase agency capacity in order to effect change.)
Step 3: **Strategize**	Identify the specific condition or system that will be changed and decide in which of the five dimensions of the Community Scale the change can be measured: Public Policy, Equity, Civic Capital, Service and Support Systems and Economic Opportunity.
Step 4: **Focus**	Decide what aspect(s) (indicators) of the specific condition or system you will track in order to measure change. Create a targeted subscale using the indicators selected. Be clear that increments of movement can be seen between the different steps of the scale. Correlate the objectives in the agency's strategic plan to the amount of change that will constitute "success."
Step 5: **Measure**	Since you are measuring change, you need to have at least two measurements: one before the intervention (or at the beginning of the reporting period) and one after the intervention is completed (or at the end of the reporting period.) Change is determined by comparing the difference between these two measurements.
Step 6: **Re-Assess**	Using the Community Scale as the framework for re-assessment, take the data from your measurements and revisit the problems or opportunities your agency originally identified. Was your initial assessment accurate? Are there additional community systems or conditions which impact your agency's ability to achieve results at the community level? Are changes in your agency's intervention strategy necessary?

As an example of how to use the six quick steps, a community action agency identified a lack of affordable housing as one of the major barriers affecting the ability of clients in its self-sufficiency program to achieve success. Although the problem was identified through assessments of *individual* clients, the agency decided to undertake a *community* level strategy for solving the problem. Table 4 outlines the use of the six quick steps for this agency's first year of interventions. The six quick steps can be repeated for subsequent years of multi-year projects such as this one. A more in-depth narrative of this project can be found on page of this document. Tables10 and 11on pages 19and 20 contain the detailed subscales referred to in Step 4 of Table 4.

Table 4
The Six Quick Steps for a Housing Project (Year 1)

Step 1 Assess:	There is an insufficient supply of affordable housing for low-income people. Housing-related problems are the second most frequent barrier to success for participants in our self-sufficiency program. There is little cooperation between developers and residents. Our agency can intervene.
Step 2 Analyze:	Our community's local comprehensive plan shows areas zoned for low-income housing. We have the ability to acquire land in these areas. We can collaborate with potential low-income residents as a model for private housing developers. We can increase the number of units of housing available for low-income people.
Step 3 Strategize:	Our community's supply of affordable housing for low-income people represents is a component of **service and support systems** on the community scaling tool. Within this category, the insufficient supply and the lack of coordination between developers, residents and the human service community place our community in a vulnerable status because the housing systems are **responsive** to pressure to change, but without that pressure, services are **not comprehensive.**
Step 4 Focus:	We created a subscale for Housing within the **Service and Support Systems** category of the Community Scaling Tool. The indicators we will use to measure change are: A) housing development efforts as related to resident and community needs; B) housing planning activities as related to other human service and infrastructure issues; and C) housing availability for low-income people.
Step 5 Measure:	We applied our subscale and took measurements at the beginning of the project. At the end of the first year, we utilized the subscale again for measurement purposes and found that there had been **no change** on the three indicators we selected.
Step 6 Re-Assess	We used the Community Scaling Tool again to re-assess our community's housing situation and we believe our original assessment of the **service and support systems dimension** was correct. However, we now believe two other problems exist which must be tackled before our original housing plans will be successful. After we acquired land at the targeted site for building, we began the process for gaining necessary zoning permits. We discovered that although our community's **Public Policy** appeared **Supportive** because adequate sites were included in the formal comprehensive plan, a condition of **Hostility** actually existed. As we identified a strategy to overcome this issue, we found that additional **Equity** issues (of families in the neighborhood adjacent to the building site) were involved.

DEFINITIONS OF DIMENSIONS

The following pages contain narrative descriptions of each of the five dimensions of the Community Scaling

Tool. Brief examples are discussed.

Public Policy refers to both the formal written policies of the community as well as the unstated norms adhered to by the general population. Zoning ordinances are an example of a formal, written public policy. Zoning ordinances may may not be ignored by the public and simultaneously enforced or unenforced by local officials.

TABLE 5
PUBLIC POLICY DIMENSION

THRESHOLD		PUBLIC POLICY SCALE
5.	THRIVING	Public policy affecting the community is **innovative** in its values, premises, and strategies regarding the condition and needs of low-income persons. Affirmatively seeks new ways to promote the economic development and well-being of low-income residents and their full inclusion in the life of the community.
4.	SAFE	Public policy is **supportive** with respect to the needs and aspirations of low-income residents. Generally is proactive and systematic in identifying and eliminating barriers to improvement in economic and social status.
3.	STABLE	Public policy is **reactive** in its approaches to responding to the needs of low-income persons. When issues are forcefully brought to the attention of policy-makers, it is usually possible to achieve a **selective** case-by-case policy outcome that is favorable with respect to issues and problems of low-income residents.
2.	VULNERABLE	There is **no** public policy intended to support the needs and aspirations of low-income persons, or any such policy that does exist is **unenforced**. There is little or no awareness or concern or acceptance of public responsibility for supporting improvement of the economic and social conditions of the poor.
1.	IN CRISIS	Public policy is **hostile** with respect to conditions and needs of low-income persons. Policies are intended to make it difficult for low-income persons to live in the community or to play a meaningful and contributing role in the life of the community.

*Note to Table 5: the Numbers in the far left-hand column are designed to be interchangeable with the words in that column. The numbers are offered as an alternative to the words because the authors are aware that certain community situations are so volatile that the words may create unintended barriers to communication.

Equity covers both economic and social distributions of power, opportunity, access, and freedoms. Sexism, racism, and classism are all equity issues.

TABLE 6
EQUITY DIMENSION

THRESHOLD		EQUITY SCALE
5.	THRIVING	The community understands the strengths inherent in diversity, celebrates **differences** and, therefore, is committed to the development and maintenance of a healthy socioeconomic and demographic mix. The appreciation of diversity has led to establishment **of equal treatment and opportunity** as the prevailing norms in both economic and social transactions in the community. All cultures and ethnic groups are working together for the common good.
4.	SAFE	Knowledge and understanding of culture and customs of various groups represented in the community's population are common throughout the community. That knowledge has bred an understanding that differing customs and values can coexist and a sensitivity to and appropriate accommodation of those varied customs and values. **Affirmation** of the rights and the values of others, despite differences, is the norm.
3.	STABLE	Members of the community are generally **aware** of differences among the populations present in the community. An atmosphere of **tolerance** prevails with little or no inter-group conflict. There is a growing awareness of the importance of understanding and community among diverse populations.
2.	VULNERABLE	Diverse populations are generally isolated from one another and are **uninformed** regarding the customs, values, history and contributions of the other populations residing in the community. There is a general sense of **complacency** regarding lack of interaction and communication among various groups. Lack of understanding and consequent insensitivity are commonplace.
1.	IN CRISIS	**Fear and conflict** characterize interactions among diverse populations. Various populations are consistently working at cross-purpose. Open hostility is common.

*Note to Table 6: the Numbers in the far left-hand column are designed to be interchangeable with the words in that column. The numbers are offered as an alternative to the words because the authors are aware that certain community situations are so volatile that the words may create unintended barriers to communication.

Civic Capital captures any activity which a person participates in outside of their immediate family unit including volunteer, social and recreational, religious, and citizenship activities. Civic Capital can also refer to a group of peop extending their participation in the community beyond their usual sphere, such as coporate service projects.

TABLE 7
CIVIC CAPITAL DIMENSION

THRESHOLD		CIVIC CAPITAL SCALE
5.	THRIVING	Civic involvement (social and political) is high throughout the community's socio-economic spectrum. Participation commonly has such depth, intensity, and vision that it constitutes investment in the social and political well-being of the community. Low-income people are fully integrated and actively participate on boards, commissions, and committees addressing all aspects of community life. Civic life is vibrant; social harmony prevails. Even low-income and minority residents have a strong sense of belonging and of community. Voter registration and turnout are high.
4.	SAFE	Low-income people, their neighborhoods, and issues are part of the community dialogue. Low-income people play significant roles within the larger community. Opportunities for social interaction are such that they support development of a sense of community, of mutuality of interest. Those active in many social and policy-making activities have a strong sense of contributing to the social and civic health of the community. There is vibrant civic life within low-income neighborhoods (social, political, recreational, arts, etc.). Level of involvement is high. Voter registration and turnout are comparable to community as a whole.
3.	STABLE	Low-income persons are participating in civic affairs. There is an identifiable leadership within the low-income community and several advocacy organizations. Attainment of goals is difficult but achievements are possible when the low-income community is organized around a particular issue. Low-income participation in policy-making roles concerned with issues particularly relating to the low-income community is proportional to overall population. There is active and accessible civic life in low-income communities. Voter registration and turnout is comparatively low, but low-income vote is sought by community-wide candidates.
2.	VULNERABLE	While low-income people and their neighborhoods are not an integral part of the larger community, there is an awareness within the low-income community and the larger community of the importance of working toward community-wide unity. Low-income persons fill policy-making roles, but there is little evidence that public policy decisions reflect the interests of low-income residents. There is a visible civic life within low-income neighborhoods—social, political, recreational, religious—but participation is low compared with more affluent neighborhoods. Voter registration and turnout are very low.
1.	IN CRISIS	Isolation is the norm. They are isolated physically and socially from the larger community and to a large degree from one another. There is no identifiable leadership. Low-income involvement in policy-making roles and activities is very low or non-existent and without impact. There is little opportunity for positive involvement in civic life. Voter registration and turnout are very low and there is little or no commitment to increasing participation since voting and other approaches to affecting public policy are generally considered futile.

*Note to Table 7: the Numbers in the far left-hand column are designed to be interchangeable with the words in that column. The numbers are offered as an alternative to the words because the authors are aware that certain community situations are so volatile that the words may create unintended barriers to communication.

Service and Support Systems include all social and human services, public safety, health, education, child care, housing, justice, infrastructure, and government services. Gaps in the "safety net," the extent of collaboration between agencies, and the comprehensiveness of services are examples of community conditions and systems interactions within this dimension.

TABLE 8
SERVICE AND SUPPORT SYSTEMS DIMENSION

THRESHOLD		SERVICE AND SUPPORT SYSTEMS SCALE
5.	THRIVING	Community services of all kinds are both **comprehensive** and **integrated** into a virtually seamless system. Collaboration and synergy are the norms. Social services are based on a wellness model and are strongly consumer driven. A strong community-wide set of strategic planning processes assures that public and community services are responsive and will grow and develop in accord with community needs. Community is committed to providing resources sufficient to assure quality and comprehensiveness of and full access to community, public, and educational services.
4.	SAFE	Service and support programs have a strong **preventive** orientation. Most essential community and social services are available to those who need them. Service providers are committed to collaboration and are in the process of developing an integrated approach to provision of community services. Planning involves all segments of the community. Commitment of resources is adequate to assure continued availability of services that meet needs for both basic and early intervention services, as well as for strong public and education services.
3.	STABLE	Public and social services available in the community are generally **comprehensive, but** are primarily **reactive** in their responses to community needs. Planning tends to be very limited in strategic outlook and occur principally within programmatic boundaries. Focus is on evident current needs. Clients/customers are seldom brought into the planning process. Providers of public and social services are communicating and considering the value of collaboration. Resources are adequate for most immediate basic needs.
2.	VULNERABLE	Some key public and social services exist and are **responsive** to needs to which they are focused but the range of community services and resources is limited and **not comprehensive.** There is no effort to plan collaboratively and comprehensively for a broad range of community needs. Fragmentation of services and community resources is common. Resources are strained and directed principally to maintenance of effort. Competition is the most common form of relationship among providers of services.
1.	IN CRISIS	Public and social services are **non-responsive** to community needs. "Turf" boundaries are very strong and planning is minimal or non-existent. Even emergency services are inadequate in comparison with the intensity of need. Resources are barely adequate to maintain even the most minimal configuration of community services. Most public and social services are ineffective.

*Note to Table 8: the Numbers in the far left-hand column are designed to be interchangeable with the words in that column. The numbers are offered as an alternative to the words because the authors are aware that certain community situations are so volatile that the words may create unintended barriers to communication.

Economic Opportunity captures the business climate, the labor market, the diversity of the economic base, entrepreneurship, capital stakeholding, and capital resources. Examples of activities within this dimension include strategies to attract or retain jobs, increase job retention and promotion, match labor skill levels with available jobs, and improve new business success rates.

TABLE 9
ECONOMIC OPPORTUNITY DIMENSION

THRESHOLD		ECONOMIC OPPORTUNITY SCALE
5.	THRIVING	The economic health of the entire community is **vibrant.** There is a broadly diversified economic base, high rate of employment, and all sectors of the community benefit equally from the community's strong economy. Income levels and costs of living in the co[illegible]unity are well-balanced. Education and training resources are available, accessible, and eff[illegible] in preparing community members to participate in and contribute to the economic li[illegible]d strength of the community. There is a widely shared vision of a strong and vibrant economy. Community investment is high. Entrepreneurship and capital "stakeholding" are possible and a reality across the entire income spectrum.
4.	SAFE	The economy of the community is **emerging.** It is growing and there are plans for appropriate development of business and industry. The economy shows strength in key areas. Unemployment is not significantly greater than state and/or national levels. Programs and plans are in place to bring low-income residents into the mainstream of the local economy, including entrepreneurship and opportunities to hold capital interests in the local economy. There is a developing consensus regarding the economic development of the community as a whole.
3.	STABLE	While there are strengths in the local economy and growth is taking place, there is a mismatch or incongruity between the current state and/or direction of the economy and the abilities and aspirations of those living in the community. The economy is **stagnant.** Opportunities for economic "stakeholder" participation of low-income persons are very limited, though still a possibility. Unemployment is higher than the state average. Planning, howev[illegible] focusing on developing a local economy that is more inclusive and likely to accomm[illegible]ate the economic needs and capacities of all residents. Shared goals for economic growth and inclusion are being discussed.
2.	VULNERABLE	The economy of the community is **contracting.** Capital is fleeing the community. Unemployment is significantly higher than state and/or national levels and is concentrated in minority populations. There is little local planning directed to stabilizing and improving the economy. There is an awareness of income and opportunity disparities in the community, but little dialogue or commitment to improvement in such conditions. Neither the economic environment nor employment and training opportunities offer real prospects for improvement in economic circumstances of low income individuals and families.
1.	IN CRISIS	The economy of the community has **collapsed.** The flight of capital from the community is virtually complete, and business and industry are leaving. Unemployment is high and rising; poverty is on the increase. Efforts to plan effectively for economic growth are failing; lack of hope has led to lack of effort. There is a general lack of opportunity throughout the community, but minority populations are far more intensely affected by bad economic conditions prevailing in the community. Conflict and blame characterize rela[illegible]hips among various groups and factions.

*Note to Table 9: the Numbers in the far left-hand column are designed to be interchangeable with the words in that column. The numbers are offered as an alternative to the words because the authors are aware that certain community situations are so volatile that the words may create unintended barriers to communication.

Relationship of Family, Community, and Agency Scales.

Agencies participate in activities which produce outcomes at the family, agency and community levels. Some activities produce outcomes at all three levels concurrently; other activities produce results targeted a specific outcome level. The key to differentiating the outcome levels is answering the following question: **What, specifically, is going to change?**

- Family level scales measure changes one family at a time. The dimensions for change may include status of employment, education for adults and children, family functioning, income and health.

- Agency level scales measure changes in a single agency or a program within an agency. The dimensions for change may include client satisfaction, cultural sensitivity and competency, funds development and fiscal or administrative health.

- Community level scales measure change in community systems or conditions. The dimensions for change include public policy, equity, civic capital, service of support systems and economic opportunity.

There is a linkage between the Family and Community level scales; ultimately, we wish to show how community level changes translate down to impact on individuals and households. However, the community scale is more subjective than reliance on statistical data alone would allow. The community scale is more than merely the aggregation of outcome data for individual families.

Think about the economic principle that demonstrates that an action taken by an individual may benefit that individual, but collectively, if everyone took that same action, there would be no benefit individually and maybe even a detriment. For example: A football stadium is completely sold out and all the seats are full. If one person stands up, he or she may indeed have a better view of the game. If, however, everyone stands up, some people may have a better view, some people would have the same view, but most people would have a worse view. A different example: A union goes out on strike. One individual may refuse to strike, continue to work throughout the strike, and earn wages as well as eventually receive the benefits negotiated by the strikers. However, if everyone in the union broke the picket lines, the strike would be ineffective, no benefits would accrue, and the future negotiating power of a threatened strike would be lost.

The Agency Scale measures organizational functioning capacity, and effectiveness of services delivered and activities undertaken. The Agency Scale may use data collected with a Family Scale to determine the effectiveness of the case management services, but the Family Scale itself does not have a category to measure the role of the agency's caseworker or intervention specialist. The quality or capacity of the agency's caseworker in working with the family is an Agency Level issue. Counseling, referral, advocacy, eligibility determination, certification and education are Agency Level activities targeted at families.

Similarly, the Agency Scale may use data collected with a Community Scale to determine the effectiveness of its advocacy activities, but again, the Community Scale itself does not have a category to measure the role of the community organizers. The quality or capacity of the agency's staff working with the community is an Agency Level issue. Leveraging, brokering, advocacy, mobilization and collaboration are Agency level activities targeted at communities.

CURRENT EXAMPLES

The Community Scaling Tool allows the effects of an agency's various activities related to a single project to be shown. It provides a framework within which to illustrate the multiple outcomes which can arise from the strategies used to achieve a single goal.

For example, as a result of its ongoing community needs and assets analyses related to social and economic self-sufficiency, a community action agency concluded that there was a need for additional affordable housing for families in transition between public assistance and self-sufficiency. The agency decided to attempt to expand the affordable housing stock by constructing 52 townhouses for participants in its self-sufficiency programs. Within the Service and Support Systems category of the Community Scaling Tool, the agency defined the current systems as "Responsive but not Comprehensive" ("Vulnerable" on the Community Scale.) (See Table and the accompanying notes.)

The agency identified a site in close proximity to major employment and post secondary education opportunities. The agency reviewed the community's comprehensive plan, which guides the zoning process, and found that the site was designated for multi-family housing. The current zoning was, however, for commercial use. The agency conferred with the local government's planning staff and confirmed that the site was designated to be rezoned for multi-family housing.

The agency obtained site control through an option with the owner, secured commitments for the financing to develop the project and applied for the needed zoning change. The agency's request for a zoning change received the unanimous approval of the community's planning commission, but the planning commission's rezoning decision was appealed to the local government's legislative body by the residents of an affluent, predominantly white, historic neighborhood adjacent to the proposed site. The legislative body reversed the rezoning by an 8 to 2 vote.

The agency appealed the zoning reversal in the courts. The legal premise of the appeal is that the local government's decision to reverse the rezoning was in violation of its own comprehensive plan that, under State law, should guide the zoning process. The case is still pending in the courts and because of the appeals process, may not be resolved for several more years.

Now in the third year of the project, the agency still has not built any units. It still has a goal of increasing the supply of affordable housing for families in transition between public assistance and self-sufficiency, moving the housing dimension from "Vulnerable" to "Stable."

The agency also has new goals for moving public policy related to affordable housing from "Vulnerable" to "Stable." (See Table 11.) It would also be possible for the agency to establish additional goals related to the Equity category. Goals and strategies could be established to move the equity and diversity of the neighborhood where the site is located from "In Crisis" to "Stable."

Table 10
Services and Support Systems Scale with Housing Subscale

(1) Community Scale Thresholds	(2) Services and Support Systems Scale Descriptors	(3) Services and Support Systems Scale	(4) *Housing Subscale*
Thriving 5	Comprehensive and Interrelated	Community services of all kinds are both comprehensive and integrated into a virtually seamless system. Collaboration and synergy are the norms. Social services are based on a "wellness" model and are participant driven. A strong community-wide set of strategic planning processes assures that public and community services are responsive and will grow and develop in accord with community needs. Community is committed to providing resources sufficient to assure quality and comprehensiveness of, and full access to, community, public and educational services.	*Affordable housing development is integrated with other systems including education, social services and transportation. Most housing initiatives involve multiple players. Development of affordable housing is targeted to clearly identified community needs. It is needs driven, not driven by available categorical public funding opportunities. Housing planning process is comprehensive and reflects both vertical and horizontal integration.*
Safe 4	Preventive	Service and support programs have a strong preventive orientation. Most essential community and social services are available to those who need them. Service providers are committed to collaboration and are in the process of developing an integrated approach to provision of community services. Planning involves all segments of the community. Commitment of resources is adequate to assure continued availability of services that meet needs for both basic and early intervention services, as well as for strong public and education services.	*The community has a long range plan for affordable housing and strategies to meet its goals and objectives. Most low-income households needing housing have multiple choices in terms of price, size and location. Housing developers are pursuing collaborative projects, such as mixed income developments. Planning for affordable housing includes intended beneficiaries throughout the process. There is a wide range of financing available for affordable housing development, including private and local, state and federal funding.*
Stable 3	Comprehensive but Reactive	Public and social services available in the community are generally comprehensive, but are primarily reactive in their responses to community needs. Planning tends to be very limited in strategic outlook and occurs principally within programmatic boundaries. Focus is on evident current needs. Clients (customers) are seldom brought into the planning process. Providers of public and social services are communicating and considering the value of collaboration. Resources are adequate for the most immediate basic needs.	*While there is significant growth in the development of affordable housing in the community, it is not proactive in nature but generally in response to existing problems. Low and moderate income households are rarely consulted in the development of housing plans. Developers of affordable housing meet regularly to share information and are discussing processes to collaborate on development activities. While often not well matched to household needs, most low-income families are able to locate housing.*
Vulnerable 2	Responsive but not Comprehensive	Some key public and social services exist and are responsive to needs to which they are focused but the range of community services and resources is limited but not comprehensive. There is no effort to plan collaboratively and comprehensively for a broad range of community needs. Fragmentation of services and community resources is common. Resources are strained and directed principally to maintenance of effort. Competition is the most common characteristic of relationship between service providers.	***The community continues to experience growth in the development of affordable housing but local data indicate that the lowest vacancy rate is in housing for low to moderate income households. Participants in agency's self-sufficiency programs experience considerable difficulty in obtaining adequate housing. Housing related problems are the second most frequent barrier to participant success. While the local government has a housing development plan, it is primarily used to satisfy federal requirements and does not guide most housing development activity or policies and initiatives by local organizations or local government. There is little coordination between local housing developers or between housing development and other human services activities.***
In Crisis 1	Non-Responsive	Public and social services are non-responsive to community needs. "Turf" boundaries are very strong and planning is minimal or non-existent. Even emergency services are inadequate in comparison with the intensity of need. Resources are barely adequate to maintain even the most minimal configuration of community services. Most public and social services are ineffective.	*Available affordable housing stock is significantly below identified needs. Homelessness and overcrowding are common. There is significant competition between for- profit, non-profit and governmental housing developers.*

Notes to Table 10:

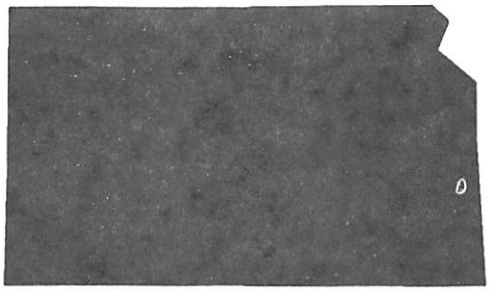
Columns (1) and (2) contain the thresholds and descriptors that were presented Table 1. Column (3) repeats the scale for the Services and Support Systems Dimension first presented in narrative form as Table 8. Column (4) is how the local CAA applied the indicators and descriptors of the Services and Support Systems Dimension to its specific circumstance and strategy of increasing the affordable housing stock. The descriptors in the block for "Vulnerable" on the Community Scale (or "Responsive but not Comprehensive" on the Services and Support Systems Dimension) are in bold type to indicate where the CAA placed its community at the time it initially reported the project.

Table 11
Public Policy Scale with Housing Policy Subscale

(1) Community Scale Thresholds	(2) Pubic Policy Scale Descriptors	(3) Public Policy Scale	(4) *Housing Policy Subscale*
Thriving 5	Innovative	Public policy affecting the community is innovative in its values, premises and strategies regarding the condition and needs of low income persons. Affirmatively seeks new ways to promote the economic development and well-being of low income residents and their full inclusion in the life of the community.	*Low-income needs are fully integrated into community housing planning and development systems. Land use planning and zoning policies require that developers provide set asides for affordable housing and/or employment generating activities as a condition for the approval of new development.*
Safe 4	Supportive	Public policy is supportive with respect to the needs and aspirations of low income residents. Generally is proactive and systematic in identifying and eliminating barriers to improvement in economic and social status.	*There is a comprehensive plan to develop affordable housing consistent with identified needs. The local government actively seeks private, federal and state resources for housing development. The land use planning and zoning process is proactive in ensuring that sufficient sites are designated for future development.*
Stable 3	Reactive or Selective	Public policy is reactive in its approaches to responding to the needs of low income persons. When issues are forcefully brought to the attention of policy makers, it is usually possible to achieve a case-by-case policy outcome that is favorable with respect to issues and problems of low income residents.	*While the local government has a plan to develop low-income housing, its goals are not pursued proactively. When low-income advocates and supportive groups press for housing initiatives, however, the local government tends to respond positively. The land use planning and zoning process is even-handed and treats all petitioners consistently without respect to socio-economic status.*
Vulnerable 2	None or Unenforced	There is no public policy intended to support the needs and aspirations of low income persons, or any such policy that does exist is unenforced. There is little or no awareness or concern or acceptance of public responsibility for supporting improvement of the economic and social conditions of the poor.	***There is no comprehensive community policy to develop affordable housing. The only planning that occurs is to satisfy federal requirements to obtain grant funds. Land use planning and zoning decisions are generally based on the relative power and influence of the petitioners.***
In Crisis 1	Hostile	Public policy is hostile with respect to conditions and needs of low income persons. Policies are intended to make it difficult for low income persons to live in the community or to play a meaningful and contributing role in the life of the community.	*Public policy actively discourages the development of affordable housing through lot size and other restrictions that put most housing beyond the reach of low income families. The community has no plan for the development of affordable housing and does not seek or accept federal or state funds for housing initiatives.*

Notes to Table 11:

Columns (1) and (2) contains the thresholds and descriptors that were first presented in Table 1. Column (3) repeats the scale for the Public Policy Dimension first presented in narrative form in Table 5. Column (4) is how the local CAA applied the indicators and descriptors of the Public Policy Dimension as the potential outcomes of its goal and strategy were broadened to include producing a change in public policy regarding affordable housing. The descriptors in the block for "Vulnerable" on the Community Scale (or "None or Unenforced" on the Public Policy Dimension) are in bold type to indicate where the CAA placed its community when it reported on the project following the reversal of its zoning request.



KANSAS

Partnership Scale Matrix

July, 1998

Kansas Partnership Scale Matrix

	Policy Making	Policies and Procedures	Advocacy	Training and Technical Assistance	Assessment	Information	Responsive-ness	Philosophy/ Sensitivity
5. (Thriving)	Collaborative	Empowering	Strong	Comprehen-sive	Reliable, accurate, and thorough	Empowering, thorough	Subgrantee-centered	Valuing
4. (Stable)	Inclusive	Supportive	Constructive	Useful	Sufficient	Positive, useful, and frequent	Generally responsive, satisfactory	Understanding
3. (Safe)	Responsive	Indifferent	Limited	Incomplete	Compliance-driven	Regular, formal	Competing	Aware
2. (Vulnerable)	Controlled	Impeding	Weak	Misdirected	Inconsistent and incomplete	Sporadic and indifferent	Indifferent	Ignorant
1. (In Crisis)	Unilateral	Inhibiting	Non-existent/ destructive	Inappropriate/ non-existent	Non-existent or incorrect	Rare, negative	Hostile	Hostile

Dimensions of the Partnership Scale

Policy Making

This category addresses the manner in which the CSBG state office sets policies governing the program. It is used to reflect the process of administrative decision-making regarding program matters. "Policy making" as used in this scale covers only the state-level process for making such administrative decisions; it does not reflect decisions made by state legislatures, or federal rules and procedures.

Level	Summary Descriptor	Narrative
Thriving	Collaborative	Major policy changes represent true collaborative efforts between the state office and its subgrantees. Local agencies are given the opportunity to be involved in every step of the policy-making process. Policy-making is viewed by both the state office and the subgrantees as a team effort. Resulting policies reflect significant subgrantee involvement.
Safe	Inclusive	Subgrantees are generally involved in making policies for the CSBG program. Most policy decisions have at least some degree of subgrantee input, although some limits may be placed on local agencies' ability to affect policy changes. While policy-making may be initiated and controlled by the state, subgrantees are usually consulted, and the final product reflects some changes suggested by subgrantees.
Stable	Responsive	Subgrantees have some input in the policy-making process, however, the subgrantee role is not always substantial. The state office is responsive to questions, comments, or complaints from subgrantees regarding policy changes, but it does not actively seek subgrantee participation in the design or planning of policies.
Vulnerable	Controlled	The state office controls and limits opportunities for subgrantees to comment on policies. Comments are solicited primarily to meet requirements imposed by funders or legislators. Comments are treated only as responses to decisions that have already been made, so that the state office does not consider making changes in response to comments received.
In Crisis	Unilateral	The state office makes policies without consulting or considering the opinions of its subgrantees. Policy making does not take into account either the interests of the subgrantees or the effect of resulting policies on subgrantee agencies.

Policies and Procedures

While the Policy Making category asked respondents to rate the process that the state office uses to set the rules and procedures governing the CSBG program, this category is directed toward policy outcomes. The levels in this section describe the effectiveness and efficiency of those rules and procedures, and the effect that these rules and procedures have on recipients of CSBG funds.

Level	Summary Descriptor	Narrative
Thriving	Empowering	The state's policies are visionary, creating an environment that encourages local innovation. Reporting requirements, forms, and rules serve easily identifiable program purposes. Reporting and other requirements represent minimal burdens on subgrantee agencies, generally allowing considerable agency flexibility. Procedures advance broad program objectives, while empowering subgrantees to meet their own goals.
Safe	Supportive	Policies generally create a supportive regulatory environment for subgrantee agencies. Some policies and/or procedures may impose minor, manageable burdens on subgrantees. Generally, policies may advance broader program goals, but do not inhibit subgrantees' ability to meet their objectives.
Stable	Indifferent	Policies impose some burden on subgrantee agencies. Subgrantees are able to manage these burdens with some, but not great difficulty. At least some policies and/or procedures appear to exist because of tradition, rather than to serve larger program goals.
Vulnerable	Impeding	Policies imposed by the state are burdensome to subgrantee agencies. Subgrantees devote considerable time, effort, and resources to comply with state requirements. The regulatory environment stifles subgrantee innovation and creativity. Subgrantees find it difficult to meet agency goals in such an atmosphere.
In Crisis	Inhibiting	Rules and procedures impose insurmountable burdens on subgrantees' abilities to meet their goals. Subgrantees must devote inordinate amounts of time, staff, and other resources to meet bureaucratic requirements set by the state CSBG program. Requirements appear to have been made with no awareness of or concern for the difficulties subgrantees have in meeting them.

Advocacy

This scale addresses the extent and quality of the state office's advocacy on behalf of the CSBG program, its subgrantees, and people living in poverty. It rates the state's advocacy before policy makers (where appropriate), other state organizations, private sector groups and organizations, and the public.

Level	Summary Descriptor	Narrative
Thriving	Strong	The state office is a strong and visible advocate for members of the community action network. State office advocacy takes many forms and has a wide range--the state advocates for the program, subgrantees, and clients with policy makers, other state programs, and statewide organizations. The state office is an active participant in or supporter of promotional activities sponsored by subgrantees or the state CAA association.
Safe	Constructive	Activities of the state office contribute positively to the image of the CSBG program, its subgrantees, and clients. Advocacy activities of the state office complement those taken by CAAs or the state CAA association, but are generally secondary to those actions.
Stable	Limited	The state CSBG office's ability to advocate on behalf of the network is limited. While some advocacy takes place, it is not extensive in breadth or frequency. The office may be unable to increase its level of advocacy due to organizational constraints or other factors beyond its control.
Vulnerable	Weak	The advocacy activities of the state office are infrequent, at best. Limits on state office advocacy are primarily internal--the office chooses, for whatever reason, to be largely inactive in promoting the program, its subgrantees and their clients. Advocacy activities may occur more on behalf of individual subgrantees than for the network as a whole.
In Crisis	Non-existent/ destructive	The state office does not publicly promote the CSBG program, its subgrantees, or their clients. In some cases, the state office may even be critical of elements of the state's community action network, making it more difficult for local agencies to gain the favor of stakeholders in both the public and private sectors.

Training & Technical Assistance

This scale addresses the training and technical assistance provided or arranged by the state office. The scale is used to rate the quality, amount, and appropriateness of training from or sponsored by the state. Although an element of this category is the degree to which training is appropriate to subgrantee needs, it does not address how the state assesses local agency strengths, weaknesses, and training needs. That assessment process is covered in a separate scale.

Level	Summary Descriptor	Narrative
Thriving	Comprehensive	Training provided through the state office is thorough and comprehensive. All needs of network members, whether statewide or specific to individual agencies, are addressed by training provided by the state office. Training and technical assistance provided result in identifiable improvements in subgrantee performance or procedures.
Safe	Useful	Training is useful and beneficial to subgrantees. Training reflects some recognition by the state office of local agency needs, and is appropriate to agency capabilities. The state office is able to meet most of the agency's technical assistance needs.
Stable	Incomplete	The range of training and technical assistance arranged by the state office reflects some degree of planning and assessing subgrantee needs. It is therefore appropriate, and subgrantee staff find it somewhat useful. However, it may not be complete, or may be directed more toward statewide needs than needs of individual agencies. Consequently, training provided through the state may leave some subgrantee training needs unmet.
Vulnerable	Misdirected	The state arranges for some training, but this training is of only limited utility to subgrantees. Training does not appear to be based on any type of assessment of agency needs. Technical assistance is directed less at improving subgrantee performance than at facilitating compliance, particularly with state requirements.
In Crisis	Inappropriate or non-existent	The state office provides no useful training to subgrantees. Training provided or arranged by the state, if any is provided, is inappropriate or inaccurate, or misleading, and could end up being detrimental to subgrantees. Training does not reflect any attempt to address subgrantee needs.

Assessment

The category of Assessment concerns the various means that the state office uses to assess capabilities (strengths, weaknesses) and performance (client, service, and outcome data) of individual agencies and of the program as a whole. Such means include monitoring, audits, outcome and output reports, among others. Specifically, this scale addresses whether these methods provide the state with an accurate picture of subgrantees' capabilities and performance. It also addresses the ways that the state office uses this information, and whether the information is useful to subgrantees.

Level	Summary Descriptor	Narrative
Thriving	Reliable, accurate, and thorough	The state office has systems in place allowing it to collect reliable and accurate information on subgrantees' capabilities and performance. Performance measurement includes a system for outcome data collection as well as counts of persons served and services provided. The state office uses program and subgrantee assessments to establish program goals and priorities, and to determine training needs.
Safe	Sufficient	Information gathered by the state is sufficient to provide a general picture of the performance and capabilities of the community action network in the state. Some aspects of the assessment system, especially outcome data collection, may not be fully developed, and the state may not be making full use of the information gathered through these processes.
Stable	Compliance-driven	Information-gathering activities of the state office tend to reflect a compliance orientation. Monitoring of subgrantees is focused on assessing subgrantee compliance, with little attention paid to strengths, weaknesses, or training needs. Performance data are gathered only to comply with reporting requirements imposed from above.
Vulnerable	Inconsistent and incomplete	Although the state has established processes for determining capabilities and performance of subgrantees, the processes are informal and incomplete. No statewide standard exists for reporting performance information, therefore, subgrantees are not reporting consistently, and information complied at the statewide level is misleading. No formal standards exist for assessing compliance and capabilities, so the quality of monitoring varies from time to time and location to location.
In Crisis	Non-existent or incorrect	The state has few or no established means for determining capabilities and performance of subgrantees. Information is gathered sporadically at best, and is seldom a reliable indicator of the capabilities or performance of subgrantees.

Information

Two scales in this matrix address communication issues. This scale is concerned with information it addresses subgrantees' perception of the quality, tone, relevance, and extent of communication directed toward the subgrantee agencies from the state office. The Responsiveness category, on the other hand, deals with how the state office handles communications it receives from subgrantees. In other words, this addresses communications to subgrantees, while the following category address communications from subgrantees.

Level	Summary Descriptor	Narrative
Thriving	Empowering, thorough	The quality, tone, and frequency of communications subgrantees receive from the state office is very high. Information is tailored to meet the specific needs of subgrantees, and is delivered with the clear intent of empowering those agencies. Subgrantees see the state office as one of its most reliable and valuable sources of information.
Safe	Positive, useful, frequent	Communications from the state office are seen by subgrantees as positive and useful. Through its communications, the state demonstrates a desire to see subgrantees succeed. As a result of these communications, subgrantees are kept well-informed of state-level issues affecting the CSBG program. Subgrantees see the state office as a valuable source of information.
Stable	Regular (formal)	Communications from the state appear to represent a genuine effort to help subgrantees, but do suffer from some limitations. The state office does regularly notify its subgrantees about developments affecting the CSBG program, keeping them informed of major issues. Much of this communication is with the network as a whole, which means that emphasis is on broad issues.
Vulnerable	Sporadic and indifferent	The state office does keep some lines of communication open with subgrantees, but uses them inconsistently. The state office does make some attempt to inform subgrantees about opportunities or major issues, but only on an ad hoc and infrequent basis. Much of the information received from the state is of little relevance, and the overall tone of these communications is one of indifference.
In Crisis	Rare, negative	Subgrantees receive almost no information from the state office, through any means. The state office is often unable and unwilling to keep subgrantees informed of program issues. Communication is overly formal, and is limited to only those messages that are required for the state office to be in compliance with federal or state rules. As a result, subgrantees may miss important opportunities and developments relating to CSBG and community action, or must rely on other means to receive this news.

Responsiveness and Receptivity

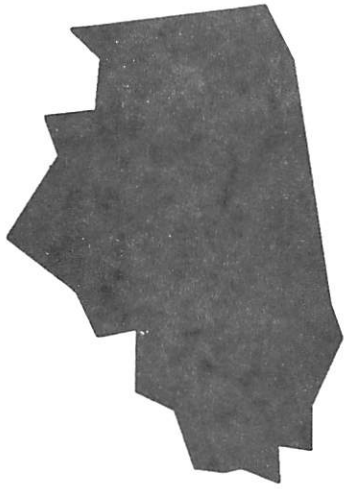
This scale addresses the manner in which the state office treats communications from subgrantees. It concerns how quickly, effectively, and willingly the state office responds to requests, questions, and needs of subgrantees.

Level	Summary Descriptor	Narrative
Thriving	Subgrantee-centered	Responsiveness to the needs, requests, and questions of subgrantees receives the highest priority at the state office. The state's responses to subgrantees show that it is committed to meeting subgrantee needs as completely as possible. Answers are always timely and thorough.
Stable	Generally responsive, satisfactory	Subgrantees can generally rely on the state office to respond satisfactorily to their requests. The state office appears to treat subgrantee requests as high priority items. Problems with timeliness, completeness, or correctness of responses are rare.
Safe	(Competitive?)	State office staff attempt to be responsive to subgrantee needs and requests, but are not always able to meet subgrantees needs and expectations in this area. Responding to subgrantee questions competes with a number of other duties, and, as a result, does not always receive top priority. While the state office does respond to all requests, responses may not always be complete or as timely as subgrantees desire.
Vulnerable	Indifferent	While the state office does respond to requests and questions from subgrantees, meeting subgrantee needs is given low priority. Responses frequently are incomplete or poor quality, and the state office rarely responds in a timely manner.
In Crisis	Hostile	The state office appears to view requests, questions, and communications from subgrantees as little more than nuisances. Responses are rarely timely, and often are not made at all. Answers to questions are incomplete and may often be incorrect. Previous experience has taught subgrantees that making requests of the state office is often counterproductive.

Philosophy and Sensitivity

This scale allows subgrantees to evaluate the degree to which the state office understands, values, and upholds the philosophy of community action. Among elements included in this category are the state office's commitment to ideals such as local governance, community participation (especially low-income members of the community), partnerships

Level	Summary Descriptor	Narrative
Thriving	Values (embraces?)	The state office values CA principles and diversity among subgrantees.
Safe	Understanding	
Stable	Knowledge	
Vulnerable	Ignorance	
At Risk	Hostility	Emphasizes bureaucracy and procedures



Illinois

Family Self-Sufficiency Scale

THE FAMILY SELF-SUFFICIENCY SCALE

The Family Self-Sufficiency scale is an instrument developed in Pennsylvania by the Bucks County Opportunity Council in consultation with Frederick Richmond. The scale has been used for helping families move toward self-sufficiency and has proved to be an effective instrument in measuring progress toward self-sufficiency.

The scale is broadly divided into ten areas namely, income, employment, education, transportation, parenting/social functioning, substance abuse, mental health, health insurance, shelter and subsistence. These ten areas were chosen by Bucks County as the areas which they believe indicate progress toward self-sufficiency. Illinois has made minor changes in the transportation subscale.

As Illinois CAA's use the instrument, additional changes may be needed to adapt to Illinois' needs and priorities. To ensure a continued reliable and valid instrument, such changes will require substantial research and development. Suggestions for changes to the Scale are welcomed by both Illinois and Pennsylvania staff involved with the Scale. Please route your suggestions and comments to :

FCD-Family Self-Sufficiency Scale Comments
Illinois Community Action Association
101 N. 16th Street
Springfield, IL 62703

Family Self-Sufficiency Scale Abstract

Factor	Income	Employment	Adult Formal Education	Transportation	Parent/Social Functioning
Dependent 0-2	No income or entitlement	Unemployed	Illiterate	No license or car, no public transportation	Negative behaviors or referral to social services
Progress 3-5	Inadequate income	Part-time employment	High school, GED, training, no license or certification	Access to car, or public transportation, some needs met	Active in social services or counseling
Independent 6-10	Adequate income	Full-time employment, or completely disabled	Certification, license or college graduate	License and car or access to pub. transport, all needs met.	Classes or support groups, or no intervention

Factor	Substance Abuse	Mental Health	Health Insurance	Shelter	Subsistence
Dependent 0-2	Active addiction	Negative behaviors or referral to MH services	Adults no insurance, children insured	Homeless or temporary shelter	Unable to afford food, hunger
Progress 3-5	Attends treatment program or support group	Active in mental health services or counseling	Insurance for some household members	Transitional or unaffordable housing	Unable to afford food but uses subsidized food programs
Independent 6-10	Completes program, in recovery, or no intervention	Maintenance through counseling, medication, or no intervention	Insurance for entire household	Affordable housing	Able to afford food above subsistence level

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PROTOCOL FOR FAMILY SELF-SUFFICIENCY SCALE

Step 1 - Telephone Screen

The initial contact with the FCD Program is usually by telephone, although walk-ins are possible. A secretary performs an initial screening and advises the potential client what documentation is needed for the initial interview with the case manager. On occasion, the secretary may refer the initial contact to a FCD Specialist.

Step 2 - Intake Form

The FCD Specialist meets with the potential client and fills out the FCD Client Intake and Quarterly Review Form. A sample is included in the forms section of this manual.

Step 3 - Interview

All clients who have signed the FCD Client Intake and Quarterly Review Form are interviewed by the FCD Specialist. It is determined at this time whether the client is appropriate for the FCD Program, or should be referred to other community resources. Clients can choose not to participate in the FCD Program, but should still complete a Goal Plan for the factor(s) for which they request services. Some clients, such as those requesting weatherization services only, may not have a Goal Plan.

If a client chooses to participate in the FCD Program, the client must sign a participation agreement. A sample Goal Plan and Participation Agreement is included in the forms section of this manual.

Completing the Family Self-Sufficiency Scale

The Family Self-Sufficiency Scale is administered and scored with the participation of the family. The Scale contains ten factors and two Community Integration

sections. The ten factors are: Income, Employment, Education, Transportation, Parenting and Social Functioning, Substance Abuse, Mental Health, Health Insurance, Shelter, and Subsistence. Subsections for Community Integration Achievements and Community Integration Barriers are also included.

Each factor is scaled from 0-10 (with the exception of Community Integration subscales) representing a continuum of dependence to total self sufficiency. The components are grouped as follows:

0 - 2 - Neglect or total dependency (problem or need)
3 - 5 - Participation in self-sufficiency activities and still dependent (progress)
6-10 - Range of self sufficiency (success).

Individual components can be characterized as the status of the client, participation in an activity or achievement of an outcome. Since the scale represents movement along a dependency/self-sufficiency continuum, a client can achieve an outcome while still dependent (a score below six), or within the self-sufficiency range, (a score of six or above).

A client achieving an overall score of sixty or above would be considered self-sufficient as long as the client had employment and was not participating in a federal entitlement program. While it is theoretically possible to achieve a score of sixty or above without having employment or participating in a federal entitlement program, having these conditions present would preclude the client from being identified as self-sufficient regardless of the numerical score.

The prioritization worksheet, which is included in the sample forms section of this manual, should be completed with the client during the interview. The worksheet assists in determining the priority of goals for planning.

Completing the Goal Plan

FCD families together with the FCD Specialist complete the Goal Plan, an eleven page version of the Family Self-Sufficiency Scale. Each of the ten factors and the Community Integration Subscale have their own page. The FCD Specialist scores each factor on the scale of 0-10 providing an assessment or baseline for the client on

each of the ten factors. If the initial score on any factor is above six, indicating the range for self-sufficiency, it is optional for the Specialist to fill out the Goal Plan for that factor. A Goal Plan should be considered for each factor below six.. Goal Plans for Community Integration should be completed if applicable.

There are priorities for completion of the Goal Plan. Crises, such as absence of income or shelter, should be completed first. The balance of the Goal Plan is completed on subsequent visits. Goals for each factor scored below six are written on the Goal Plan and should be signed-off by the client. Always involve the client in developing, setting, and writing all goals.

Timeframe

The initial intake and interview usually lasts for 1.5 to 2 hours, and includes a review of documents requested during the intake process. Additional hours should be allotted to the FCD Specialist for paperwork. Subsequent interviews should be scheduled for one hour time periods.

Step 4 - Supplement to Goal Plan: Contact Note, Progress Narrative

The FCD Specialist writes a progress narrative, or contact note, after each contact with the client. A sample contact note is included in the sample forms section of this manual.

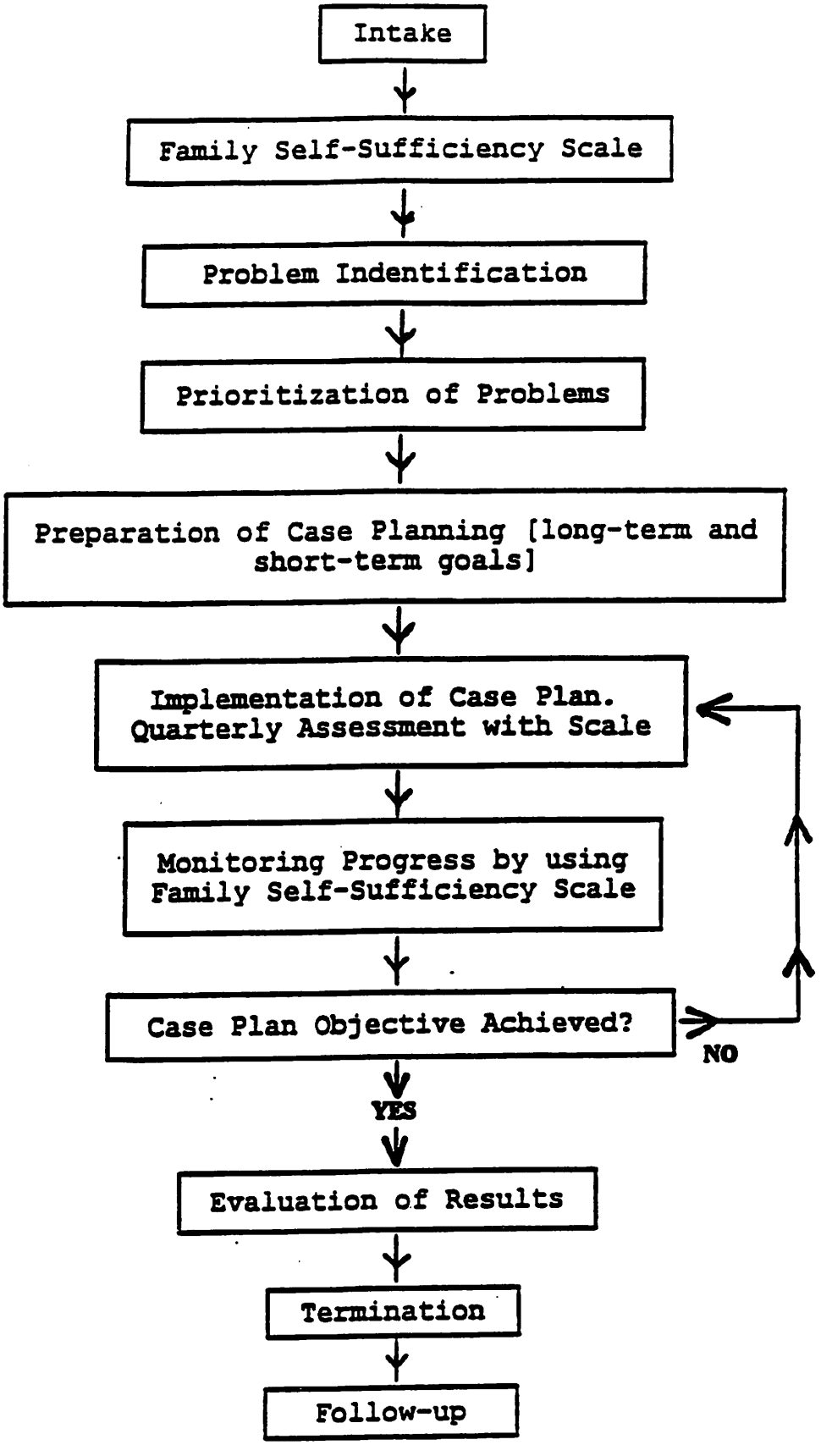
Adapted from Bucks County Opportunity Council, with permission.

Case Sample

Ms. Martha is a 29-year-old, single woman who lives in a rural area. She has a 13 year old daughter, Kathy. The last four weeks, both of them have been staying in a shelter for the homeless. Prior to that, Martha and Kathy were staying with Martha's boyfriend. Due to physical and emotional abuse, she decided to leave her boyfriend's house. Currently, Martha complains of occasional crying spells and has difficulty falling asleep. She often wakes early in the a.m. and can't go back to sleep. Martha was treated for substance abuse about 5 years ago and has since remained clean.

Martha completed her GED last year. Kathy is in 8th grade and is an outstanding student in a local school. The past six months, Martha has been working in a local gas station for $4.50/hr for about 40 hours a week. She has a car and driver's license but has not been able to pay for insurance. She receives food stamps for $120 a month and has a medical card for herself and Kathy.

FLOWCHART FOR THE PROCESS OF MEASUREMENT



Adapted from Kettner, P.M., Moroney, R.M., and Martin, L.L.(1990). Designing and Managing Programs. California: Sage Publications (p. 117)

FAMILY AND COMMUNITY DEVELOPMENT FAMILY SELF SUFFICIENCY SCALE

Adapted with permission from Bucks County Opportunity Council, Inc. Self-Sufficiency Scale, © 4/11/96

Income

0 No earned income, no entitlement or subsidized benefits.
1 No earned income, eligible but not participating in entitlement or subsidized benefits.
2 No earned income, and receiving entitlement or subsidized benefits.

4A Earned income inadequate for basic living expenses, receiving entitlement or subsidized benefits.
4B Earned income inadequate for basic living expenses, eligible but not participating in entitlement or subsidized benefits.
5 Earned income inadequate for basic living expenses, not eligible for entitlement for subsidized benefits.

6 Income adequate for basic living expenses and receiving transitional subsidized benefits.
7 Income adequate for basic living expenses.
9 Income adequate for basic living and discretionary spending.
10 Income adequate for basic living, discretionary spending and savings.

Employment

0 Unemployed; work history and skills absent.
1 Unemployed; has skills and work history.
2 Unemployed; has skills, work history, and child care (or no children).

4 Working part-time.
5 Working part-time and attending education or training program.

9 Working full-time and attending education or training program.
10A Working full-time.
10B Completely disabled; no case plan to secure employment.

Adult Formal Education

0 Reading, writing, and basic math skills absent.
1 Literate in English.
2 Reading, writing, and basic math skills present, but not certified.

4 Client formally educated, need English as a Second Language.

6 High school diploma or G.E.D.
7 Post high school vocational education, non-college business, technical or professional training, some college credit; not certified or not licensed.
9 Non-college business, technical, professional training; certification; licensed.
10 College graduate, post graduate or professional degree.

Transportation

0A Drivers license and vehicle absent, no access to public transportation.
0B Drivers license or insurance absent, but drives.

3 Drivers license but no vehicle nor access to public transportation.
4 Drivers license, access to unreliable vehicle, some transportation needs met.
5 Drivers license, access to vehicle, some transportation needs met.

10A Driver license, owner of reliable vehicle, registration, insurance, all transportation needs met.
10B Access to public transportation, all transportation needs met.

Transportation: Metropolitan

0A Public transportation unavailable.
0B Public transportation unaccessible.
3 Public transportation available but don't know how to use.
4 Public transportation available but unable to afford.
10 Public transportation available, can afford, and know how to use.

Transportation: Rural

0 No drivers license.
3 Drivers license only.
4 Drivers license and access to car.

5 Drivers license and car but no insurance.
10 Drivers license and car with insurance.

Parenting/Social Functioning

0 Reported or self-reported negative behaviors, intervention needed.
2 Referral to social services, counseling or classes, intervention needed.

4 Active case in social services or counseling.

8 Maintains resolution of issues through classes or community support groups.
10 Social services intervention not needed.

Substance Abuse

0 Active addiction, not in treatment program or support group.
1 Accepts need for treatment, is scheduled to enter a treatment program or planning to attend a support group.

3 Attends a treatment program or support group.

7 In recovery less than six (6) months.
8 In recovery less than two (2) years.
9 In recovery more than two (2) years.
10 Substance abuse intervention not needed.

Mental Health

0 Reported or self-reported mental health issues, intervention needed.
2 Referral to mental health services, intervention needed.

4 Receives mental health services for treatment of DSM IV diagnosis on weekly or bi-weekly basis.

7 Maintains resolution of issues through intermittent mental health services or medication.
9 Maintains resolution of issues through non-clinical support group.
10 Mental health services intervention not needed.

Health Insurance

0 Insurance for adults and children absent.
1 Insurance for some children, but not adult(s).
2 Insurance for all children, but not adult(s).
3 Insurance for adult(s), but not children.

4 Insurance for some, but not all adults and all children.
5 All household members insured, some subsidized.

10 Private insurance for all household members.

Shelter

0 Homeless.
1 Substandard Housing.
2 Temporary residence including shelter programs.

3 Transitional Housing.
4A Unaffordable subsidized rental.
4B Unaffordable non-subsidized rental.
4C Unaffordable home ownership.

6 Affordable subsidized rental.
9 Affordable non-subsidized rental.
10 Affordable home ownership.

Subsistence

0 Unable to afford food, evidence of malnutrition or hunger.

3A Unable to afford food, participating in subsidized food programs.
3B Unable to afford food, use of pantry, soup kitchen or other private program for survival needs, eligible for subsidized food programs but not participating.
5 Unable to afford food, use of pantry, soup kitchen or other private program for survival need, not eligible for subsidized food programs.

6 Able to afford food at subsistence level, but not hungry.
10 Able to afford range of food choices.

Community Integration Achievements

(Add 1 Point for Each Achievement)

1 Birth Certificate and social security card.
1 Registered to vote.
1 No outstanding judgments, fines or unmanageable debt.
1 Not incarcerated nor on probation or parole.
1 Available and affordable child care (or family without children).
1 All children immunized and receiving regular medical checkups (or family without children).
1 Checking, savings or positive credit history.
1 Participation in family planning.
1 Grades above passing for school age children (or family without children).
1 Participation in recreational activities, belonging to a social group or volunteering.

Community Integration Barriers

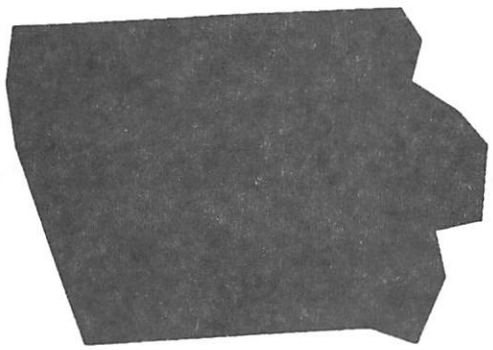
(Subtract 1 Point for Each Barrier)

1 Victim of abuse.
1 Severe legal problems
1 Primary caregiver of chronically or severely ill family member.
1 Ineligible for social services; waiting for SSI
1 Current income undeclared.
1 Not receiving court ordered child support.
1 Record of felony/child abuse.
1 Debt over $3,000.
1 Dysfunctional cohabitant inhibiting self-sufficiency.
1 No phone service.

DATE				
TOTAL SCORE				

Appendix 5—Sample Survey

This appendix includes an automated survey instrument used in Iowa to assess family progress within a CAA.



IOWA

AUTOMATED ASSESSMENT
For
FAMILY PROGRESS

1998

Automated Assessment for Family Progress

Community Action Agency Training Manual

Bureau of Community Services
Division of Community Action Agencies
Iowa Department of Human Rights

Table of Contents

Section I	Acknowledgements
Section II	Flow Chart
Section III	AAFP Work Flow
Section IV	AAFP Guidelines
Section V	Random Sample Chart

I. Acknowledgments

The Automated Assessment for Family Progress (AAFP) project would not be possible without extensive partnering. Its promise of a better understanding of the impact of our services on families and the chance to improve service delivery is only possible through the collaborative efforts of many organizations and their dedicated staff.

Key partners launching the AAFP project include:

Bureau of Community Services
Division of Community Action Agencies
Iowa Department of Human Rights

Lead Community Action Agencies in designing, piloting, and training on AAFP:

- Community Opportunities, Inc.
- Northeast Iowa Community Action Corporation
- South Central Iowa Community Action Program
- Southern Iowa Economic Development Association
- Southeast Iowa Community Action Organization

Iowa Community Action Association

Iowa Commission on Community Action Agencies

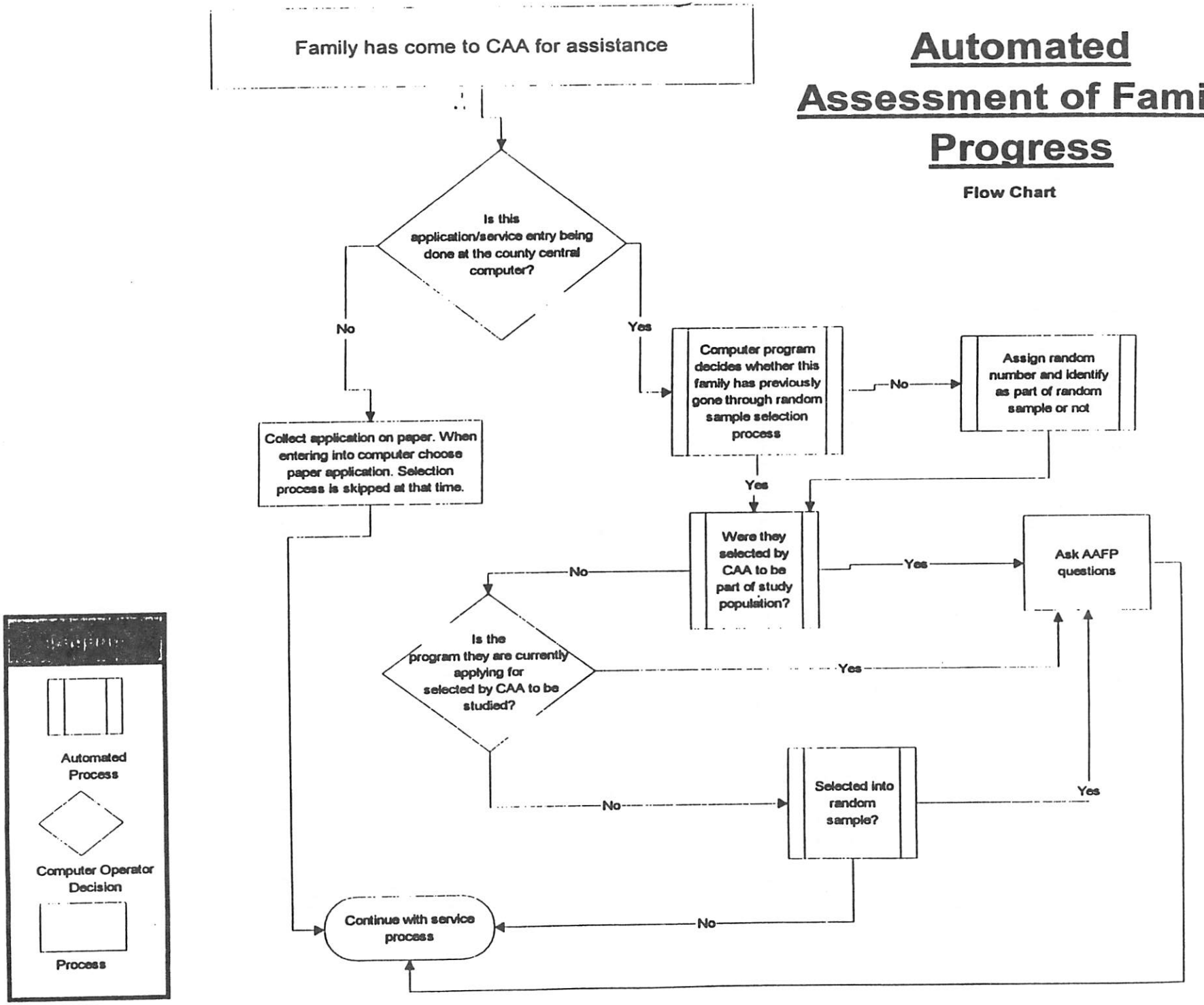
Mid-Iowa Community Action, Inc.

National Resource Center for Family Centered Practice
University of Iowa

Office of Community Services
U.S. Department of Health and Human Services

Automated Assessment of Family Progress

Flow Chart



III. AAFP Work Flow

Family has come to agency for assistance:

If an application was not taken at a county center and is on paper, a prompt will occur during data entry allowing the program to *exclude* this household from the selection process. If they come into the center at a later time they will go through the selection process at that time, i.e. eligible for being selected.

Otherwise:

Family is present with an outreach worker who is entering responses at a computer.

The computer program identifies the family as either a part of *random sample* or not a part of the study population. The household record is marked as having gone through the selection process. If the family is included in *the random sample*, every time they come in they will be asked the AAFP questions. Non-selected families will not be part of the *random sample* for the entire length of this time period (approximately two years).

However, if the family is receiving a service that the CAA wants to track, they may be chosen to be part of the *CAA designated* population. Unless the family is already in the *CAA designated* study, at every entry, the operator will be given the opportunity to identify this household as part of the study. (The service they are receiving at this contact may be one that is being studied.)

If the family is not part of either study population (random sample or CAA designated population), the AAFP questions will not be asked.

If selected for the random sample or CAA designated study:

The family will be asked the AAFP questions every time they come into the center and are being entered directly into the computer. If they are not willing or unable to answer all or some of the questions, those questions will be marked with a "no answer" response. If the family does not come into a center, e.g., intake is done on a paper application, there will be no record entered in the AAFP data file.

Frequency of entry:

AAFP questions will be asked every time a family comes into the center for service. Families that come in only once a year will have only one set of AAFP questions - no additional attempts will be made to get questions answered.

Frequency of data delivery to DHR or designee:

Data will be sent twice a year at 6-month intervals. A test sample will be sent 6 weeks after the start of the program to ensure process is working.

How the selection process will work

A sampling process was chosen (as opposed to collecting this information on everyone) to reduce the amount of time needed to collect and enter the data while ensuring that the results would be valid. A random sample will be selected for a study group from the all households served, at a size to achieve a 95% confidence level in the results. Agencies may decide to use the AAFP process to assess the participants in a designated service program. Households may be included into both, one, or none of these study groups. Those in the random sample will be selected as part of study group (or not selected) at the point of their first eligible entry into the system. The CAA designated group may enter at any time during the year they enter into that service program.

Getting the size of sample population right

For the sampling process to work, every household must have the same chance of being selected whether they come in the first day of the process or the last, whether they come in only once a year or every month. The computer selection process is written to assure this. It uses a statistical table that lists the number needed for the sample for each level of the total people to be studied for the level of confidence that was chosen. This is done on a county by county basis.

Statistical accuracy requires larger *percentages* of smaller populations than of larger ones. For example: for the 95% confidence level, 230 households need to be sampled out of 500 households, but only 298 households out of 1000!

All the computer program will need to know is how many unduplicated households are expected to be seen this year in each county. The most accurate estimate would probably be using last year's CSBG number adjusted by your best guess as to any expected change in the number that will be served.

However, since applications taken by hand or off-site are excluded from being selected the expected total population has to be reduced by that amount. Otherwise you will never be able to get enough households to fill your sample and the results won't carry the level of confidence needed to be useful.

Total Population estimate procedure *(all steps are applicable to all agencies or counties)*:

1. Identify the number of unduplicated households that are normally served in the county, e.g., 900.
2. Add or subtract a number that number of households served are expected to change from last year to this, e.g., 900+65=965 (Bob's Weed and Feed has been laying off and things don't look to get better.)
3. Subtract from that number the number of applications that normally would not be taken at the county center (HS round-ups, WIC clinics, automatic eligibles for LIHEAP, etc., e.g., 965-400=565). *These are programs that applicants don't come to county office first.*
4. Subtract the number that would be taken by hand or on a second computer or anything that would keep a family that was randomly selected from being immediately identified and asked the AAFP questions, e.g., 565-50=515. *The staff that knows how to run the computer gets 3 weeks off a year, plus those days when LIHEAP gets backed up and everyone takes applications.*
5. Add back in any families you think would be included in steps 3 or 4 but would still be served by a program that would do an application at the computer, e.g., 515+250=765) *All the Head Start and most of the WIC families come in for LIHEAP.*
6. Use that number as total population size, e.g., 765. Next, the CAA will look at the random tables and identify the population nearest to the estimate and pull the needed size for sample from the table, and, then, identify it as a percentage of total population (i.e., 277/765 = 36.21%).

   If the computer-generated random number falls below needed percentage number (below or equal to .3621) that family is included in random sample, otherwise it is marked for exclusion.

This process will only need to be done once a year (but this interim is soft). The better the estimate, the smaller the sample size will be and still be accurate.

Note on Subtractions from total population:

Applications that always come to center taken by hand have a tendency to be from a certain population, e.g., families served by a particular program that provides its service in a different location, families that live out of town that are collected during an off-site visit, LIHEAP mail-in renewals. It is necessary to keep this in mind when discussing data results.

Reports that should be available at Agency level

Percent of random sample filled (sample identified / total sample population).
Number of households selected for CAA study (this may include duplicates from the random sample).
Alphabetical printout of whom is in each selection population. (Labels too?)
Answer report by random sample or selected sample.
For Example, Are all adults in the household employed?

No - 1200 Yes - 3400 No answer - 654

Elements under construction:

Reports for CAAs
Data export
Refilling sample populations

IV. Automated Assessment for Family Progress Guidelines

General Process

After asking and updating basic information questions, explain to the family that we need their help in assessing needs of families in our area. To do this we would like to monitor the changes in their situation by having them respond to questions in a number of different life areas.

Explain that it will not take much time and that it will help the agency make decisions on how to provider better service. Ask the questions in the manner of someone that is interested in knowing someone's opinion of items you know nothing about. This will help families give their truest picture of their condition as they see it.

Ask the question and state the answers expected. If they do not want to or do not know the answer to a particular question, just skip it and continue on. We are asking for their view of their situation, so do not challenge their perception during this process. If they answer a question without using one of the identified choices use the following definitions and purposes to code the answer as consistently as possible. Code this as smoothly as possible and move on to the next question so as not to break the rhythm of the survey. This is not being used as an education tool for the family, but to measure how a family's needs change over time.

Explaining how the sampling process works to families

A family may ask how come the last family got a lot more time than they did or did not have to take as long. The purpose of sampling is to ask the fewest number of families and yet get a picture that would be true as if you had the time to ask everyone. For that to be true everyone has to have the same chance of being chosen. For example, you may do four in a row and you may do none for two days. Trust the randomness of the sample and help families understand that despite their exclusion or inclusion their cooperation will help you to provide more of what families need.

What to do when a family's answer to a question isn't one of the response choices

This assessment is meant to be a measure of the *family's* perception of their condition.

Use the following definitions and purposes as a guide when a family answers in a way that the question is answered but none of the available choices were used or the family seeks further clarification.

This is so every worker can enter responses in a consistent manner.

General Definitions

Adults - Everyone over the age of 18 who is not in school full-time and less than retirement age and who does not have a disability that prevents them from being involved in the described activity.

Goal answers:
Need plan to improve - Family is unhappy with current situation in this area and is unsure of how to proceed to correct the problem.

Has plan to improve - Family is unhappy with current situation in this area but knows how to proceed.

Plan not needed - Family is currently satisfied with status in this area.

Job Status

1. Are all adults in the household employed?
   ____No ____Yes

Purpose: To know if all the adults in this family have an attachment to the work force and that the family is using all its resources to become self-sufficient.
Definitions: Employment - have steady, reliable work of at least 20 hours a week average.

2. Do any adult members of the household have job related benefits? Mark all that apply, 1 point for each marked. 5 maximum points. "none" = "0".
   ____Medical ____Life ____Sick
   ____Vacation ____Retirement ____None

Purpose: To see the quality of jobs this family has.
Definition: If any adult in this family is receiving the benefit mark it. Do not count the same benefit twice even if more than one person receives it.

3. Do any adult members of the household require job/skill training?
____Not available & needed
____Needs, not enrolled
____Completed or enrolled
____Not needed

Purpose: To know how much job training is needed or how many people are taking advantage of it.
Definition: Job/skill training - A program that provides people with the general skills needed to receive and keep a job (e.g., appearance perception, resume, attendance expectations, brush-up courses) or a short course (60 days) to learn skills needed to be hired at local company.
Not available and needed - Family member needs training (even if they are not motivated to receive it) and a program is not available within a 30 mile radius.
Needs, not enrolled - family member is not currently enrolled. (If planning to enroll, mark in job goals)
Completed or enrolled - Completed in last 30 days or currently enrolled.
Not Needed - Family does not feel they need job/skill training.

4. JOB GOALS:
____Need plan to improve
____Has plan to improve
____Plan not needed

Education

1. Do any adult members require additional training/education?
____Needed/unavailable
____Available/unaffordable
____Available/not enrolled
____Enrolled
____No need

Purpose: To assess if the adults in this family need additional formal schooling to reach job or life goals.
Definitions: Training/education - Longer term programs (AA, cosmetology, CNA)

2. Do any adult members require additional primary education?
____Yes ____No

Purpose: To assess if the adults in this family need more basic education to reach job or life goals.
Definitions: Primary education - GED, Adult Basic Ed (ABE), English as Second Language (ESL), finish high school.

3. EDUCATION GOALS:
____Need plan to improve
____Has plan to improve
____Plan not needed

Community Involvement

1. Is any adult member of the household currently involved in community activities such as church, clubs, city, Head Start, etc.?
____Never ____Frequently ____Sometimes

Purpose: To gauge this family's connection to and involvement in the community.
Definition: community activity - any activity that is open to the general public and attendance is voluntary (includes church, clubs, YMCA, sports, Head Start, attend city events)
Frequently - at least one activity a week or more on average
Sometimes - less than frequently but more than never.

2. COMMUNITY INVOLVEMENT GOALS:
____Need plan to improve
____Has plan to improve
____Plan not needed

Self-Sufficiency (FIP)

1. If FIP, is any adult member of the household enrolled in a program to help household get off of FIP?
____No ____Yes

2. If Non-FIP, is any adult member enrolled in a self-sufficiency program?
____No ____Yes

1 & 2 - **Purpose:** - To see if this family is getting help to move to self-sufficiency.
1 & 2 - **Definition:** self-sufficiency program - any developmental program that helps families to overcome barriers to self-sufficiency, e.g., FaDSS, Promise Jobs, FSS, etc.

3. SELF-SUFFICIENCY GOALS:
____Need plan to improve
____Has plan to improve
____Plan not needed

Household Management

1. Does any adult household member have a savings account?
   ____No ____Yes

Purpose: To assess if this family puts aside part of their income for emergencies or future purchases.
Definition: have a savings account - have a system that is used regularly to set aside funds for future needs.

2. Are household bills paid on time?
   ____No ____Yes

Purpose: To assess if this household has income to meet its monthly obligations.
Definition: Put in yes if they can do this most months.

3. Are household members basic needs met?
   ____Not meeting needs
   ____With assistance
   ____without assistance

Purpose: To assess if this family needs further immediate assistance.
Definition: Basic needs - Includes, but is not limited to, adequate food, safe shelter, medical attention when needed.

4. Quarterly Gross Household Income: $_____

5. Poverty Level: _____%

4 & 5 – Will come off the initial household input screen.

6. Debt Load:

____High	____Low
____Somewhat High	____None
____Some	

Purpose: To check this family's perception of debt level. This should include automobile, student, medical, credit card, etc. Do not include mortgages.
Definition: (Annual Gross Income=4*QGI)
High - over 1/2 of AGI.
Somewhat high - less than ½ more than 1/3.
Some - less than a 1/3 more than 10%.
Low - less than 10%.

7. HOUSEHOLD MANAGEMENT GOALS:
____Need plan to improve
____Has plan to improve
____Plan not needed

Food Supply

1. Is household food supply adequate?
____No ____Yes

Purpose: To assess if this family has emergency/chronic food problems.
Definition: The family has regular sources to meet food needs. (May include WIC & Food Stamps.)

2. Does household receive Federal, State or local food assistance program benefits?
____Yes ____No

Purpose: To assess if this family is getting assistance to meet food requirements.
Definition: Include WIC, Food Stamps, emergency food programs. Does not include food buying clubs.

3. FOOD/NUTRITION GOALS:
____Need plan to improve
____Has plan to improve
____Plan not needed

Health

1. Do household members have health insurance coverage?
____No household members do
____Only some members do
____All household members do

Purpose: To assess if this family has health insurance. (Title XIX, Medicaid, Medicare, etc all count)
Definition: These choices are mutually exclusive. If they have insurance available at work but do not/can not use it consider them without insurance.

2. Do household members have preventive health habits such as regular checkups and physicals?
   ____Never
   ____Sometimes
   ____On a regular basis

Purpose: To assess if this family does wellness activities (includes dental and vision).
Definition: Mutually exclusive.

3. Is poor physical or mental health of any household member affecting success in other areas (such as job or school)?
   ____Crisis at this time
   ____Potential exists
   ____None at this time

Purpose: To assess if physical or mental health of any household member or care for mentally/physically disabled household members is affecting any adults ability to attend school or participate in work force.
Definitions: Crisis - Care demands are currently keeping adults away from school/work.
Potential - Care demands that affect work/school can occur at any time.

4. HEALTH GOALS:
   ____Need plan to improve
   ____Has plan to improve
   ____Plan not needed

Housing

1. Is affordable housing available?
   ____No ____Yes

2. Is current housing situation affordable?
   ____No ____Yes

Purpose: To assess if this family is spending more than average for housing.
Definition: Affordable is 40% or less of monthly income if utilities are included, 30% if not included.

3. Is current housing condition:
____Poor ____Adequate ____Good

Purpose: To assess if this family has sub-standard or inappropriate housing.
Definitions: Good - Ideal size for family, well maintained, safe.
Adequate - Can accommodate the number of family members and is generally safe.
Poor - should include housing that has major safety deficiencies or is not properly sized for the family (sufficient number of bedrooms for adults and at least one for each sex of children).

4. Is current housing in a high crime or unsafe area?
____Yes ____No

Purpose: To assess if current housing is in safe areas.
Definition: Unsafe area - An area that is inappropriate for certain family use (near a major highway if there are small children, industrial area, etc.).

5. HOUSING GOALS:
____Need plan to improve
____Has plan to improve
____Plan not needed

Emergency/Crisis

1. Is household in an emergency/crisis situation?
____Crisis now exists
____Crisis potential exists
____None at this time

Purpose: To assess patterns of usage and current state of family.
Definition: Family has come to the center in a state of crisis and is requesting emergency service. (LIHEAP, weatherization, HS, WIC should not be considered emergency programs.)

2. How often has household visited CAA for emergency assistance?
____Weekly ____Monthly
____Quarterly ____Yearly ____Never

Purpose: To assess how often this family is in a crisis situation.

3. EMERGENCY GOALS:
____Need plan to improve
____Has plan to improve
____Plan not needed

Household

1. Transportation:
   ____Needed, but not available
   ____Available, but cannot afford
   ____Available and can afford

Purpose: To assess this family's need and access to transportation.
Definition: Needed, but not available - no private or public transportation.
Available but cannot afford - Public transportation available but too expensive or unable to afford reliable private transportation.
Available and can afford - Satisfied with current state.

2. Legal:
   ____Needed, but not available
   ____Available, but cannot afford
   ____Available and can afford
   ____Not needed

Purpose: To assess the family's need for and access to legal aid.

3. Problems with family, friends or others:
   ____Crisis exists at this time
   ____Crisis potential exists
   ____None at this time

Purpose: To assess the family's current relationship situation.

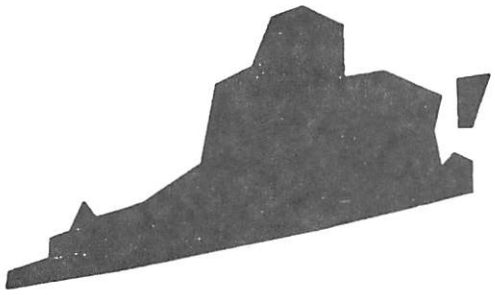
4. Child care:
   ____Needed, but not available
   ____Available, but cannot afford
   ____Available and can afford
   ____Not needed

Purpose: To assess the family's need for and access to child care.

5. HOUSEHOLD GOALS:
   ____Need plan to improve
   ____Has plan to improve
   ____Plan not needed

Appendix 6—Return-on-Investment (ROI)

An introduction to cost benefits analysis and examples of ways to calculate Return-on-Investment as applied to the non-profit sector is contained in this Appendix. A several states have introduced this method of measuring the monetary gain or loss of resources invested in human services. CAAs can demonstrate cost savings, cost avoidance and income generation utilizing ROI models.



VIRGINIA

EXAMPLES

Cost Benefits Analysis
Return-on-Investment (ROI)

VIRGINIA

Return-On-Investment Examples

This packet contains the Virginia Community Action Agency network's first attempt at aggregating information for use in demonstrating network effectiveness through cost benefit analysis. Information from several agencies was grouped together to show a return-on-investment for several different areas.

Community Action, like all human services programs, provides a variety of services. Many of these services will not show a positive return-on-investment, but are necessary and will continue to be offered. What Community Action *can* show is that, in many cases, CAAs can save state and local government money with their programs.

This is still a new process for Virginia and for Community Action and human service programs in general. Businesses are moving into the human services delivery field with limited experience in providing services but a great deal of experience in cost benefits analysis. While those of us who work with Community Action know its value, it is important to be able to demonstrate that value in ways that funding sources such as state and local governments and the business community can understand.

EMPLOYMENT

Agencies reporting:	Clinch, MCAP, OHA, People, RCAP, and STOP
Outcomes:	Placing people in employment
Number served:	1,326 includes 434 TANF clients
Number placed in employment:	795 includes 284 TANF clients
Reported average wage:	$ 5.85/hour

INVESTMENT/COST

Personnel - direct services	$ 509,038
Personnel - administration	$ 64,596
Other costs (includes JTPA)	$ 832,600
Total	$1,406,234
Average cost per person placed:	$ 1,769

ALTERNATIVE COSTS

Average cost of cash payments to one TANF case for one year	$ 2,988

RETURN

Earning for one year (2,000 hours at $5.57/hour)	$ 11,140

OTHER INFORMATION

Three agencies tracked the clients for 6 months. For these agencies 253 of the 438 placed (58%) were still working after 6 months. This includes 104 of 219 TANF recipients.

The figures includes the JTPA Grant operated by Clinch Valley. This is a comprehensive and intensive employment program with an average cost of $5,017 per person placed. However, the average wage for those placed through this program is $6.83 per hour and all of the 178 people placed, including 45 TANF recipients, continued to be employed after 6 months.

DAYCARE

Agencies reporting: Clinch Valley, New River, People, STOP, and STEP

Outcomes:
People stay in school at grade level
People complete vocational/other training
People start or maintain employment

Total Served:	404	includes	72 TANF clients
People staying in school at grade level	165	includes	44 TANF clients
People completing vocational/other training	54	includes	26 TANF clients
People starting/maintaining employment:	287	includes	37 TANF clients

INVESTMENT/COST

Personnel - direct services	$ 430,960
Personnel - administration	$ 86,479
Other costs	$ 154,391
Total	$ 671,830
Average cost per person	$ 1,663

ALTERNATIVE COSTS

Average cost of cash payments to one TANF case for one year:	$ 2,988
Average per pupil expenditure in Virginia*	$ 5,605 per year

RETURN FOR EMPLOYMENT OUTCOME

Earning for one year (2,000 hours at $5.57/hour) $ 11,140

OTHER INFORMATION

CAPs run a variety of daycare programs, some independent, some connected to other programs such as training, employment, or Head Start. This makes the collection of data on day care very complex.

Note: * State Department of Education, "Sources of Financial Support for Expenditures, Total Local Expenditures for Operations and Total Per Pupil Expenditure for Operations 1995-96".

EMERGENCY ASSISTANCE

Agencies reporting:	Alexandria. Clinch Valley, CPAC, Eastern Shore. MACAA, MCAP, New River, OHA, People, Quin. RADA, RCAP, Rooftop, STOP, STEP, and Williamsburg/James City Co.
Outcomes:	Client assisted only once per year
Total Served:	27,366
Client assisted only once per year	16,665

INVESTMENT/COST

Volunteer Hours	27,230
Personnel - direct services	$ 522,315
Personnel - administration	$ 36,807
Other costs	$ 267,395
Total	$ 826,517
Average cost per person	$ 30

ALTERNATIVE COSTS

Average yearly cost of payments to TANF case $ 2,988

RETURN

16,665 people were able avoid requesting additional emergency assistance for one year.

OTHER INFORMATION

Emergency services are designed to meet immediate and urgent needs of low-income individuals or families, including the need for health services, food, and housing.

FOSTER CARE PREVENTION

Agency reporting:	Pittsylvania County Community Action
Outcomes:	Children avoid foster care
Total Served:	43 families - 76 adults and 112 children at-risk of placement in foster care
Children who avoided foster care:	106 (95%)

INVESTMENT/COST

Grant from Virginia Department of Social Services:	$ 186,456
Local Government:	$ 14,000
Total	$ 200,456

Average cost for children avoiding foster care: $ 1,810

ALTERNATIVE COSTS

Average cost of foster home placement (18 months at $270 - $400/month)*	$ 4,860 to $ 7,200
Cost of one year of institutional care*	$25,000 to $100,000

RETURN

Total Cost of Program	$200,456
Children avoiding foster care (106 x 50% = 53 x $6,066)**	$321,498

Every dollar spent on this program returned a minimum savings of $1.60 in foster care costs**

OTHER INFORMATION

This was a collaborative effort between the Pittsylvania County Community Action (PCCA) and the Pittsylvania County Department of Social Services. PCCA operated an intense homebased foster care prevention program from May 1, 1992 through September 30, 1995. PICA provided parenting skills training, counseling, discipline techniques, transportation, medical assistance. Advocacy and other needed services.

Notes: * Costs and average length of stay provided by the Pittsylvania DSS

** Assumes: 1) That 50% of the children would have gone into foster care (information supported by Pittsylvania DSS). 2) Cost of $6,066 per child ($337 average maintenance x 18 months). This is the average maintenance foster care placement and does not include Medicaid and other costs. Actual costs would be greater

ALTERNATIVE SPECIAL EDUCATION

Agency reporting: STEP

Outcomes: Children avoid residential educational placement

Total Served: 9 children

Number who avoided residential placement: 9
Number completing school year or equivalent: 8

INVESTMENT/COST

Personnel - direct services	$ 59,028
Personnel - administration	$ 7,902
Other costs	$ 24,150
Total	$ 91,080
Average cost per child	$ 10,120

ALTERNATIVE COSTS

Average per pupil expenditure in Virginia* $ 5,605 per year

Cost of residential educational placement $11,700 to $23,502 per year

RETURN

Total Cost of Program	$ 91,080
Children avoiding residential placement ($17,600 x 9)**	$158,400

Every dollar spent on this program returned a minimum savings of $1.74

OTHER INFORMATION

This is a program operated by STEP for students whose behavior problems do not permit them to be in a regular high school.

Note: * State Department of Education, "Sources of Financial Support for Expenditures, Total Local Expenditures for Operations and Total Per Pupil Expenditure for Operations 1995-96".

** Residential costs based on range of a sample of institutions providing residential educational services. $17,600 used as a average.

TRANSPORTATION

Agencies reporting:	Clinch. Eastern Shore, MCAP. OHA. People, and RCAP
Outcomes:	Elderly able to maintain independence
Total Served:	7,881
Targeted Elderly:	1,209

INVESTMENT/COST

Personnel - direct services	$ 159,606
Personnel - administration	$ 23,208
Other costs	$ 104,669
Total	$ 287,483
Average yearly cost per elderly person	$ 238

ALTERNATIVE COSTS

Average cost of institutional care, one person for one year: $ 36,000

OTHER INFORMATION

These transportation services provide the low-income elderly with access to shopping, medical care, and other needed social activities and helps this population maintain independence. In some cases if this service was not available, members of this population could not function in their own homes.

TRANSPORTATION

Agency reporting:	STOP	
Outcomes:	People able to start or maintain employment	
Total Served:	9	includes 1 TANF client
People able to start/maintain employment:	5	includes 1 TANF client

INVESTMENT/COST

Personnel - direct services	$ 1,089
Personnel - administration	$ 1,053
Other costs	$ 77
Total	$ 2,219

Average cost per employment $ 443

ALTERNATIVE COSTS

Average cost of cash payments to one TANF case for one year: $ 2,988

RETURN

Earning for one year (2,000 hours at $5.57/hour) $ 11,140

OTHER INFORMATION

Lack of transportation is can often be a barrier to the low-income population in seeking and maintaining employment.

In this program, STOP assists participants who have transportation barriers by providing bus tickets and/or monetary reimbursement for travel to and from employment.

TRANSPORTATION

Agency reporting:	STOP	
Outcomes:	People able to complete vocational/other training	
Total Served:	372	includes 128 TANF clients
People able to complete vocational/other training:	216	includes 109 TANF clients

INVESTMENT/COST

Personnel - direct services	$ 37,392
Personnel - administration	$ 24,618
Other costs	$ 13,785
Total	$ 75,795

Average cost per person completing vocational/other training: $ 351

ALTERNATIVE COSTS

Average cost of cash payments to one TANF case for one year: $ 2,988

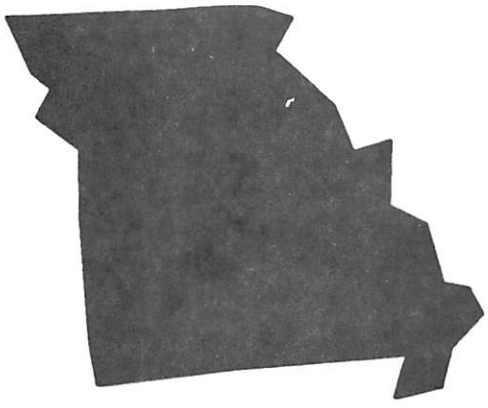
RETURN

Earning for one year (2,000 hours at $5.57/hour) $ 11,140

OTHER INFORMATION

Lack of vocational training/skills can often be a barrier to the low-income population in seeking and maintaining employment.

In this program, STOP assists participants who have transportation barriers by providing bus tickets and/or monetary reimbursement for travel to and from vocational/other training.



MISSOURI

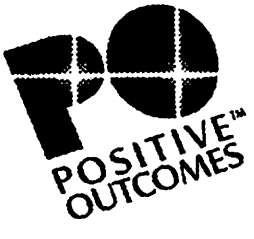
Return-on-Investment Applied To Human Services

CSBG Coloquium
June, 1997

Return-on-Investment

ROI

A Results-Oriented Management and Accountability (ROMA) Training
Program provided to the
Missouri Community Services Block Grant Colloquium
Truman State University; Kirksville, Missouri
June 17 and 18, 1997



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What is ROI Applied to

Human Services?

Return-on-Investment analysis is the examination of the tangible relationship, in economic terms, of the expenditures for programs to the value of the results produced.

In today's funding environment, positive ROI occurs when an initial **investment** (expenditure) on a program or service results in a **return** (measurable in monetary gain) equal to or greater than the initial investment.

$$\mathbf{I \leq R}$$

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Possible ROI Outcomes

I < R
Investment is less than Return

Example 1: Invest (purchase) $1000 in 100 shares of stock at $10/share. After one year, share price is $11/share or a 10% gain.

Example 2: A job training program resulting in permanent employment that reduces or eliminates existing entitlement benefits as well as provides a living income and contributes to the tax base.

I = R
Investment equals Return

Example 1: Invest (purchase) $1000 in 100 shares of stock at $10/share. After one year, share price remains at $10/share.

Example 2: A program or service that stabilizes a family such as emergency services or crisis intervention. The intervention may have prevented the family from losing ground, but the family is no more or no less dependent than prior to receiving the intervention.

I > R
Investment is greater than Return

Example 1: Invest (purchase) $1000 in 100 shares of stock at $10/share. After one year, share price is $5/share. This is a negative ROI or loss of $500. For every $10 invested, $5/share was lost.

Example 2: A program or service intervention which may result in additional costs, such as providing citizenship for elderly immigrants which may result in increased utilization of health care and social services.

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Why is it Important to Calculate ROI for Human Services?

- Applies the same standards of accountability used in the for-profit sector, to public and private human services
- Helps public and private human services prepare for future competition and managed services
- Demonstrates that human services can generate a measurable short- and long-term positive impact for the client, agency and community
- Can demonstrate that a modest success can generate a positive return (I< R)
- Can identify when policy choices are made for the common good (I>R)
- Can identify program deficiencies or environmental issues negatively affecting the delivery of services (I>R)
- Helps establish realistic expectations for numbers of successful outcomes in client-level programs.

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ROI Can Be Expressed in Different Ways.

1. Rate of Success

   $\frac{\text{\# of successful outcomes}}{\text{\# of units of service*}}$ = % ROI

   *Sometimes the # of units of service and the # of clients are interchangeable.

2. Absolute Value
   a. # of successful outcomes x $ value of outcome = $ Gross ROI
   b. (# of successful outcomes x $ value of outcome) - $ value of total expenditures = $ Net ROI

3. Ratio

   $\frac{\text{\$ value of successful outcomes}}{\text{\$ value of total expenditures}}$ = $ relational ROI

   The relational ROI is useful in explaining leveraging outcomes. Example: For every $1 a local agency raises from private donors, the utility company will provide a $2 match, thereby creating $3 available to reduce arrearages and stop cut-offs of utility service for low-income families.

Remember: The percentage of success does not necessarily need to be high to create positive ROI expressed in absolute or relational terms.

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Example 1

The ABC agency provided placements for 100 individuals to take English as a Second Language course. All participants were migrant farm workers currently employed at minimum wage. After three months, 36 participants did not complete course requirements (left the area, incomplete classwork, insufficient test scores), 27 participants completed course requirements but did not pass the final exam, and 37 participants completed all requirements, passed the final exam, and received graduation certificates. Graduates are projected to realize a 20% increase in income in each of the next five years ($ 16,252).

A. Rate of Success:

$$\frac{\text{37 successful graduates}}{\text{100 units of service}} = \text{37\% ROI}$$

B. Absolute Value:

a. 37 successful graduates x $16,252= $601,340 Gross ROI (Family Level)

b. (37 successful graduates x $16,252) - $125,000 total expenditures = $476,340 Net ROI (community level)

C. Ratio

$$\frac{\text{\$ 601,340 (value of successful outcomes)}}{\text{\$125,000.00 (total expenditures)}} = \frac{4.8}{1} \text{ Relational ROI}$$

(In other words, $1 of investment yields $4.8 of return)

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There are several ROI models that can be utilized:

Cost Savings

The ROI can demonstrate a cost savings resulting from the service intervention.

- Health screening program

Cost Avoidance

The ROI can demonstrate the prevention of further expenditures as a result of the service intervention.

- TANF, reduction in welfare expenditures

Revenue/Income Generating

The ROI can demonstrate that the intervention resulted in increasing income or revenues.

- Employment (disposable income)
- Contract MIS (agency discretionary funds)
- Out-of-home placements (economic impact)

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If we cannot predict the future, how can we claim success for cost avoidance?

How can we credibly attribute success to prevention?

We are adapting ROI's use for industry to use in the non-profit sector.

We need to adapt industry's tools for credible claims as well.

- control groups
- longitudinal studies
- product testing
- quality control
- trade associations

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Exercise One

The XYZ Agency operates a summer program to help 50 teens learn job skills, improve self esteem, and remain at the same grade level as their age peers. The teens are 10^{th} graders from single-parent working households. At the end of the summer, 28 participants had maintained their part-time employment, demonstrated coping behaviors associated with improved self-esteem, and completed course work sufficient to allow them to enter the regular school year with their previous classmates. The cost of repeating the school year is $5,265 per student; the cost of the summer program was $65,000.

1. Calculate three forms of ROI. What models are you using?

A. Rate of Success

B. Absolute Value

1. Gross ROI

2. Net ROI

C. Ratio

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Selected Costs/Values

Average cost per day for hospital stay, Philadelphia area, 1995: $456.25
U.S. $357.24
(based on semi-private room)
Source: ACCRA, Cost of Living Index, 2nd quarter, 1995
Quoted in America's Top-Rated Cities, Vol. 5, 1996

Annual operating cost per inmate in local jail, PA, 1993 $16,448
U.S. $14,667
Source: Information Plus: The Information Series on Current Topics Wylie, Texas, 1996

1993-94 Per pupil instructional expenditure

West Chester Area School District	$5,265.68
Trodyffrin-Basttown School District	$7,659.55
Oxford Area School District	$4,057.51

Source: PA Dept of Education

Median Income of householder, by education level, 1993:

<9th grade	$13,920
9th - 12th grade, no diploma	$17,966
High school graduate	$28,700
Some college, no degree	$35,220
Associate degree	$39,583
Bachelor's degree or more	$56,116
Bachelor's degree	$51,480
Master's	$60,341
Professional degree	$87,666

Source: Statistical Abstract of the U.S. 1995, The National Data Book, U.S. Bureau of the Census.

Typical daily cost of nursing home care in Chester County:
$130 - $150/day for private or semi-private room (includes room, board, nurse, care)
$180 /day for Alzheimer's unit
Source: Chester County Office of Aging, PA

Typical costs for an average *burial* in eastern PA: $5000 - $5500
cremations would have different costs.
Source: Steven Founds, Director Founds Funeral Home.
West Chester, PA

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Selected Potential Savings from Improving Child and Family Well-Being in High-Risk Allegheny County Neighborhoods:*

The Cost of Failure

Maintenance Savings	
AFDC Savings	$ 57,364,877
Medicaid Savings	$ 58,837,852
Food Stamp Savings	$ 42,531,124
Remediation/Public Protection Savings	
Child Welfare Services Savings	$ 41,770,459
Jail Savings(local)	$ 19,179,350
Prison Savings(state)	$ 52,945,422
Juvenile Detention Savings	$ 15,617,448
Additional Tax Revenues	$265,031,058
TOTAL	$563,277,600

Note: Savings are based upon high-risk neighborhoods having rates of child outcomes and consequent expenditure levels equivalent to other Allegheny County neighborhoods. The savings, by level of government are: federal ($262.9 million), state ($214.9 million), and county ($85.5 million).

Maintenance Savings are derived from caseload numbers. Remediation Savings are based on numbers in community and are applied to costs. Tax Revenues are based on comparison of this high-risk to a lower-risk neighborhood, less public spending resulting in increased revenue. Family Center expenditures are $18.5 million and can create a 3:1 or $55.5 million return to the neighborhood. The Family Center represents a 10% return to the community and a 300% return to the clients.

*Source: Realizing A Vision for Children, Families and Neighborhoods: An Alternative to Other Modest Proposals, National Center for Service Integration, C. Brunner, D. Nelson, 1996.

Return-on-Investment; ROMA training provided to
the Missouri Community Services Block Grant Colloquium
Truman State University; June 17 and 18, 1997

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The Building Blocks for Return-on-Investment: Eight Key Questions

1a. How many clients are you serving?*
When does a client become a client? Duplicated or unduplicated count.

1b. Who are they?*
Basic demographics such as age, sex, income, disability level, race, and ethnicity.

2. What services do you give them?*
There can be multiple services within a single program or process. Establish the number of services delivered (Sometimes the number of clients is used in lieu of a number of services.)

3. What does it cost?*
Identify hidden administrative costs, personnel costs and benefits and client income transfers. Divide the total cost by the number of services.

4. What does it cost per service delivered?*
Divide the total cost by either the number of services delivered or the number of clients served, as appropriate.

5. What happens to the clients as a result of the service?*
There can be multiple outcomes for each service delivered. Establish a number of successful outcomes.

6. What does it cost per outcome?*
Divide the total cost by the total number of positive outcomes.

*Source: Based on materials provided by Reginald Carter, *The Accountable Agency*, Sage Human Services Guide 34, 1983

7. What is the value of a successful outcome?
Establish the financial value of each individual success

8. What is the return on investment?

A. Rate of Success: Divide the total number of successful outcomes by the total number of units of service.

B. Absolute ROI
   1. Gross ROI: Multiply the total number of successful outcomes by the $ value of a successful outcome
   2. Net ROI: Subtract the cost of the total expenditures from the Gross ROI

C. Ratio: Divide the Gross ROI by the cost of the total expenditures.

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Do we include in-kind costs in calculating the cost of a service (question #4)?

YES!

Remember, we are adapting ROI from industry for use in human services. How does industry handle in-kind costs?

Don't understate the cost of a service. Include all the costs:

- Salaries and benefits, vacation, holidays
- Administrative and support services
- Space, depreciation, security
- Client income transfers: (rent, utility payments, food, clothes, car repair, etc.)
- Utilities
- Technology - fax, computer
- Travel
- Training
- Materials, supplies
- Reporting
- Presentation

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Example 2

1a. **How many clients are you serving?*** 100

1b. **Who are they?*** TANF (Temporary Assistance to Needy Families)

2. **What services do you give them?*** Referrals to job readiness courses, training, jobs, and follow-up services after job placement.

3. **What does it cost?*** $50,000

4. **What does it cost per service delivered?***
   $50,000/100 = $500/client

5. **What happens to the clients as a result of the service?***
   10 clients obtain permanent employment.

6. **What does it cost per outcome?*** $50,000/10 clients = $5,000/job/client (This is the cost of success!)

7. **What is the value of a successful outcome?** Save $12,000 per year per family welfare costs

8. **What is the return on the investment of $50,000?**
   A. Rate of Success: $\frac{\text{10 successful clients}}{\text{100 clients served}}$ = 10% ROI
   B. Absolute ROI:
      1. 10 clients x $12,000 = $120,000 Gross ROI
      2. $120,000 - $50,000 = $70,000 Net ROI
   C. Ratio
      $\frac{120,000}{50,000} = \frac{2.4}{1}$ Relational ROI

*Adapted with permission; Reginald Carter: *The Accountable Agency,* Sage Human Service Guide 34; 1983

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Example Three: Early Intervention

1a. **How many clients are you serving?*** 100

1b. **Who are they?*** Children two years of age who have been assessed and are determined to be eligible for early intervention services.

2. **What services do you give them?*** Speech therapy, physical therapy, development support until entry into kindergarten, for a period of three years.

3. **What does it cost?*** $900,000/3 year period

4. **What does it cost per service(s) delivered?***
$900,000/100 = $9,000/child/3 years

5. **What happens to the clients as a result of the service?*** 50 children enter kindergarten with no developmental delays as indicated on standardized tests during the first month of school.

6. **What does it cost per outcome?*** $900,000/50 children = $18,000/child/3 years

7. **What's the value of a successful outcome?** Savings of $3,000 per year per child for education services after entry into public school.

8. **What is the return on the $900,000 investment?**

A. Rate of Success $\frac{50 \text{ successful students}}{100 \text{ students}} = 50\%$ ROI

B. Absolute ROI

1. 50 students x $3,000 = $150,000 Gross ROI (year 1)
2. $150,000 - 900,000 = -$750,000 Net ROI (year 1)

C. Ratio $\frac{150,000}{900,000} = \frac{.16}{1}$ Relational ROI

- First year return is less than the investment. This program has an 8 year payback period
- $3,000 x 11 grades = $33,000 per child over 11 years
  1. 50 x $33,000 = $1,650,000 Gross ROI (over public school lifetime)
  2. $1,650,000 - $900,000 = $750,000 Net ROI (public school lifetime)

$\frac{1,650,000}{900,000} = \frac{1.83}{1}$ Relational ROI (over public school lifetime)

*Adapted with permission Reginald Carter: *The Accountable Agency*, Sage Human Service Guide 34; 1983

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Exercise Two
Select a Client-level Program. Answer the Eight Key Questions for that Program.

Program Title: **ROI Model**

How many clients are you serving?* Who are they?*				
What services do you give them?*	Service #1	Service #2	Service #3	Service #4
What does it cost?*				
What does it cost per service delivered?*				
What happens to the client as a result of the service?*	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:
What does it cost per outcome?*	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:
What is the value of a successful outcome?	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:
What is the return on the investment?	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:

***Source: Based on materials provided by Reginald Carter:** *The Accountable Agency*, Sage Human Service Guide 34; 1983

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ROI Changes The Way We Think About Human Services

If you are making an investment, the investor expects something back!

This is a shift in expectations from entitlement or a guaranteed benefit to the privilege or establishing conditions for receiving a benefit. This can apply to client level, agency level and community level outcomes.

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Who are Investors?
What is their Expected Return?

Government (Federal, State, Local)

Expected return—Decreased expenditures, increased self-sufficiency.

Taxpayers

Expected return—Funds used efficiency and effectively, people work for benefits, people not idle.

Funders (Government, Foundations, Charities, United Way, Donors)

Expected return—Funds well managed, funded programs and services have a measurable impact on client and community.

Legislators

Expected return—People less dependent, more self-sufficient, increased services with less funds, i.e., do more for less.

Agencies (Staff and Volunteers)

Expected return—Leverage community dollars, form collaborative ventures and partnerships to better serve client and community.

Clients

Expected return—Improve their well-being, be less dependent on public and private support services.

It is helpful to recognize and identify where returns are common among the investors. This can result in less work for the agency since similar returns can be determined and meet the needs of multiple investors.

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Example of Welfare to Work ROI that Identifies Investors, Outcomes, and ROI for Programs and Services

Investor	Outcome	Return Calculation
Federal Government	Reduction in caseload Employment	$ saved or avoided tax $ generated exceeding expenditures
State Government	Reduction in caseload Employment	$ saved or avoided tax $ generated exceeding expenditures
Local Government	Increase in economic development, job creation	Increased economic activity in community
Business Sector	Qualified workers to fill job vacancies	Productivity and profit compared to training costs.
Non-profit	Graduation from job training program	Education leads to employment.
Legislator	Job training program policy changes results in changed people's behavior	Employment Program budget generates additional savings from reduced caseload
Taxpayer	Efficient and effective use of funds Clients off welfare and working (reduced caseload)	Increased productivity demonstrating increased self-sufficiency and less dependency on government
Foundation	Innovative technologies result in improved service delivery and reduction in dependency	Cost of technologies less than benefits derived.
Agency	Reduced client dependency on public and private human services system	Increased positive outcomes (less dependency, increased self-sufficiency)
Client/Family	Increased income, employment benefits, less use of subsidized programs	Earned income greater than unearned income.

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Exercise Three
Select a Community-level Program. Answer these Key Questions for that Program.

Program Title:

ROI Model

Who is the investor?	Investor #1	Investor #2	Investor #3	Investor #4
What is the activity, strategy, or intervention?				
What does the activity, strategy, or intervention cost?				
What is the outcome? (What happens as a result of the activity?)	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:
What does it cost per outcome?	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:
What is the value of a successful outcome?	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:
What is the return on the investment?	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:	Outcome 1: Outcome 2:

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Cautions for Using ROI*

- Harder-to-serve populations may have lower ROI than easier-to-serve populations.
- Non-financial factors may outweigh the economic value and ROI for some expenditures.
- Community data sources and quality vary, making ROI hard to compare between communities. Pre- and Post-test comparisons may be impossible because of lack of data.
- ROI is an approximation tool. To remain credible, use conservative measures; stick to things you can defend.
- Industry calculates ROI on an annual basis; be careful not to extrapolate short-term program results into long-term savings. Programs with statutory requirements may throw off calculations.
- Costs to assemble data (as variables in ROI calculations) may outweigh program costs.
- Ability to measure and document results varies from agency to agency and program to program, producing different quality of ROI Analyses.

*Source: Dennis Benson: Return on Inve$tment-Guidelines to Determine Workforce Development Impact, Appropriate Solutions, 1996, Used with permission.

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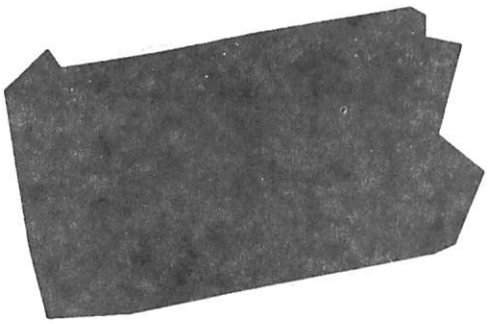
Chester County Office of Aging, PA

Steven Founds, Director, Founds Funeral Home, West Chester, PA

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Appendix 7—Technical Assistance and Resources and Reporting Tool

This appendix contains an example of how one state structured outcome reporting compatible with Section O of the IS Report that is completed annually by States. Also, included is a list of training and technical assistance resources and a lexicon of commonly used terms that may be useful to agencies implementing ROMA.



PENNSYLVANIA

Outcome Measures and Results....
CSBG Reporting Format For Completing
Section 0

September, 1998

INSTRUCTIONS FOR SECTION 4

Outcome Measures and Results

There has been a national trend to ensure that all government programs be assessed in a more business like fashion. In the 1994 re-authorization of the CSBG, states were asked to secure from all grantees community action plans that included a "a description of outcome measures to be used to monitor success in promoting self-sufficiency, family stability and community revitalization."

In August of 1994, Don Sykes, the director of the Office of Community Services (OCS), after meeting with the executive directors and Board of Directors Chairs of NASCSP and the National Association of Community Action Agencies created the Monitoring and Assessment Task Force (MATF). The MATF was established to enhance and improve the capacity of the Community Services Network in assisting low-income people. The major product of the MATF, a program of Results-Oriented Management and Accountability (ROMA), serves as a way for the Community Services Network to respond to a number of forces seeking to measure and improve government performance.

The cornerstone of ROMA is a set of six goals as shown in the following chart:

LEVEL	OCS GOAL	GOAL STATEMENT
Family	Goal 1	Low-income people become more self-sufficient.
Family	Goal 6	Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other supportive environments.
Community	Goal 2	The conditions in which low-income people live are improved.
Community	Goal 3	Low-income people own a stake in their community.
Agency	Goal 4	Partnerships among supporters and providers of services to low-income people are achieved.
Agency	Goal 5	Agencies increase their capacity to achieve results.

In 1997, a Task Force of representatives of local agencies from Pennsylvania and DCED agreed on a selected number of measures which all Pennsylvania community action agencies could report on. The reporting forms show these measures (in abbreviated form) on the page which refers to the appropriate national goal. Every agency in Pennsylvania is asked to report on these measures in addition to those measures the agency submits as its outcome objectives in the single application format to DCED. *If a measure on the form does not apply to your agency, type "0" (zero) in the blank spaces next to the measure*. Use additional sheets as necessary to list all the outcome objectives in your 1998 workplan as submitted to DCED. The complete listing of the Task Force's selected measures for Pennsylvania, with specific instructions, follows the general instructions for this section. Please refer to the definitions in this section when completing your report.

Preliminary steps before entering data into the table:

- Decide how to classify each objective within your Single Application Addendum (the workplan your agency mails to the state office). Determine its primary outcome level, then assign it to whichever of the six ROMA Goals it most closely matches. Unlike service categories, where all the objectives of a single program might fit into one service category, a single program may produce family, agency and community level outcomes—requiring reporting under different ROMA goals.

- **Define the units carefully, paying particular attention to outcome levels.** Family level goals will be measured using units that are some form of "warm body count." For example, families, households, participants, enrollees, clients, consumers and individual are all units commonly seen at the family level. Community level goals measure change in systems or conditions, and the community units can be wards, boroughs, townships, counties, SMSAs or neighborhoods. Agency level goals measure changes in capacity or performance, and units may be programs, employee groups, departments, or projects.

- Establish the total pool of service recipients for each objective. If appropriate, distinguish hard-to-serve client pools from pools of clients with general characteristics.

- If you choose to add optional measures which reflect additional work of your agency, please define the units very specifically. Whenever possible, use the words and corresponding definitions provided in this section.

- When writing the workplan which precedes this reporting process, some agencies find it difficult to estimate the number of positive outcomes which will occur during the fiscal year. Remember that modification of contracts is possible during the contract year. Give your best estimate.

General Instructions for using the prepared forms

Measure. This column asks for the description of particular measures to be used to identify progress toward a particular goal. In addition to the measures developed by the Pennsylvania ROMA Task Force agencies are encouraged to develop their own measures. For example, one might measure the number of students who were able to stay with their age group in school or the number of neighborhoods where municipal services were delivered with increased regularity.

Definition of the units to which this measure applies. This column asks for whom the measure has been applied. For example, if the measure was the number students who were able to stay with their age group in school, this column might read "all teenagers in the summer work/study program who did not progress to the next grade level at the end of the spring school term." If the measure was the number of neighborhoods were

municipal services were delivered with increased regularity, this column might read, "wards without regular weekly trash collection or street cleaning/snow removal."

# of such units. This column asks how many units (people, families, homes, organizations, etc.) meet the definition of those for whom a specified measure applies. The entry in this column represents your agency's total pool of units receiving a specific service. In the following chart, if there are 200 people participating in job-training programs in the agency reporting, then the entry in this column would be 200. If trash pick up and street cleaning/snow removal occurred sporadically in wards 99-118, 144, and 210, the entry in this column would be 21. If 40 teenagers in the summer work/study program did not progress to the next grade level at the end of the spring school term, the entry in this column would be 40.

# of units achieving this result. This column asks how many of the units (which meet the stated definition) achieved the specified result. For example, if 20 of the 200 people in the job-training programs obtained and maintained full-time employment for 90 days or more, then the entry in this column would be 20. If trash pick up and street cleaning/snow removal occurred weekly in 4 neighborhoods, the entry for this column would be 4. If at the end of the summer work/study program, 14 teenagers improved their test scores sufficiently to be promoted to the next grade level, the entry in this column would be 14.

For the examples described above, the chart would be filled out as follows:

Measure:	Definition of units for whom this measure applies	# of such units	# of units achieving this result
the number of people obtaining and maintaining full-time employment for 90 days or more.	All participants in job-training programs.	200	20
the number of neighborhoods where municipal services were delivered with increased regularity	All wards without regular weekly trash collection and street cleaning/snow removal.	21	4
the number of students able to remain with their age group in school	All teenagers in the summer work/study program who did not progress to the next grade level at the end of the spring school term	40	14

If you need more space than provided in the charts, please feel free to attach additional pages.

Pennsylvania's ROMA Task Force Measures

The following pages contain measures developed by Pennsylvania's ROMA Task Force and staff at DCED. Definitions for the terms used in the Task Force measures are

included in this section, as well as general discussion about the intention of the measures. Please note:

- All agencies are required to report on these measures, *but that does **not** mean that DCED is requiring all agencies to provide services which produce reports for each measure under Goals 1,2,3, and 6.* Quite simply, the goal is to attain 100% uniformity in reporting (not in service provision). In other words, if your agency does not provide health and wellness services, just type *"0" (zero)* in the third column (total # of units under 125% of poverty receiving services) on page 5, Measure E.
- Once you have determined the LEVEL (family, agency, or community) of outcome for a measure your agency has selected, do not agonize over which of the two national goals the measure belongs under. Place the measure under the goal that makes the most sense for your agency.
- Where relevant, a summary of the Task Force's deliberations occurs with relation to the discussion of the specific measures chosen.
- The service category (Section 2) is noted in parenthesis following each measure.
- All agencies are expected to have numbers other than "0" (zero) for the Agency level measures noted under Goals 4 and 5.

Goal 1. Low-income people become more self-sufficient.

Pennsylvania's ROMA Task Force selected employment measures for this goal family-level goal. The measures try to separate successful employment outcomes for participants in the agency's employment programs (Measures A and B) from participants in other agency programs (Measure C). There are several reasons for these distinctions. First, from the national perspective, many community action agencies provide services for the nation's working poor, and many of the services help persons maintain the employment they already have. For example, many agencies provide child care or transportation services specifically so parents can maintain employment. This is a very important part of the community action story. Secondly, in this era of welfare reform, obtaining a job is an important indicator, and keeping that job for longer than 60 days is very important; the Task Force chose the 90-day time period because it is the industry standard of the predictor of continued steady employment. Please refer to the definitions on pages 46-49 for specific interpretations.

A. Of the ____participants enrolled in the agency's employment programs, ____participants obtain employment. (Employment)
B. Of the ____participants who obtain employment through the agency's employment programs, _____participants maintain the employment for at least ninety days. (Employment)

On the reporting form for Goal 1, the first column states the measures selected by the PA ROMA Task Force, as well as providing blank areas for you to add additional measures which you submitted in your CSBG Single Application to DCED. You should list all the objectives in your workplan that pertain to this goal, adding additional sheets if necessary. Do not delete the PA ROMA Task Force measures, even if your agency does not provide services that yield these results. Do not edit the PA ROMA Task Force measures to fit something your agency already does. Use the blank spaces to add the measures which fit your agency's definitions if those conflict with the wording or definitions of the PA ROMA Task Force.

The second column provides a limited definition of the units to which this measure applies. Please refer to the definitions on pages 46-49 for more detailed and specific interpretations. Do not edit the definitions provided by the PA ROMA Task Force. Use the additional blank spaces to supply definitions that conform to your agency's definitions if they differ from those of the Task Force.

The third column is used to show the total number of units receiving services under 125% of poverty. This includes units served directly with CSBG as program funding AND units served by program funding sources other than CSBG where CSBG is used to cover administrative expenses and functions. The units should match those submitted to DCED in your CSBG Single Application workplan. If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

The fourth column is the place where your agency will enter the number of positive outcomes achieved (from both CSBG-program funds and other program funding sources where CSBG is used to cover administrative expenses and functions). If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

The fifth column is the total of all units receiving the services—both over and below 125% of poverty. If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

The last column shows the total number of positive outcomes of all units served. If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

Goal 2. The Conditions in which low-income people live are improved.

The Pennsylvania ROMA Task Force selected a variety of measures which interpret "community" in various ways. In Measure A, agencies can capture housing outcomes for programs as different as weatherization, senior citizen home repair, community revitalization, and community lending program. Agencies are free to define "community" in a way that makes sense for each individual program. Sometimes a rehabilitation

project which renovates an old factory into a multi-unit apartment building is specific to a neighborhood; other times a weatherization program targets an entire county.

Measures B through D (highlighted in italics below) define community as the entire Commonwealth of Pennsylvania. **Measures B through D will be reported on only by the Community Action Agency of Pennsylvania** (the only agency with state-wide jurisdiction). The flexibility to define "community" so broadly becomes important when we remember that we are part of a national reporting system; most states have at least one agency that has state-wide jurisdiction. Many of these state-wide agencies work on public policy, systems change, or capacity building activities for the state's subgrantees. In other words, these agencies do not serve low-income clients directly, so another vehicle is necessary to explain the outcomes of the work they do.

A. Of the ____targeted communities, ____communities realized an increase in the assessed value of homes by $ ____as a result of rehabilitation projects. (Housing)

B. The proportion of state funds available for meeting emergency and long-term needs of the low-income population increased by ____%.
C. The proportion of federal funds available for meeting emergency and long-term needs of the low-income population increased by ____%.
D. The proportion of state funds available for meeting emergency and long-term needs of the low-income population decreased by ____%
E. The proportion of federal funds available for meeting emergency and long-term needs of the low-income population decreased by ____%.

F. Of the ___targeted communities, ___communities realized an increase in low-income people's access to community services and resources. (Linkages)
G. *OPTIONAL*: Other outcome measures specific to the work of your agency.

On the reporting form, the first column states the measures selected by the PA ROMA Task Force, as well as providing blank areas for you to add additional measures which you submitted in your CSBG Single Application to DCED. You should list all the objectives in your workplan that pertain to these goals, adding additional sheets if necessary. Do not delete the PA ROMA Task Force measures, even if your agency does not provide services that yield these results. Do not edit the PA ROMA Task Force measures to fit something your agency already does. Use the blank spaces to add the measures which fit your agency's definitions if those conflict with the wording or definitions of the PA ROMA Task Force.

The second column provides a limited definition of the units to which this measure applies. Please refer to the definitions on pages 46-49 for more detailed and specific interpretations. Do not edit the definitions provided by the PA ROMA Task Force. Use the additional blank spaces to supply definitions that conform to your agency's definitions if they differ from those of the Task Force. For measures A and B, fill in the names of the

communities you report in numerical form in column 3. Use additional sheets if necessary.

The third column is used to show the total number of units receiving services under 125% of poverty. This includes units served directly with CSBG as program funding AND units served by program funding sources other than CSBG where CSBG is used to cover administrative expenses and functions. The units should match those submitted to DCED in your CSBG Single Application workplan. If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

The fourth column is the place where your agency will enter the number of positive outcomes achieved (from both CSBG-program funds and other program funding sources where CSBG is used to cover administrative expenses and functions). If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

The fifth column for Goal 2 allows you to state a dollar value of increased value for homes. Using the definitions found on pages 47 and 48 which apply to this measure, enter the dollar amount of materials installed in the residence and the labor it took to install them. Include materials and labor that are received as in-kind contributions. If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

Goal 3. Low-income people own a stake in their community.

This national goal separates the concept of "ownership" from "conditions" in the community. Literal interpretations of ownership involve various forms of real estate, home ownership, length of residency, and small business ownership. Broader interpretations of ownership extend to demonstrated behaviors of commitment by individuals on behalf of the community to which they belong). The Pennsylvania ROMA Task Force looked at the broader interpretation and merged those concepts with tradition community action activities for mobilizing people as a resource within the community. This goal will be helpful in reporting outcomes for agencies which help organize blocks, train individuals for service on advisory and governing boards, foster development of independent neighborhood-based programs (such as food pantries, clothes closets, mentoring, and community watch), and intervene with other non-profits (such as the United Way, the Red Cross, or the Salvation Army) to include low-income people directly in policy making activities.

A. Of the ___targeted communities, ____communities increased or maintained the participation of low-income people in advocacy and intervention activities regarding funding levels, distribution policies, oversight, and distribution procedures for programs and funding streams for their community. (Linkages)
B. Of the ____targeted communities, ____communities realized an increase in low-income people's participation in community service groups. (Linkages)

C. *OPTIONAL*: Other outcome measures specific to the work of your agency.

On the reporting form, the first column states the measures selected by the PA ROMA Task Force, as well as providing blank areas for you to add additional measures which you submitted in your CSBG Single Application to DCED. You should list all the objectives in your workplan that pertain to these goals, adding additional sheets if necessary. Do not delete the PA ROMA Task Force measures, even if your agency does not provide services that yield these results. Do not edit the PA ROMA Task Force measures to fit something your agency already does. Use the blank spaces to add the measures which fit your agency's definitions if those conflict with the wording or definitions of the PA ROMA Task Force.

The second column provides a limited definition of the units to which this measure applies. Please refer to the definitions on pages 46-49 for more detailed and specific interpretations. Do not edit the definitions provided by the PA ROMA Task Force. Use the additional blank spaces to supply definitions that conform to your agency's definitions if they differ from those of the Task Force. For measures A and B, fill in the names of the communities you report in numerical form in column 3. Use additional sheets if necessary.

The third column is used to show the total number of units receiving services under 125% of poverty. This includes units served directly with CSBG as program funding AND units served by program funding sources other than CSBG where CSBG is used to cover administrative expenses and functions. The units should match those submitted to DCED in your CSBG Single Application workplan. If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

The fourth column is the place where your agency will enter the number of positive outcomes achieved (from both CSBG-program funds and other program funding sources where CSBG is used to cover administrative expenses and functions). If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

Goal 4. Partnerships among supporters and providers of services to low-income people are achieved.

This agency level goal seeks to uncover the outcome of an actual partnership agreement, and the Pennsylvania ROMA Task Force chose to focus on two possible outcomes. Measure A asks for information about partnerships which provide an essential element of service delivery for low-income people. An example of a continuum of care for housing would be: interventions for homeless people living on the street, homeless shelters, transitional housing, bridge housing, on-going case management for individuals in subsidized housing, on-going case management for individuals in non-subsidized housing, independent living, and home ownership. The community action agency (CAA)

may not be the direct provider of a particular service, but the partnership agreement establishes the CAA's relationship or role to the service provider.

Measure B is an attempt to capture information about partnerships which address the service-delivery needs of non-dominant society members. Such partnership agreements may include, but are not limited to, techniques which include multi-lingual and multi-cultural approaches, alternative service sites (including homes), modified facilities to accommodate persons with physical and mental disabilities and limitations, and service schedules and deadlines that honor religious and cultural variations.

A. Of the ____partnerships established and/or maintained between the agency and other public and private entities, ____partnerships ensured a more complete continuum of care for low-income people. (Linkages)
B. Of the ____partnerships established and/or maintained between the agency and other public or private entities, ____partnerships ensured that ethnic, cultural, and special needs considerations of low-income people in the service delivery area were met. (Linkages)
C. *OPTIONAL*: Other outcome measures specific to the work of your agency.

For reporting purposes, partnerships are documented agreements that specify relationships among the parties related, included, but not limited to, client emergency services and case management, core programs and additional services, fiscal responsibility, distribution of cash and in-kind resources, collaborative training and educational efforts, and shared strategic planning. A contract to distribute FEMA funds could be counted as a partnership for Goal 4, Measure A. The dollar value of the FEMA funds would be entered in column 3 of Goal 5, Measure A.

A letter of commitment for your agency to provide a bi-lingual, bi-cultural staff member to a community task force could be a partnership counted in Goal 4, Measure B.
Special needs considerations are those which enhance the participation of non-dominant society members in the service delivery system by techniques which include multi-lingual and multi-cultural approaches, a variety of service sites (including homes), modified facilities to accommodate persons with physical and mental disabilities, limitations, and service schedules and deadlines that accommodate religious and cultural differences.

Goal 5. Agencies increase their capacity to achieve results.

This measures under this agency level goal seek to use traditional indicators of capacity to tell the community action story. One important part of the story is the way CSBG is used to influence the way other monies are spent in the community regarding the needs of low-income people. Measure A is an attempt to show the financial relationship of CSBG funds to other dollars in the agency budget. Measure B is an attempt to show the multiple sources of funding and their overall financial impact. Measure C is an attempt to show that the dollars are targeted for specific purposes.

A. Of the total agency budget of $____, $_____were mobilized through partnerships with other public and private agencies, resulting in the mobilization of non-CSBG resources at a ratio of ____non-CSBG dollars to each $1 of CSBG. (Linkages)
B. Of the total number of ____funding sources at year end, ____funding sources are new this CSBG contract year. The level of total agency resources:
Increased from $_____ to $_____ OR
Decreased from $_____ to $_____ (Linkages)
C. Of the total number of ___programs operated by the agency, ___programs were targeted to meet the needs of special populations. (Linkages)
D. *OPTIONAL*: Other outcome measures specific to the work of your agency

For reporting purposes, partnerships are documented agreements that specify relationships among the parties related, included, but not limited to, client emergency services and case management, core programs and additional services, fiscal responsibility, distribution of cash and in-kind resources, collaborative training and educational efforts, and shared strategic planning. A contract to distribute FEMA funds could be counted as a partnership for Goal 4, Measure A. The dollar value of the FEMA funds would be entered in column 3 of Goal 5, Measure A.

A letter of commitment for your agency to provide a bi-lingual, bi-cultural staff member to a community task force could be a partnership counted in Goal 4, Measure B. Special needs considerations are those which enhance the participation of non-dominant society members in the service delivery system by techniques which include multi-lingual and multi-cultural approaches, a variety of service sites (including homes), modified facilities to accommodate persons with physical and mental disabilities, limitations, and service schedules and deadlines that accommodate religious and cultural differences.

- To determine the ratio figure requested under Goal 5, Column 4, Measure A, divide the total amount of CSBG funds your agency receives by the total amount of non-CSBG resources your agency utilizes to fulfill the agency's annual objectives, including in-kind resources, cash, and cash equivalents.

Goal 5, Measure B, requests total funding sources. For this measure, count the total funding streams from which resources, both cash and in-kind, are received, (not the entity from which the check is written). For the purposes of Goal 5, Measure B, if an agency receives an NAA grant, an ECC grant, and a CSBG allocation all from DCED, the total number of funding sources is 3. Similarly, if an agency receives an emergency shelter grant from the United Way, and a second grant to support a summer youth camp, the agency would list 2 funding sources.

When calculating the level of funding changes from one year to another, use the last day of the CSBG grant period as your cut off point to determine total number of funding sources and levels of funding. Remember to include all cash, in-kind, and cash equivalents awarded to the agency during the CSBG grant period. Please also be honest

when reporting your funding levels. It is important to show that often we increase the number of funding sources without increasing the total level of funding because the new funding sources offset cut backs from some traditional sources.

Measure C asks for the number of programs which offer activities and strategies designed to ameliorate the problems of non-dominant society members. For the purpose of this sections, a "program" is operated by the agency if the agency bears responsibility for personnel (including volunteers) resources, records management, and financial audit; regularly reports activities to its governing body. Special populations are non-dominant society members whose participation in the service delivery system is limited by access issues including, but not limited to: language, mobility, culture, physical ability, mental ability, age, and literacy. "Special needs populations" is used interchangeably with "vulnerable populations." Senior citizens, non-English speakers, physically challenged individuals, and adults without a fourth-grade reading capability can all be considered special needs, or vulnerable, populations.

Goal 6. Low-income people, especially vulnerable populations, achieve their potential by strengthening family and other support systems.

The Pennsylvania ROMA Task Force chose to place all non-employment family-level outcomes in this section. The range of measures spans the service categories listed in Section 2. Please remember that if your agency does not provide services which result in any of the following outcomes, simply type *"0" (zero)* in the blank space on the reporting format next to that measure.

A. Of the ____households which seek emergency services from the agency, ____households have their emergency needs ameliorated. (Emergency Services)
B. Of the ____ households in the agency's programs who are homeless or living in transitional housing, ____households acquire stable housing. (Emergency Services)
C. Of the ____participants enrolled in the agency's instructional /educational programs, ____participants achieved the educational goals. (Education)
D. Of the ____number of elderly participants enrolled in the agency's senior service programs, ____participants maintained independent living for at least ninety days. (Linkages)
E. Of the ____number of participants enrolled in the agency's health and wellness programs, ____participants improved and/or maintained their desired health status. (Health)
F. *OPTIONAL*: Other outcome measures specific to the work of your agency.

On the reporting form for Goal 6, the first column states the measures selected by the PA ROMA Task Force, as well as providing blank areas for you to add additional measures which you submitted in your CSBG Single Application to DCED. You should list all the objectives in your workplan that pertain to this goal, adding additional sheets if necessary. Do not delete the PA ROMA Task Force measures, even if your agency does not provide services that yield these results. Do not edit the PA ROMA Task Force measures to fit something your agency already does. Use the blank spaces to add the measures which fit

your agency's definitions if those conflict with the wording or definitions of the PA ROMA Task Force.

The second column provides a limited definition of the units to which this measure applies. Please refer to the definitions on pages 46-49 for more detailed and specific interpretations. Do not edit the definitions provided by the PA ROMA Task Force. Use the additional blank spaces to supply definitions that conform to your agency's definitions if they differ from those of the Task Force.

The third column is used to show the total number of units receiving services under 125% of poverty. This includes units served directly with CSBG as program funding AND units served by program funding sources other than CSBG where CSBG is used to cover administrative expenses and functions. The units should match those submitted to DCED in your CSBG Single Application workplan. If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

The fourth column is the place where your agency will enter the number of positive outcomes achieved (from both CSBG-program funds and other program funding sources where CSBG is used to cover administrative expenses and functions). If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

The fifth column is the total of all units receiving the services—both over and below 125% of poverty. If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

The last column shows the total number of positive outcomes of all units served. If your agency does not provide services which produce outcomes which match the state measure using the definition supplies, type "0" (zero) in this column.

SECTION 4 TERMINOLOGY

Basic Definitions *(in the order the words appear in the reporting format)*

Participants: the actual person(s) undertaking activities in the agency's program (not the total number of people who live in that person's household)

Enrolled in the agency's programs: agency has a full demographic set of data, an income eligibility determination completed, and documentation of specific program related activities in a client file. The file can be electronic or paper or both or a portion of both. (For food pantry and distribution programs, a self-declaration of need form is adequate.)

Obtain employment: previously unemployed person obtains a job.

Job: an employment situation which meets these minimal criteria: continuously available, paid 20 hours or more per week, at least minimum wage. (Continuously available means that within the context of the local economy, the job exists for the worker to access. For example, seasonal employment is accessible within the context of specific industries and agricultural operations.)

Regular earned income from employment: someone in the household receives income from a job. (The person(s) actually receive payment from the employer; **do not** count work in exchange for welfare benefits.)

Enhanced or maintained employment: the conditions of employment improved, or minimally did not fall below the initial level; for example, a person working part-time may get a full time job; a full time job without benefits may change to a hull time job with benefits; a full time employee may receive a raise or promotion.

Employment support services: temporary or long-term assistance including child care, transportation , educational services, and medical needs that help enhance or maintain employment Services can be provided either directly or indirectly.

Self-sufficiency: the person's perception of whether he/she has a greater ability to maintain oneself/family without outside aid

Targeted communities: a community is not necessarily restricted by established geographic or legal boundaries. The term "community" can be used to describe any grouping of individuals who share common distinguishing characteristics (including residency)

Homes: where people live (their primary residence)

Assessed value: $ amount of materials installed in a residence and the labor it took to install them. Materials and labor received as in-kind contributions should be included in this total.

Rehabilitation projects: actual structural changes to a building, residence, or facility

Emergency needs: any problem determined to be threatening individual and family stability at the tome it is presented (examples include food pantries, utility assistance, rental assistance)

Low-income: persons at or below 125% of the federal poverty guidelines.

Access: an increase of available resources or a means to acquire available resources

Community services and resources: activities that improve the conditions in which low-income people live

Participation: positive, constructive activities of serving

Community service groups: organizations which provide services that improve the conditions in which low-income people live

Partnerships: documented agreements that specify relationships among the parties related, included, but not limited to, client emergency services and case management, core programs and additional services, fiscal responsibility, distribution of cash and in-kind resources, collaborative training and educational efforts, and shared strategic planning

Continuum of care: coordination of services leading to self-sufficiency for individuals and families

Special needs considerations: participation of non-dominant society members in the service delivery system are enhanced by techniques which include multi-lingual and multi-cultural approaches, a variety of service sites (including homes), modified facilities to accommodate persons with physical and mental disabilities and limitations, and service schedules and deadlines that accommodate religious and cultural differences

Service delivery area: geographic area targeted by the agency

Agency budget: a dollar value of the total resources planned and utilized to fulfill the agency's annual objectives, including in-kind resources, cash, and cash equivalents

Mobilized: made available to support the activities of the agency

Funding sources: the funding stream from which resources, both cash and in-kind, are received, (not the entity from which the check is written). For the purposes of Goal 5, Measure B, if an agency receives an NAA grant, an ECC grant, and a CSBG allocation all from DCED, the total number of funding sources is 3. Similarly, if an agency receives an emergency shelter grant from the United Way, and a second grant to support a summer youth camp, the agency would list 2 funding sources.

Year end: the last day of the grant period

Agency resources: all cash, in-kind, and cash equivalents awarded to an agency during the CSBG grant period

Programs operated by the agency: agency bears responsibility for personnel (including volunteers) resources, records management, and financial audit; regularly reports activities to its governing body

Seek assistance from the agency: a representative of/for the household makes a request for service

Special populations: non-dominant society members whose participation in the service delivery system is limited by access issues including, but not limited to: language, mobility, culture, physical ability, mental ability, age, and literacy. "Special needs populations" is used interchangeably with "vulnerable populations."

Vulnerable populations: see "special populations" above

Acquire: gain or obtain the rights for occupancy on a rental, barter, or purchase agreement

Stable housing: safe, permanent, and long-term residence where the length of occupancy is determined by the client without limitations

Instructional programs: classes, workshops, tutoring, and all formal training that improves the capabilities of individuals/families to make positive decisions concerning their health stability, and well being. Examples include parenting, life skills, budget counseling, adult basic education, GED, energy education, consumer education, tutoring, etc.

Educational support programs: temporary or long-term assistance including child care, transportation, tuition, financial assistance and medical needs that enhance or maintain a person's ability to participate in educational endeavors

Elderly: ages 55 or above

Senior service program: Include, but are not limited to, senior centers, medical assistance programs, meals on wheels, home rehabilitation, chore service, homemaker services, respite care, visiting nurses, and weatherization

Maintained independent living: able to remain in residence of choice

Health and wellness programs: Include, but are not limited to, mental health, anti-drug and alcohol, smoking cessation, parenting, domestic anti-violence, socialization, and maintaining custody.

Improved or maintained desired health status: a physical or mental health condition is ameliorated; preventative steps are taken to avoid future crisis situations, desired physical or mental health conditions do not deteriorate

1996 FUNDED T&TA GRANTEES

FY 96 Training, Technical Assistance, and Capacity Building Grant Summaries

Community Action Association of PA
222 Pine Street
Harrisburg, PA 17101

GRANT AMOUNT: $82,000.00

CONTACT: John A. Wilson: 717-223-1075

SUMMARY OF WORK PROGRAM: This project will facilitate five demonstration projects implementing incremental measurement systems for individual, family, and community change as a result of local agency programming. Of these two sites, one is rural and public (operated by county), and the other is urban (Pittsburgh) and private. Three sites are Head Start agencies. All sites operate a wide variety of programs, and although they are successful in developing resources for serving significant numbers of low-income people in their communities, they all report a lack of public recognition for their role. The sites will receive technical assistance and training for board members, staffs, sub-contractors, and county-level human service collaborators, as appropriate, to help agencies adopt measuring systems to meet their needs. CAAP will assure that the adopted measurement systems will yield data that can be aggregated into a template that will specify categories of in-crisis, vulnerable (at-risk), safe, stable (self-sufficient) and thriving, as specified by the CSBG Task Force on Monitoring and Assessment.

Iowa Department of Human Rights
Capitol Complex
Des Moines, IA 50319

GRANT AMOUNT: $75,000.00

CONTACT: Kathy Hamilton 515-281-3791

SUMMARY OF WORK PROGRAM: The Iowa Division of CAA will develop a statewide, comprehensive, automated system of performance-based management for the activities of the CAA Network to:

1. Measure CAA outcomes;
2. Provide data on direct effects of CAA services and activities on the lives of families;
3. Document incremental changes in individuals, families, and the community;
4. Train system users throughout the state;
5. Involve lead CAAs as a Network of support for statewide implementation; and
6. Refine programming to automate the system.

Department of Social Services
730 East Broad Street
Richmond, VA 23210

GRANT AMOUNT: $156,516.00

CONTACT: J. Mark Grigsby 804-692-1895

SUMMARY OF WORK PROGRAM: This grant will enable Virginia to involve the entire Community Action Network in furthering the capacity of the CAA to deliver and manage services to low income people by developing and implementing peer monitoring replicating successful demonstration project; and continuing outcome measures and fiscal work groups. These pilot projects are being supported to look at community and family matrices. The State CSBG application and report packages are being revised and

introductory training on ROMA and return-on-investments is being conducted.

National Association of Community Action Agencies
1100 17th Street, NW, Suite 500
Washington, DC 20036

GRANT AMOUNT: $900,000.00

CONTACT: John Buckstead 202-265-7546

SUMMARY OF WORK PROGRAM: The purposes of this grant are to develop and implement a three-year training and technical assistance program for state and regional associations of CAAs and other CSBG-eligible entities. Training and Technical Assistance programs will address staff and board of directors' development, ROMA, program development, and organizational development. NACAA will make grants available, review proposals, monitor grants, and disseminate information regarding the training and technical assistance efforts throughout the Community Services Network.

National Association for State Community Services Programs
444 North Capitol Street, NW, Suite 221
Washington, DC 20001

GRANT AMOUNT: $325,000.00

CONTACT: Julie Jakopic, 202-624-5866

SUMMARY OF WORK PROGRAM: NASCSP will conduct a series of efforts to be completed over a 12 month period to collect and disseminate data describing the CSBG and the conditions of poverty experienced by those served by the program. These efforts include collecting and disseminating accurate comparable data describing the CSBG, preparing a detailed statistical report and a broad scope educational report, developing reports on the CSBG its relationship to poverty and other poverty programs in the United States, evaluating and facilitating efforts to develop and implement outcome measurement and results oriented management, as well as innovative programs for the CSBG, providing training and technical assistance to the State CSBG offices, and providing to the community services Network applicable research regarding conditions of poverty and background data for framing program outcomes and planning.

State of California
700 No. 10th Street, Room 258
Sacramento, CA 95814

GRANT AMOUNT: $84,737.00

CONTACT: Michael Micciche 916-323-8694

SUMMARY OF WORK PROGRAM: The California Department of Community Services and Development (CSD) and the statewide Network of service providers have developed and implemented a system of scales used in measuring outcomes of interventions by members of the Network in their local communities. This three tier scaling structure examines outcomes at the family, community, and agency levels, and is fully consistent with the six national goals adopted by the Task Force.

This structure:

1. Incorporates local conditions and values into outcome measures;
2. Can be fully aggregated;
3. Is flexible in accommodating a wide spectrum of outcome measures.

This model has attained a considerable acceptance; variations are in use or under consideration in at least forty "jurisdictions." This technical assistance grant will support the continued effective use and replication of this system.

Under this grant and as a guide to others using or interested in this model, CSD will:

1. Publish an account of the development and implementation of the system in California, including "lessons learned" and "best practices" identified;

2. Verify the credibility and legitimacy of the model;

3. Develop a self-assessment prototype for use by states and local agencies in conducting ongoing assessment of capacity to track and report outcomes;

4. Identify potential approaches to linking California matrix scales with outcome-based budgeting and design field test strategies for the most promising of these methodologies; and

5. Perfect a simple automated database for use by local agencies for tracking and aggregating scale-based outcomes.

Iowa Department of Human Rights
Capitol Complex
Des Moines, IA 50319

GRANT AMOUNT: $75,000.00

CONTACT: Kathy Hamilton 515-281-3791

SUMMARY OF WORK PROGRAM: The Division of Community Action Agencies has been working with the National Resource Center for Family Centered Practice of the University of Iowa to develop, as part of the standardized intake process, a system to measure outcomes of CAA programs/services. This outcome-based system provides concrete data regarding the impact of these programs on those served by CAAs. The system measures incremental changes in individual, family and community status.

This grant will allow for the following further development of this initiative:

1. Statewide use of technical development and support for the outcome measures program;

2. Expansion of the role of the National Resource Center to analyze results and assist with development of a reporting system for use at the national, state, and local levels;

3. Development of a better community needs assessment capabilities to improve CAA planning efforts;

4. Development of a statewide collaborative CAA/state support network to provide assistance to CAAs in administering the outcome measures program; and

5. Sharing of the model with other states and CAAs.

1997 FUNDED T&TA GRANTEES

FY 97 Training, Technical Assistance, and Capacity Building Grant Summaries

Community Action Association of PA
222 Pine Street
Harrisburg, PA 17101

GRANT AMOUNT: $60,277.00

CONTACT: John A. Wilson: 717-223-1075

SUMMARY OF WORK PROGRAM: The Community Action Association of Pennsylvania (CAAP) will continue and expand work with seven demonstration protects to implement incremental measurement systems for individual, family, and community change as a result of local agency programming. The second stage of the project will assist the agencies to complete the transition to ROMA by examining needs for management redefinition and reorganization, providing information and guidance on agency reorganization or reinvention, assisting sub- contract agencies to develop performance based contracts, and focus all agencies on defining results for community outcomes.

Department of Social Services
730 East Broad Street
Richmond, VA 23210

GRANT AMOUNT: $90,000.00

CONTACT: J. Mark Grigsby 804-692-1895

SUMMARY OF WORK PROGRAM: This grant will continue the work started under a pilot project to provide outcome based measurement training and to pilot an experiment with matrices with the Community Services Network in Virginia. It will provide assistance that enables local agencies to move forward to develop a working knowledge of concepts and language of outcome-based report to use tools such as scales and ladders.

National Association for State Community Services Programs
444 North Capitol Street, NW, Suite 221
Washington, DC 20001

GRANT AMOUNT: $450,000.00

CONTACT: Julie Jakopic: 202-624-5866

SUMMARY OF WORK PROGRAM: NASCSP was awarded a three year grant to conduct a series of efforts to collect and disseminate data describing the CSBG Program and the conditions of poverty experienced by those served by the program; and to improve the management practices and the expansion of ROMA. These efforts include collecting and disseminating accurate comparable data describing the CSBG, preparing a detailed statistical report, a broad scope educational report and several issue briefs; reporting on the implementation of ROMA; identifying best practice models; evaluating and coordinating efforts to develop and implement incremental scaling tools to measure of outcomes; providing training and technical assistance to the State CSBG offices, and providing, to the Community Services Network, applicable research regarding conditions of poverty and background data for framing program outcomes and planning.

1998 FUNDED T&TA GRANTEES

FY 98 Training, Technical Assistance, and Capacity Building Grant Summaries

Community Action of Nebraska, Inc.
605 S. 14th Street, Suite 412
Lincoln, NE 68508

GRANT AMOUNT: $120,000.00

CONTACT: Lorrie Benson: (402) 471-3714

SUMMARY OF WORK PROGRAM: The purpose of the project is to further develop and expand a comprehensive computerized system to measure improvements in the lives of families and individuals who participate in Nebraska CAA programs and to provide training and technical assistance to CAN members as they fully implement ROMA by refocusing all CAA programs to outcome based programs.

Pennsylvania Directors' Association for Community Action, Inc.
222 Pine Street
Harrisburg, PA 17101

GRANT AMOUNT: $ 100,000.00

CONTACT: John Wilson: (717) 223-1075

SUMMARY OF WORK PROGRAM: This is a joint project between the Pennsylvania Department of Community and Economic Development's Office of Community Empowerment (the State CSBG administering agency) and the Community Action Association of Pennsylvania (also known as the Pennsylvania Directors' Association for Community Action). The funding is to implement a year long, statewide ROMA training and technical assistance program. Outcomes will be at least 60% (26) of the State's 43 CAAs using goals and outcomes measures, use a measuring and tracking approach designed for multi-service use, track incremental change for family, community or agency conditions, and engage in developing fiscal system compatible with an outcome orientation. Products will include documentation of the impact of CSBG dollars versus other dollars used in programs and return on investment determinations of county wide collaborations. This year a Fiscal-ROMA Task Group and a Head Start-ROMA Subcommittee will be established. The 14 CAA's that sponsor Head Start programs will coordinate exchange of information and useful tools developed. This information will be shared with the wider Head Start network in PA. A core of classroom type training sessions will augment on site technical assistance for the agencies. Information will be shared with PA CAAs via newsletters, mailings, the CAAP web page and Association quarterly meetings. CAAP will disseminate lessons learned, reports on tools developed, training manuals developed, and peer to peer training curriculums to other state CAA Associations, Regional Associations, OCS NACAA and NASCSP. Information will be distributed on floppy disks, by list-servers, e-mail, and through postings on CAA network web pages.

California/Nevada Community Action Association
225 30th Street, Suite 200
Sacramento, CA 95816

GRANT AMOUNT: $28,000.00

CONTACT: Rick Breeze-Martin:
(916) 443-1721

SUMMARY OF WORK PROGRAM: The applicant is proposing a one year project designed to benefit CSBG service providers in California, Nevada and throughout the United States. The purpose of this project is to transfer proven program technology to the board of directors and staff agencies in the community services network by implementing the following steps:

a. Identifying the specific areas of training that network agency boards find most important.

b. Researching and developing information on specific CCA programs, including Head

Start children's health insurance programs through briefing, training and sharing data.

c. Providing board and staff trainings by utilizing program professionals' experience in the issue areas identified by the network including fiscal standards and accountability and the implementation and impact of the Government Performance and Results Act of 1993/ROMA.

d. Facilitating the use of on-line information systems so that network staff have timely access to resources.

The ultimate goal of the project is to build the capacity of network agencies so that agencies can better respond to a changing environment and continue to provide high quality service to low-income individuals.

Mid-Iowa Community Action, Inc.
602 East 1st Street
Des Moines, IA 50309

GRANT AMOUNT: $171,000.00

CONTACT: Magi York: (515) 752-7162

SUMMARY OF WORK PROGRAM: MICA provides peer-to-peer training and technical assistance to twelve to fifteen CAAs in Regions V and VII. MICA's aim with the proposed work program is to prevent serious agency problems from deteriorating further and/or to address problems already at the crisis level. Following identification of at risk CAAs, we will contact those agencies and invite them to receive 1) on-site agency assessment and plan development; 2)executive coaching, training and technical assistance; and 3) follow-up and evaluation. Several strategies will be utilized to determine to what extent the service rendered met the needs of the CAA, including process evaluation, customer satisfaction surveys, interviews with the Executive Director and board members, funders, staff and families served by the agency to determine T/TA impact. Finally, the project director will prepare a case study for each agency served.

Oklahoma Association of Community Action
2915 N. Classen Boulevard, Suite 215
Oklahoma City, OK 73106

GRANT AMOUNT: $25,000.00

CONTACT: Wanda DeBruler: (405) 524-4124

SUMMARY OF WORK PROGRAM: This project will train existing network in the following two areas:

a. Tracking family and community change which will demonstrate the end-results and benefits for low-income families using ROMA.

b. Addressing the healthcare needs of low-income citizens as identified in the Dialogue on Poverty.

Oklahoma is the 14th state to have its Children's Health Insurance Program (CHIP) approved and could receive as much as $81 million this year in new funds. The state plans to use its CHIP allotment to provide Medicaid coverage to children born on or after October 1, 1983 with family incomes up to 185% of the Federal Poverty Level.

National Association of Community Action Agencies
1100 17th Street, NW, Suite 500
Washington, DC 20036

GRANT AMOUNT: $300,000.00

CONTACT: John Buckstead: (202) 265-7546

SUMMARY OF WORK PROGRAM: The development and delivery of five training modules in the areas of

(1) Leadership Development; (2) Citizen Participation; (3) Community and Economic Development; (4) Results-Oriented Management and Accountability; and (5) Fundamentals of CAA Management

(includes specific topics such as financial management, personnel management, board of directors development and training, and strategic and long-range planning.) These training modules will be in-depth training opportunities. The Fundamentals of Management will last an entire week. The other four modules will last one or two days each.

a. Conducting two media training sessions.

b. Developing and disseminating to CSBG local service providers and other members of the CSBG network policy and program information that addresses CAA program areas and other issues of importance to the low-income community. This information will be disseminated through home page, network newsletter, and other methods as necessary. Disseminate a media kit to the CAA network that they can use to publicize the work they do and educate the public about the conditions of poverty.

Action for Bridgeport Community Development, Inc.
1070 Park Avenue
Bridgeport, CT 06604-3400

GRANT AMOUNT: $50,000.00

CONTACT: Charles Tisdale: (203) 366-8241

SUMMARY OF WORK PROGRAM: This project addresses ROMA Goal 5- - agencies increase their capacity to achieve results. The project activities are directed to the achievement of three primary planned outcomes.

1) CAAs will be able to objectively assess and evaluate their current level of overall organizational functioning in the critical areas of administration, program/service delivery, fiscal management, and board of directors' performance.
2) A comprehensive, exportable, training and technical assistance crisis prevention and intervention service model, including a technical assistance resource bank identifying experienced expertise from within the community services network for deployment to deliver peer technical assistance.
3) Through formal written agreement and on-site T&TA, at least four CAAs will move from organizational crisis status, to operational and service delivery efficiency and effectiveness status.

DeKalb Economic Opportunity Authority, Inc.
3597 Covington Highway
Decatur, GA 30032

GRANT AMOUNT: $60,000.00

CONTACT: Lois Burns: (404) 508-9330

SUMMARY OF WORK PROGRAM: This program is to provide peer-to-peer training and technical assistance. This project uses the expertise of individuals in local, state, regional and national organizations who provide outcome-oriented administrative, programmatic, fiscal and/or board interventions as well as legal consultation to Community Action Agencies within the Southeast Region.

The project is specifically related to ROMA Goal 4 – Assisting Agencies to Increase Their Capacity to Achieve Results.

New York State Community Action Association, Inc.
754 Fourth Avenue
North Troy, NY 12182

GRANT AMOUNT: $75,000.00

CONTACT: Sue Montgomery-Corey
(518) 238-1955

SUMMARY OF WORK PROGRAM: This project will strengthen the ability of local CAA's to identify and resolve management and fiscal challenges that deter their ability to respond effectively to an outcome-oriented environment. It recognizes that ROMA and other outcome management tools require a more integrated program environment and will emphasize peer review and peer technical assistance, which support integrated program models and

resolution of systemic barriers. The initiative will build on NYSCAA's existing peer review work, which was developed by a volunteer Peer Review Committee, and supported by New York's CSBG Administrator, the Department of State and a grant from the Office of Community Services. NYSCAA will continue to provide CAA's with Peer Reviews and will also support agencies in transition or crisis with a Support Team. Agencies that need specialized supports will be able to access expertise and resources from the NYSCAA Peer Skills Bank.

Oklahoma State Department of Commerce
2915 N. Classen Boulevard, Suite 215
Oklahoma City, OK 73106

GRANT AMOUNT: $100,000.00

CONTACT: Wanda DeBruler: (405) 524-4124

SUMMARY OF WORK PROGRAM: This project will stimulate and support the statewide CSBG network in the critical areas of planning, training, technical assistance and data collection to affect positive results for low-income people.

- Provide specialized training on ROMA Scales and/or Ladders to be utilized to measure change in the low-income family, the Community Action Agency, and the communities served.
- Investigate and identify a software program to collect data that will adequately describe outcomes.
- Purchase a software program for each CAA and provide comprehensive training.
- Implement ROMA throughout the state in the CSBG program.
- Strengthen relationships between the State, the CAA State Association, and the CAAs.
- Strengthen capacity of CAAs to collect and disseminate accurate and reliable data.
- Provide a model for other programs operated by ODOC/DCAD and the CAAs to implement a results-oriented process.

Virginia State Department of Social Services
730 East Broad Street
Richmond, VA 23219

GRANT AMOUNT: $120,000.00

CONTACT: J. Mark Grigsby: (804) 692-1895

SUMMARY OF WORK PROGRAM: This continuing project will:

- Replicate existing scales project (both family and community)
- Develop additional uses of community scale as part of the community needs assessment
- Develop an agency scale based on the Task Force's model
- Expand the ROMA Board training we began in 1997
- Support the ROMA Advisory Group who will:

1. Help review and modify reporting forms
2. Help identify training needs
3. Help develop a Web page that can offer information on Virginia's forms, pilot programs, and lessons we have learned as we implement ROMA

- Support regular meetings of the agencies developing Scales models to facilitate the sharing of information.

Iowa State Department of Human Rights
Capitol Complex
Des Moines, IA 50319

GRANT AMOUNT: $113,000.00

CONTACT: Rodney Huenemann:
(515) 281-3951

SUMMARY OF WORK PROGRAM: This project will record changes occurring for families over time and will ultimately relate family change to services provided and costs. The goal is to increase the capacity to use products and processes of ROMA and Automated Assessment of Family Progress (AAFP) within each Community Action Agency and at the state level for the purposes of management and communications.

The plan is to:

- Provide expert analysis of AAFP data

- Design reporting formats for use by CAAs as well as increase their capacity to create their own reports relating to AAFP
- Provide generalized ROMA training at the CAA agency level to CAA Executives, Program Managers, field staff, and boards
- Provide training using agency specific AAFP data as concrete example to results reporting
- Develop an increased capacity of the state CSBG office to work with AAFP data and generate reports to use in management and communication.

The use of AAFP data will enable the community services network and its funders to make better decisions about the allocation of limited resources by targeting funds to support activities producing the most desirable results for the least outlay.

New York State Community Action Association
754 Fourth Avenue
Troy, NY 12182

GRANT AMOUNT: $100,000.00

CONTACT: Sue Montgomery-Corey: (518) 238-1955

SUMMARY OF WORK PROGRAM: The purpose of the projects is to coordinate a partnership approach for the implementation of ROMA. The Rensselaerville Institute (RI), a not-for-profit educational center will partner with NYSCAA to help local CAA's staff and Board Members apply an outcome approach to improve the functions of CAA's. The functions of allocation of funds, monitoring and quality assurance and agency results will improve. RI will present regional trainings at both a Core level and an Advanced level. Planning will be guided by a Design and Steering Group. NYSCAA's existing communication system (regional meetings, Quarterly Conferences, a bi-monthly newsletter and Peer Reviews & Technical Assistance) will also support the ROMA Partnership Initiative.

This project will strengthen the ability of local CAAs to continue to progressively implement ROMA along with the scales and ladders related to measurement. The project supports CAAs at advanced, intermediate and core levels of ROMA implementation. The project will demonstrate effectiveness of programs operated by the Community Service Network and insure that data yielded is conducive to local, state and national use, by policy makers. More than 60% of New York CAAs will use goals and outcome measures effectively, and will be using a multi-service approach to measurement. Additionally, 60% of NYS. CAAs will track incremental changes for family, community or agency conditions. Progress will also be made to ensure that CAA fiscal systems are compatible with an outcome orientation.

Indiana State Family & Social Service Administration
402 W. Washington Street
P.O. Box 6116
Indianapolis, IN 46206-6116

GRANT AMOUNT: $82,000.00

CONTACT: James Hmurovich: (317) 232-4705

SUMMARY OF WORK PROGRAM: The purpose of the grant is to provide training to all 24 agencies and 10 State Consultants and Program Specialists on the ROMA process in general, and specifically on a Family Development Matrix. This training will be provided through a series of 6 locally provided training sessions. One staff member from each agency is to receive Family Development training. As agencies are identified as "in need", funding will also be used to provide additional training to assist them to improve or maintain their position on the matrix. Project tasks are divided into two separate projects, the Family Development Program and the Agency Matrix Project. They both begin and end with ROMA training and the use of ROMA scales in the implementation.

Missouri Association for Community Action, Inc.
2410 Hyde Park Road, Suite B
Jefferson City, MO 65109

GRANT AMOUNT: $82,333.00

CONTACT: Elaine West: (573) 634-2969

SUMMARY OF WORK PROGRAM: The purpose of the funding is twofold:

1) To enhance the state Community Services Network's ability to measure incremental individual, agency and community changes; 2) and to report outcomes. The Community Services Network is in need of further training on ROMA and technical assistance to develop uniform scales.

MACA will use the funds to support the following activities: provide training and technical assistance for CAA staff on ROMA; coordinate workshops to develop uniform family and community scales to be used statewide; develop a standardized training program for CAA staff; and provide financial assistance to CAAs for computer tracking of client progress toward self-sufficiency.

Oklahoma Association of Community Action Agencies, Inc.
2915 N. Classen Boulevard, Suite 215
Oklahoma City, OK 73106

GRANT AMOUNT: $75,000.00

CONTACT: Wanda DeBruler: (405) 524-4124

SUMMARY OF WORK PROGRAM: The Oklahoma Association of Community Action Agencies, in partnership with the University of Oklahoma, Center for Business and Economic Development and University of Arkansas at Little Rock, aim to provide training and technical assistance to the local community action network in the utilization of information technology. The training program will consist of a combination of lecture and hands-on experience with the Community 2020 software. Special emphasis will be placed on the use of the geographic information system (GIS) software, Community Needs Assessments and/or CSBG and Consolidated Plans. This technology will assist the 21 Oklahoma Community Action Agencies and Head Start Programs in their roles as community leaders and community-building practitioners, in learning about the new opportunities that exist for using computer based geographic information in the development of a comprehensive community needs assessment which is basic to ROMA. Emphasis will be placed on improving the skills and confidence of the individuals using Community 2020 and on facilitating their use of technology to leverage their efforts in serving their respective regions and communities.

Alabama State Department of Economic & Community Affairs
401 Adams Avenue
Montgomery, AL 36103-5690

GRANT AMOUNT: $100,000.00

CONTACT: Jean Davis: (334) 242-5442

SUMMARY OF WORK PROGRAM: The primary goal of this initiative is to obtain 100 percent Community Action Agency (CAA) participation in the ROMA process by the end of the project period. This will involve:

- Establishing an ongoing statewide peer-to-peer technical assistance network among the CAA's the Community Action Association of Alabama, and State office personnel for the purpose of implementing ROMA reporting and scales;
- Training five peer group facilitators to provide intermediate and advanced level technical assistance/problem solving to CAAs within established regions;
- Designing and implementing an outcome based reporting and monitoring system at the State office level and within the 23 CAAs that reflects the unique information needs of the CAAs, private for profit and non-profit agency partners, and local, state, and federal organizations;

- Developing outcome scales to track the incremental progress of CSN customers, CAA's and local communities;
- Establishing/validating baseline customer data at the agency level utilizing statistically significant sample surveys of the program participants; and,
- Developing training materials to be presented to new state and CAA staff members and CAA Boards. This will include printed and video/audio media.

Hinds County Human Resource Agency
258 Maddox Road
Jackson, Hinds County, MS 39225-2657

GRANT AMOUNT: $82,333.00

CONTACT: Kenn Cockrell: (601) 923-3930

SUMMARY OF WORK PROGRAM: The Hinds County Human Resources Agency (HCHRA) acts as the lead agency throughout Mississippi. The purpose of the project will be to further develop and expand a results oriented delivery system to measure improvements in the lives of low income individuals. HCHRA will implement training, technical assistance, and (CMICTS) a case management and service delivery systems that focuses on results oriented service planning and delivery throughout the State. This will enable the CAA's and the State of Mississippi to implement a system designed for multi-service use via the service taxonomy and service delivery network to quantitatively track incremental change in families, communities, agencies, and the state.

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