



Routt County United Way
Routt County United Way
2022 Community Investment
Process Program Rubric Tool

Program Standard: Something that every program is expected to do.

Program Expectations: Programs will do these things to varying degrees of meeting, not meeting or exceeding expectations, depending on their maturity and development.

SECTION 1: Target Population

Program Standards		
1. Clearly defined target population.	Agency should be able to articulate the population this program is designed to serve, including demographics and applicable subsets. Target population should be specific to Routt County.	
2. Clearly defined geographic service area.	Agency should be able to articulate the area (e.g. by county area, town, neighborhoods, schools) this program is designed to serve.	
Program Expectations	MEETS EXPECTATIONS / EXCEEDS EXPECTATIONS	DOES NOT MEET EXPECTATIONS
3. Understand the target population.	<ul style="list-style-type: none"> • Stays current on target population-specific research • Can articulate specific needs/issues facing its target populations • Conducts an assessment on all clients to determine needs/goals • Adjusts outreach if clients differ from target population • <i>Contributes knowledge on target population to other entities</i> • <i>May serve as a target population SME (subject matter expert)</i> • <i>Can articulate the strengths of its target population</i> 	<ul style="list-style-type: none"> • Cannot articulate the needs, strengths or challenges facing its target population. • Uses broad, generalized language to describe target population.
4. Understands the geographic service area.	<ul style="list-style-type: none"> • Stays current on geographic service area (GSA) changes and needs • Uses client assessments to assess community gaps and needs • Can articulate how community issues affect target populations • <i>Works to strengthen its GSA (policy, advocacy, meetings)</i> • <i>Shares identified gaps/needs w/ others to reduce gaps</i> • <i>Identified / addressed gaps in its own services</i> 	<ul style="list-style-type: none"> • Cannot articulate issues specific to its geographic service area.

SECTION 2: Program Services

Program Standards		
1. Clearly defined components	Each component and its purpose with the broader objectives of the program are easily understood.	
2. Demonstrated need and demand for each component.	Components should be based on researched need or demonstrated demand for services. Services consider industry standards and/or independent research.	
3. Staffing is appropriate to operate program and achieve its stated purpose.	Agency should devote enough staff to achieve program goals. In addition, staff skills should closely align with the program’s stated purpose. If funds do not allow for hiring the appropriate type or amount of staff to achieve program goals, volunteers can also fulfill this expectation.	
Program Expectations	MEETS EXPECTATIONS / EXCEEDS EXPECTATIONS	DOES NOT MEET EXPECTATIONS
4. Services make sense for the target population.	<ul style="list-style-type: none"> • Services are designed to reduce barriers for target population: language, hours of operation, locations, transportation • Services are culturally appropriate, including sensitivity towards gender, familial, racial, ethnic and religious concerns • Creativity in lowering barriers has increased clients served. • Consistent delivery across client types (day vs night, language) 	<ul style="list-style-type: none"> • Services do not consider client barriers or cultural sensitivities. • Service quality is inconsistent across its client types.
5. Services address the target population’s goals and needs.	<ul style="list-style-type: none"> • All clients complete a basic assessment to identify program related goals and needs, as appropriate. • Client goals/needs are incorporated in tailored service delivery • All clients complete an assessment to identify <u>all</u> goals/needs. • Client progress is assessed at multiple intervals. • Staff gives “warm handoff” to other programs to help clients. 	<ul style="list-style-type: none"> • Program does not demonstrate concern for population’s goals or needs. • Services lack flexibility and depth to address the complexity of client needs.
6. Staff collaborates to improve and/or expand services.	<ul style="list-style-type: none"> • Program has a formalized collaboration w/ another nonprofit(s). • Articulates strengths/weaknesses of collaborative relationships. • Collaboration used to share information, make referrals, apply for joint funding, etc. • Multiple, sustained collaborations (e.g. service co-location, expansion of client base, common/joint outcomes measures, serves as SME, streamlining processes for clients, systems collaboration) 	<ul style="list-style-type: none"> • Little evidence of collaboration beyond sharing basic information or making referrals with other nonprofit organizations.

SECTION 3: Continuous Improvement Culture

Program Standards	
1. Stakeholder feedback used to identify program improvements.	Regularly collects client / other stakeholder feedback and interprets it to identify improvements.
2. Data informs decision-making.	<ul style="list-style-type: none"> • Outcomes / outputs data is regularly reviewed. • Staff considers other information when planning improvements (e.g. data from other programs, public policy, recent research related to improving results).
3. Program's plans: align with agency mission; reflect lessons from continuous improvement.	Program plans are aligned with agency's mission and reflect insights from established continuous improvement processes.
4. Agency knows of any external challenges to service delivery.	Agency understands any external challenges, whether realized or projected, that may influence the program's service delivery. Challenges might include, for example, expected funding cuts, natural disasters, legal or policy changes, contracts nearing termination, or service model changes.

SECTION 4A: Outputs Only Programs (i.e. Programs that Set Targets ONLY For Outputs)

Program Expectations	MEETS EXPECTATIONS / EXCEEDS EXPECTATIONS	DOES NOT MEET EXPECTATIONS
1. Program tracks outputs that address the needs of client population.	<ul style="list-style-type: none"> • Outputs measured lead towards achievement of client goals. • 50+% outputs reported have been measured for 2+ years. • Program assesses whether outputs are applicable year to year. 	<ul style="list-style-type: none"> • Outputs have a limited connection to the program's function and/or client goals.
2. Outputs info used adjust services.	<ul style="list-style-type: none"> • Outputs measured are directly associated with the function and objectives of program services. • Targets are based on planning and research. • Program measures outputs in multiple aspects of service delivery. • At least three meaningful modifications were made to services based on outputs data within the last two years. 	<ul style="list-style-type: none"> • Program tracks a significant number of outputs but with limited rationale for their use in any decision making.
3. Program has a defined process to achieve unmet output targets.	<ul style="list-style-type: none"> • Program has a process for regularly assessing output results. • Program knows why targets were not achieved. • Process includes client input and/or industry guidance. • Process sets detailed timeline for implementation, follow-up. • At least three significant changes were made to its services to achieve output targets within the past two years. 	<ul style="list-style-type: none"> • There is no process for regularly evaluating output numbers. • Assessment happens on an inconsistent basis.

SECTION 4B: Outcomes Programs (i.e. Programs that Set Targets for BOTH Outputs and Outcomes Indicators)

Program Expectations	MEETS EXPECTATIONS / EXCEEDS EXPECTATIONS	DOES NOT MEET EXPECTATIONS
1. Measured outcomes address client needs within the scope of what the program has the capability to achieve.	<ul style="list-style-type: none"> • Outcomes measured lead towards achievement of client goals. • Can explain how outcomes measured are based on client needs. • 50+% outcomes measured consistently or with improved quality • Measured outcomes reflect max reasonable effect of services • Metrics follow logic model: who + will do X + to achieve Y • Clear process to assess/analyze needs and develop measures 	<ul style="list-style-type: none"> • Outcomes measured are program not client specific. • Limited explanation of how outcomes tie to meeting goals
2. Outcome indicators follow the S.M.A.R.T. guidelines (see definitions below).	<ul style="list-style-type: none"> • 50+% of indicators are S.M.A.R.T.; provide info to assess success • Indicators logically relate to outcomes. • Assessment tools are appropriate to measure indicator. • Targets have a rationale based in planning and research. • All indicators are S.M.A.R.T. • Segments indicators by suitable population or service subsets. • Targets reflect multi-year trends analysis. • Targets are unique for each indicator. 	<ul style="list-style-type: none"> • Indicators do not reasonably relate to outcomes. • Indicators are simplistic and lack specifics. • Indicators are restatements of the outcome.
3. Program uses logic models that clearly show the chain of influence from inputs to actions to results to accomplish client outcomes.	<ul style="list-style-type: none"> • Program has an established logic model that is logical. • Logic model includes inputs, activities, outputs and outcomes. • Logic model reflects measurement plans and resources. • Clear process to review / update logic model annually. • Has used logic model to assess services, plan program changes. 	<ul style="list-style-type: none"> • Does not have a logic model. • Does not use a logic model or a similar system to plan or improve program.
4. Program measures outputs that yield valuable info used to make service adjustments.	<ul style="list-style-type: none"> • Outputs info used to assess quantity of services. • Targets are based on planning and research. • Outputs data used to make 3+ significant changes to services 	<ul style="list-style-type: none"> • Program could not give an example of using outputs as a basis for adjusting service.
5. Program has a defined process to achieve unmet outcome and output targets.	<ul style="list-style-type: none"> • Can articulate a process to regularly assess outcome results. • Can articulate a process to regularly evaluate output results. • Program knows why targets were not achieved. • Process: includes client input / industry guidance; sets timelines for implementation, follow-up; used to make changes to service 	<ul style="list-style-type: none"> • No process to assess outcome/output target results • Lacks strong rationale for not meeting output or outcome targets.

Indicators must be S.M.A.R.T.

Specific = The indicator is clear enough that different people would measure the same thing in the same way.

Measurable = The necessary information can be observed, counted or weighed with reasonable effort and cost.

Achievable = The standard is not so high that program participants cannot achieve it with reasonable effort.

Relevant = The indicator captures what key stakeholders would consider the essential aspects of the outcome.

Timebound = The indicator is likely to occur often enough during the designated period to provide useful information./