Appendix 1

Planning and Evaluation Model

Approved by Board - January 31, 2008
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Introduction

The Planning and Evaluation Model provides staff with a tool for program planning, treatment planning, daily operations and evaluation.

The Model provides a common language and a process for staff to follow when planning and evaluating Agency services. The model logically connects goals, planned outcomes, activities and resources.

Use of the Model is intended to result in continuous quality improvement of Agency services.

Governance

St. Leonard's Community Services is governed by a maximum 17 member Board of Directors whose function is to develop Agency policy, approve Agency strategic and operating plans and monitor the outcomes of programs.

Ten Operational Functions

Agency responsibilities are organized into the following 10 operational functions, which are used for program planning, program evaluation, writing job descriptions, performance evaluations, proposals, standards manuals and filing.

1. **PLANNING** - Planning is work that prepares staff and clients for the future. Planning involves the continuous systematic identification and analysis of needs, the establishment of goals, planned outcomes and planned activities and the assignment of resources, which are required to deliver quality services.

   Planning includes the following steps:
   - Conducting an Environmental Scan,
   - Conducting SWOT analysis,
   - Setting Goals,
   - Planning Outcomes to achieve goals,
   - Planned Activities to achieve outcomes,
   - Assigning Resources to carry out activities,
   - Evaluation of actual outcomes and actual activities.

There are **several** categories of Agency planning:

- ***Strategic Planning -*** Strategic Planning involving a cross section of Agency staff and Board members is conducted every three to five years using environmental scans, bench marking, structured brainstorming and SWOT analysis to determine long range strategic directions for the Agency.
- ***Agency Operating Planning -*** Using data gathered during an annual structured brain storming meeting of staff, clients and Board members, the Management Team prepares an Agency Operating Plan for approval by the Board of Directors.
- ***Departmental Operating Planning*** - Each department prepares its own annual operating plan based on a needs analysis conducted by staff working in that department.
- ***Program Planning*** - Each program within a department has its own plan that outlines how the program's goals are linked to planned outcomes, planned activities and resources. The model also describes how the program will evaluate planned activities and planned outcomes including what the indicators of change will be.
- ***Treatment/Action Planning*** – All clients, with the exception of crisis clients and clients accessing respite and prevention/awareness services have a treatment/action plan, which is developed in consultation with their Counsellor (Primary Worker) based on a comprehensive assessment of their strengths and needs **(see Addendum 1B).**
- ***Transitional Planning*** – Residential clients moving into the community work with their Counsellor (Primary Worker) to develop a transitional plan to move from residential care to independent or semi-independent community living.
- ***Aftercare Planning*** – In some situations, there is a therapeutic value in pre-planning follow-up contact and aftercare to determine if the client has been able to maintain treatment/action goals or to provide an opportunity to review coping strategies and/or skills learned while in treatment. Aftercare plans are prepared with the client before discharge.
- ***Contingency Planning -*** The Agency has ongoing plans in place for maintenance, emergencies, fire, health, safety and program audits, compliance reviews and inspections.

2. ***DOCUMENTING* -** Documenting refers to the written confirmation of tasks completed. This includes drafting, electronic communication, word processing, filing, distributing, faxing and mailing correspondence, forms, reports and any other written materials that pertain to Agency operations. This also includes gathering, organizing and submitting statistical information.

3. ***REGULATIONS*** - Regulations refers to the establishment and monitoring of quality standards, agreements, contracts, manuals, policies, procedures, rules and regulations. Regulations include Agency Policies and Procedures, Staff Handbooks, Municipal Regulations (i.e. - Fire, Health, Building Codes), Provincial and Federal regulations (i.e. - WHMIS, Health & Safety, Youth Criminal Justice Act, CFSA, Employment Standards and CMHO Standards).

4. ***FINANCES*** - Finances refer to the management, distribution and expenditure of Agency's fiscal resources. This includes budgeting for operational and capital needs, invoicing, collections, purchasing, invoice payment, inventory control, payroll, accounting and preparation of financial statements.

5. ***FACILITIES*** - Facilities refers to the acquisition, repair, renovation and maintenance of the physical resources of the Agency including buildings, furniture, landscaping, equipment, computers, information technology and vehicles. It includes work that ensures the grounds and buildings are safe and secure.

6. ***HUMAN RESOURCES*** - Human Resources refers to the recruitment, orientation, training, professional development, supervision, safety and evaluation of staff, students and volunteers.

- **Staff Responsibilities -** Staff are recruited to perform both "service" and "organizational" responsibilities as defined below.
- **Service Responsibilities** are those duties, which the staff was hired to perform on behalf of clients, staff and the community.
- **Organizational Responsibilities** are those duties which require the staff to be a "team player", supporting the Agency through adherence to organizational values, beliefs and policies, through co-operation with co-workers, involvement on teams, through a commitment to ongoing professional development and through positive representation of the Agency in the community.

7. ***INTERNAL COMMUNICATIONS*** - Internal communications refers to the sharing of information within a department and across the Agency. It includes Board Meetings, Program Committee Meetings, Resources Committee Meetings, Management Team Meetings, staff and case management meetings, multidisciplinary team meetings, cross functional team meetings, memos, faxes, emails, intranet communication, website and telephone conversations.

8. ***COMMUNITY RELATIONS*** - Community relations refers to communication outside the Agency with other agencies, businesses, the judiciary, politicians, government departments, regulatory bodies, suppliers, customers, neighbours, parents and teachers. It includes both regular informal and formal communication in response to concerns, inquiries or requests as well as negotiation of formal agreements.

9. ***MARKETING*** **-** Marketing refers to work involving the promotion of the Agency, including the development of proposals, the design of promotional materials to increase public awareness, fundraise and maintain required levels of client utilization. This work involves the use of the website, the media, written promotional materials, presentations to community groups, clients, funders and businesses.

10. ***CLIENT SERVICE*** - Client service is the core business of the Agency and refers to services and program activities that are designed to meet client needs. The Agency provides the following types of services:

- Prevention and Awareness,
- Crisis Intervention,
- Individual and Group Counselling,
- Residential Support and Treatment,
- Service Coordination,
- Family Support,
- Education,
- Skills Training,
- Employment Preparation and Training.

These services are divided into four sectors (addictions and mental health, justice, employment and youth and family). Within these sectors, there are multiple programs.

Program activities are delivered in logical steps that include the following **components**:

- Intake (determining program suitability),
- Assessment (identifying/determining strengths and needs),
- Developing a treatment/action plan (interventions to facilitate cognitive, attitudinal and/or behavioural change),
- Transition planning,
- Service closure and discharge,
- After care, follow up and support,
- Evaluation.

When preparing the "client service" section of the operating plan, staff may focus on *programs and/or program components*. (**Addendum 1A - Planning and Evaluation, Program Plan).**

Plans under the function of Client Service are referred to as **Logic Models** because of the logical connection linking the program's goal, the planned outcomes, the planned activities and the assigned resources.

The Planning and Evaluation Cycle

The 10 Operational Functions are used as part of an annual planning cycle to plan and evaluate Agency services. The annual planning and evaluation cycle involves the following steps:

- Conducting an Environmental Scan,
- Conducting a SWOT analysis,
- Setting Goals,
- Planning Outcomes to achieve goals,
- Planning Activities to achieve outcomes
- Assigning Resources to carry out activities,
- Evaluating actual outcomes and actual activities.

Environmental Scan – An environmental scan is conducted by surveying key stakeholders including staff, clients, referral sources, funders and community partners to learn their various perspectives about community and Agency needs. Stakeholders are asked to comment on the Agency's values, goals, service philosophy and programs to determine their relevance and effectiveness in meeting client needs.

In preparation for the environmental scan, the Agency also regularly gathers and reviews the following information, which is communicated by the Service Directors during the annual brainstorming exercises, the Agency planning meeting and strategic planning days:

- Client satisfaction surveys,
- Client complaints,
- Parent feedback,
- Referral source and collateral feedback,
- Serious Occurrence Reports,
- Annual client file audits,

- Agency and departmental operating plan outputs and outcomes,
- Client/parent/teacher follow-up contacts,
- Government licensing audits,
- Program utilization data,
- Treatment/action plan outcomes,
- Staff feedback.

This environmental scan provides the background information required from key stakeholders to plan goals, outcomes and activities. Environmental scanning research includes the identification of **benchmarks,** which are the standards of accomplishment by other organizations throughout the province that the Agency can strive to achieve as future targets (i.e. – CMHO accreditation, foundation or government grants, successful mergers, renovation projects, volunteer programs, innovative programs, highly successful programs, etc.).

1. **SWOT Analysis** - Agency staff organize these perspectives under strengths, weaknesses, opportunities and threats ("SWOT") applying them to each of the 10 Agency operational functions (**Addendum 2**).

2. **Goals** – After completing the environmental scan, goals are written to describe a desired future state or changed condition. Goals are defined as long term desired results that are attainable but not directly measurable in the short term.

   Example of goals:

   - *Improve relations with City Council,*
   - *Make the community more aware of Agency services,*
   - *Enable all staff to communicate via the intranet,*
   - *Increase the wellbeing of staff,*
   - *Reduce youth homelessness,*
   - *Reduce youth unemployment,*
   - *Measure client outcomes,*
   - *Give all disadvantaged community youth the opportunity to attend camp.*

3. **Planned Outcomes –** In order to meet identified goals within each of the 10 operational functions, planned outcomes are written using **"SMART"** sentences**. SMART** is an acronym for *specific, measurable, attainable, results oriented and time limited*. Short-term outcomes describe positive "internal" changes in *knowledge, feelings, values and attitudes.* Mid and long term outcomes describe "external" changes in *behaviour, improved skills or conditions***.** Each Planned Outcome describes only *one desired result*. Planned Outcomes are written using verbs (action words) such as *increase, decrease, improve, change, modify, prevent and reduce.* Additional examples of Planned Outcome Verbs are enhance, enlarge and develop.

Planned outcomes are written using nouns (person, place or thing), which describe the *problem* (i.e. drug abuse) and the *target group* (i.e. clients, staff or community).

Planned outcomes always include a **baseline,** (a minimum starting place) and a **target** (a realistic ending place) to measure the *level of change* (i.e. % or # of relapses).

Planned outcomes also include the *time frame* (i.e. one year).

Structured Approach to writing Planned Outcomes - A structured approach simplifies the writing of planned outcomes. Using the following structure, the desired verb, noun, time frame and level of change are inserted and the planned outcome is complete.

By ________	____________	______________	____________________
time frame	**verb**	**noun**	**level of change**

Examples of Planned Outcomes:

- ***By*** *March 31, 2008, increase City Council's attendance at Agency events by 100%.*
- ***By*** *March 31, 2008, increase the number of community referrals to Agency services by 20 per month.*
- ***By*** *March 31, 2008, increase by 50, the number of staff who read the ED report on line.*
- ***By*** *March 31, 2008, reduce staff turnover by half.*
- ***By*** *March 31, 2008, increase school attendance by 5 YRC residents.*
- ***By*** *March 31, 2008, reduce depression scores for PWR residents by 20%*

- ***By*** *March 31, 2008, increase awareness of mobile services for 20 mental health clients.*
- ***By*** *March 31, 2008, increase cooking skills of 4 Chatham street residents.*
- ***By*** *March 31, 2008, reduce running away behaviour at Varency Home by 50%.*
- ***By*** *March 31, 2008, increase coping skills scores of 5 Buffalo Street residents.*
- By *March 31, 2008, increase the number of youth attending camp from 200 to 250 annually.*

By	**March 31, 2008,**	**increase**	**family repatriation**	**by 25 YRC kids.**
	time frame	**verb**	**noun**	**level of change**

4. **Planned Activities** - In order to achieve the planned outcome, activities are planned, which are *specific, measurable, attainable, results oriented and time limited*. Activities are the services and programs the Agency provides, such as the provision of shelter, food, employment services, counselling and information. Activities are written using verbs such as *establish, provide, prescribe, teach, give, develop, assess and refer* to describe what will be done. Additional examples of Planned Activity Verbs are *discuss, evaluate, identify, list, diagram, compare and contrast, translate, recall and state, integrate, solve, construct, complete, prepare, make, run, draft, draw, contract, develop, open, define, describe, tabulate, answer, report and state*.

   Planned Activities also use nouns to describe the *target group* of the activity, (i.e. clients), the *level of the activity* (i.e. 4 one hour sessions daily) and the *time frame* (i.e. for one year).

   Structured Approach to writing Planned Activities - A structured approach simplifies the writing of planned activities. Using the following structure, the desired noun, verb, time frame and level of activity are inserted and the planned activity is complete.

By	________	______________	________________	______________________
	time frame	**verb**	**noun**	**level of activity**

Example of planned activities:

- *By the last day of every month send invitations to all City Councillors for upcoming events.*
- *By March 31, 2008 distribute mental health program brochures to every doctor's office.*
- *At the end of every month hold a contest offering a prize to the first 5 staff members who answer a question hidden in the ED report.*
- *By March 31, 2008 increase the number of personal days by 2 per year.*
- *By December 2007 offer YRC kids who return to school 2 free concert tickets every month for every month of perfect attendance.*

- *Commencing October offer recreation outings for all residents every Tuesday and Thursday.*
- *By March 31, 2008 distribute mobile crisis brochures to all mental health clients.*
- *By March 31, 2008 provide 7 module home economics course for 4 residents.*
- *By March 31, 2008 issue $50 West 49th gift certificates every month to Varency residents without serious occurrences related to running.*
- *By March 31, 2008 run 4 substance abuse booster sessions for 6 residents.*

By March 31/08	**hold**	**5 parent/youth mediation meetings**	**each month.**
time frame	**verb**	**noun**	**level of activity**

5. **Resources** - In order to carry out planned activities, resources are assigned such as goods, services, staff and money. These are sometimes referred to as **inputs**. When assigning planned activities to personnel it is important to identify a "lead" staff member who is responsible for getting the tasks completed.

6. **Outcome Indicators** – Outcome indicators are quantifiable measures of change that can be seen, or heard, thereby demonstrating that planned outcomes have been achieved. Examples of Outcome Indicators are camp *attendance, school grades, occupancy, utilization or attendance, criminal or substance abuse recidivism/relapse etc.*

7. **Measurement Methods -** Measurement Methods are tools that quantify the level of change (i.e. outcome indicators) and/or the level of activity. Examples of measurement methods are *school attendance registers, academic grading systems, occupancy or utilization logs, teacher observation, police criminal record checks, case notes, focus groups, client interview guides and standard measurement tools (i.e. CANS).*

   When describing measurement methods, it is important to specify if you are measuring "level of change" (i.e. Planned Outcome) or "level of activity" (i.e. Planned Activity). It is also useful to include the timing and frequency that the measurement tool is applied, (i.e. pre – post, time series or follow up sampling and to describe who will collect and interpret the data.

   The table in **Addendum 3** provides an overview of the variety of measurement methods used to collect data for outcome and activity evaluations and it outlines their advantages and challenges.

8. **Evaluation -** An evaluation of the previous year's actual activities and actual outcomes is conducted using various predetermined indicators and measurement tools in order to measure and understand the results. (See **Addendum 1A Planning and Evaluation, Program Plan).** Evaluation determines whether activities were carried out as planned, whether planned outcomes were achieved and whether resources were used as planned. It is important to always be aware of which *function*, *service, program and/or component* is being evaluated. It is important to determine the type of evaluation that will be conducted. Finally, it is important when involving stakeholders including clients and/or their families, staff, Board members or government officials to construct questions that are relevant to the culture, reading level of the target audience and not to use jargon.

   The Agency conducts three kinds of evaluation.

   - Activities evaluation,
   - Outcomes evaluation,
   - Resources evaluation.

   Activities Evaluations – Activity Evaluations are geared to fully understanding how planned activities work, how they produce the results they do and their strengths and weaknesses.

   Activities are evaluated by describing what was done, such as the number of classes taught, the number of counselling sessions offered, the number of educational materials distributed, hours of service given, participants served, client days of care or employment/training days. These completed activities are sometimes referred to as **outputs**. When designing an activities evaluation, staff seek to learn if activities got carried out as intended (i.e. - sufficient amounts, time, frequency and according to plan) and if activities served the intended target group. If not, staff seek to learn who was served and who should be served in the future.

   Satisfaction Surveys are a useful tool to evaluate planned activities because clients and staff can advise whether they experienced the process as was intended.

   Sample questions to ask when designing an activities evaluation are found in **Addendum 4**.

   Outcome Evaluations – An outcome is the change that occurs in the course of, or at the end of a planned activity. Unlike activity evaluations, which focus on what was done, outcome evaluations focus on what was accomplished or changed as a result of the planned activity. Outcome evaluations determine if the planned activities are bringing about the changes needed by the target group.

There are 2 levels of outcome evaluation information gathered to evaluate a program.

1) Short-term outcomes describe positive "internal" changes in *feelings, values, attitudes and knowledge.* These outcomes are generally self-reported by clients.

2) Mid term outcomes describe "external" changes in *behaviour, improved conditions or skills.* These outcomes occur as a result of learning being applied to enhance behaviour or performance and are generally observable by staff, family or others.

Sample questions to ask when designing an outcomes evaluation are found in **Addendum 5.**

It is important not to confuse "satisfaction with services" with actual outcomes. **Satisfaction Surveys** do not necessarily indicate changes in feelings, thoughts and behaviour.

Resource Evaluations – Resource Evaluations determine if staff have adequate resources (money, equipment, facilities, training, etc.) to achieve the planned outcomes.

This involves determining:

1) What did the activities cost?
2) Is the activity worth the cost? Is it better than doing nothing? Was there a cheaper alternative?
3) What proportion of the cost is attributable to customers not using the service? (waste factor)
4) Is the activity worth funding in the future?

Collecting and Analyzing Evaluation Data

Determine who is going to collect the data and then conduct the interviews, surveys, etc. and record any observations.

When analyzing data (whether from questionnaires, interviews or focus groups, etc.) pre-determined staff begin by reviewing the planned outcomes, since they are the reason the evaluation was undertaken in the first place.

For basic analysis of "quantitative information", (i.e., ratings, rankings, yes's, no's, etc.) pre-determined staff complete the following steps:

1) Make copies of the data and store the master copy. Use the copy for making edits, cutting and pasting, etc.
2) Tabulate the information, i.e., add up the number of ratings, rankings, yes's, and no's for each question.
3) For ratings and rankings, consider computing a "mean", or "average", for each question. For example, "for question #1, the "average" ranking was 2.4". This is more meaningful than indicating how many respondents ranked 1, 2, or 3.
4) Consider conveying the range of answers, i.e., 20 people ranked "1", 30 ranked "2" and 20 people ranked "3".

For basic analysis of "qualitative information" (respondents' verbal answers in interviews, focus groups, or written commentary on questionnaires) staff complete the following steps:

1) Read through all the data.
2) Organize comments into similar categories or themes, i.e., concerns, suggestions, strengths, weaknesses, similar experiences, program inputs, recommendations, outputs, outcome indicators, etc.
3) Label the categories or themes, i.e., concerns, suggestions, etc.
4) Attempt to identify patterns, or associations and causal relationships in the themes. For example, all people who attended programs in the evening had similar concerns, most people came from the same geographic area, most people were in the same salary range. Sample qualitative interview questions can be found in **Addendum 6.**

Interpreting Evaluation Data

Information should be interpreted in perspective, comparing results to:

- What was expected by staff,
- Original program goals and planned outcomes,
- The program's experiences, strengths, weaknesses,
- Common standards for services,

When interpreting evaluation information, staff should consider making recommendations to help improve services.

Reporting Evaluation Results

The content and format of evaluation reports depends on whom the report is intended for (i.e. funding bodies, staff, customers, clients or the public).

a) Interim Reports

Interim reports are recommended where feasible to keep stakeholders up to date, well informed and able to provide ongoing input into the program.

b) Final Report and Dissemination

The final report will include an explanation of why the evaluation was conducted; methods used for data collection and analysis of the results; interpretations; implications for the program and recommendations for future directions. It is important to report findings objectively and as part of an evolving process. A final report template can be found in Addendum 7.

Both clients and staff must have a chance to carefully review and minutes will be recorded. Where possible and appropriate, recommendations are converted into action plans, including who is going to do what about the program and by when.