**Dr. John M. Kelley Memorial Evaluation Institute**

**The Assessment of Program Outcomes**

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Allison brings a Master’s Degree in Statistics, Measurement, Assessment & Research from the University of Pennsylvania

For over two decades the program evaluation spotlight has clearly been focusing upon the assessment of program results or outcomes. PCHF has a long-standing history in offering training and technical assistance to its grantees in the area of program evaluation as well as sponsoring its own outcome evaluations of key Foundation programs and initiatives. Recently, PCHF retained ***Grantmakers in Health*** to conduct a comprehensive peer review of the Foundation spanning its organizational structure as well as its management, fiscal, and programmatic practices. Among the recommendations proffered in the January, 2016, report was the following:

*PCHF should require grantees to report outcome measures in addition to the process measures, such as the number of people served, that they currently provide. Outcome measures can inform PCHF staff whether grantees are contributing to the foundation’s stated vision and goals. This additional requirement should be introduced gradually. The foundation’s evaluation consultant is one resource who could facilitate this process and provide education and technical assistance to grantees.*

This training initiative directly responds to the above cited recommendation to provide education and technical assistance to grantees regarding outcome measures.

**The Phoenixville Community Health Foundation is requiring**

**that every grantee organization attend**

***The Assessment of Program Outcomes* Initiative**

**as a requirement for future grant funding.**

**PROGRAM STRUCTURE**

The ***Assessment of Program Outcomes*** will be offered as a one-day workshop: **9:00 a.m. – Noon / lunch break / 1:00 – 4:00 p.m.**

The workshop will feature a time-tested uniform model for identifying, articulating, and measuring program outcomes. In its one-day format, the training is experiential, featuring hands-on practical exercises, a defined six-step model, and an opportunity for participants to map their own evaluation plans specific to their organizations. Supporting methods and tools such as logic models and qualitative evaluation are also addressed. Tangible take-aways include an Evaluation Workbook, which provides background material, print and video references, and a one-page Outcomes Assessment Worksheet.

All current PCHF grantees are required to attend a workshop to ensure continued funding through the Phoenixville Community Health Foundation.

* **All grantee organizations must participate with a team of three people: Executive Director, board member, key program staff member**.
* Each workshop date will accommodate a maximum of eight [8] organizational teams.
* All workshops will be held at the Phoenixville Hospital MOB II Conference Room from 9:00 am to 4:00 p.m. with an hour for an ‘on-your-own’ lunch break. PCHF will provide refreshments, but will not be providing food.

**Scheduled workshop**

Friday – April 3, 2020

**FOLLOW-UP TECHNICAL ASSISTANCE**

To further assist organizations, *optional* technical assistance for organizations to discuss evaluation barriers within their organization, or to discuss more specifically evaluation processes/procedures.

Allison will be available by appointment only. Please call the Foundation office [610-917-9890] to make arrangements for a consultation.

**Participant Registration Procedure**

To register your organization for a workshop:

1. Complete the attached registration form that includes the names and role of the organization’s workshop team.
2. E-mail, or FAX, the registration form to Holly Megay, PCHF Administrative Assistant: pchf1@pchf1.org. Holly will confirm the date of your workshop via email.
3. **Phone registrations will not be accepted**. Workshop dates will be assigned on a first come/first complete registration basis.

**ASSESSMENT OF PROGRAM OUTCOMES**

REGISTRATION FORM

**Friday, April 3, 2020**

ORGANIZATION NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

ORGANIZATION TEAM MEMBERS:

Executive Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Board Member: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Key Staff/Director: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Primary Contact: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**E-mail [*pchf1@pchf1.org*] or fax [610-917-9861]**

**this Registration Form to Holly Megay.**

 **PCHF will confirm your workshop date via e-mail to your designated contact person.**