January 1, 2011— December 31, 2011 Common Report Form
Outcome Based Program Evaluation
City of Lakewood

Agency Name ____

Program Name ____

Staff Contact ______________________ **Email**______________________

Phone ______________________ **Fax**______________________

Check one annual reporting cycle.
The included data sheets should represent 12 months of data.

REPORTING PERIOD: ☒ **January 1, 2011 – December 31, 2011, Due January 30, 2012**
☐ **Alternate July 1, 2011 –June 30, 2012, Due July 30, 2012**

OUTPUTS: TOTAL NUMBER OF **UNDUPLICATED INDIVIDUALS** SERVED ________

TOTAL NUMBER OF **UNDUPLICATED FAMILIES** SERVED ________

THE DATA IN THIS OBE REPORT IS BASED ON ☐ INDIVIDUALS ☐ FAMILIES

THE BELOW REQUESTED FINANCIAL INFORMATION IS REQUIRED ONLY IN JANUARY REGARDLESS OF YOUR REPORTING CYCLE. JULY TO JUNE CYCLE WILL SUBMIT THIS FINANCIAL INFORMATION ON THIEIR JANUARY DATA SHEET FORM. JANUARY TO DECEMBER CYCLE WILL SUBMIT THEIR FINANCIAL INFORMATION ON THE COMMON REPORT FORM.

FINANCIAL INFORMATION:

$____________	LOCAL GOVERNMENT (PIERCE COUNTY, CITY OF TACOMA, CITY OF LAKEWOOD)
$____________	LOCAL PRIVATE FOUNDATIONS (WASHINGTON STATE FOUNDATIONS)
$____________	STATE GOVERNMENT
$____________	FEDERAL GOVERNMENT
$____________	NATIONAL FOUNDATIONS (ANY PRIVATE DOLLARS OUTSIDE OF WASHINGTON)
$____________	CLIENT FEES
$____________	DONATIONS
$____________	**TOTAL PROGRAM REVENUE**

SECTION ONE: CONTRACTED/MANDATED OUTCOME 1

A. Contracted Outcome: (e.g., #1)
B. _____% & _____# of clients achieved

C. Define criteria for achieving outcome: ***See Attachment A for guidelines to calculate achievement rates. Describe the rationale for choosing the criteria in Question 2 of narrative.***
Mark one of the following: ☐ Must meet Indicator A only; ☐ Must meet Indicator B only; ☐ Must meet both Indicator A and B; ☐ Must meet either Indicator A or B; ☐ Other ________________________________ (must be clear and specific; e.g. *Must meet Indicator A and 50% of Indicator B*)

SECTION TWO: INDICATORS

List indicators for above outcome

A. Indicator **Measurement Tool** *(attach blank copy)* **Total # of people served** _________________ **# of people data collected on** _______________ **Sampling Strategy used:** ☐ **Yes** ☐ **No** **If yes, which strategy was used?** ☐ Random Sample ☐ Systematic Sample ☐ Stratified Sample ☐ Convenience Sample **Total # of people in sample _____**	**Data Analysis** a)**___# or ___% of clients achieved** b)___# or ___% of the data was missing. c)___# or ___% were not in the program long enough to evaluate. d)___# or ___% left the program prior to evaluation e)___# or ___% did not achieve this indicator and were in the program the appropriate duration. f) ____*Total. This should equal "# of people served" or if sampling "# of people in sample". *Sum of a) through e) will equal f). *Use only if program is designed to work with clients 12 or more months* **Program duration > 1 year** ☐ **Yes** ☐ **No** **If yes, complete the following** ___# or ___% less than 1 year achieved indicator. ___# or ___% greater than 1 year achieved indicator.
B. Indicator **Measurement Tool** *(attach blank copy)* **Total # of people served** _________________ **# of people data collected on** _______________ **Sampling Strategy used:** ☐ **Yes** ☐ **No** **If yes, which strategy was used?** ☐ Random Sample ☐ Systematic Sample ☐ Stratified Sample ☐ Convenience Sample **Total # of people in sample _____**	**Data Analysis** a)**___# or ___% of clients achieved** b)___# or ___% of the data was missing. c)___# or ___% were not in the program long enough to evaluate. d)___# or ___% left the program prior to evaluation e)___# or ___% did not achieve this indicator and were in the program the appropriate duration. f) ____*Total. This should equal "# of people served" or if sampling "# of people in sample". *Sum of a) through e) will equal f). *Use only if program is designed to work with clients 12 or more months* **Program duration > 1 year** ☐ **Yes** ☐ **No** **If yes, complete the following** ___# or ___% less than 1 year achieved indicator. ___# or ___% greater than 1 year achieved indicator.

Questions:

1) Using 18 – 24 months of Outcome data **and** at least one other performance measure; explain the learnings that have occurred in this program using performance measures.
    a. Performance measures include outcomes, outputs, resources and cost data. **The use of outcome data is required.**
    b. Encouraged to use charts, tables in addition to the narrative to explain what you've learned.
    c. Recommended that programs provide a bulleted summary of the lessons learned.

2) Given these lessons (must include outcome data and may include any other performance measures), please describe your plans for the program for the next 6-12 months.
    a. May include; changes to service delivery, changes to resource procurement, changes to evaluation system
    b. Include a detailed time line for implementing changes. Be specific and realistic.
    c. If no changes to the program, please explain what you need to learn in order to deliver better outcomes and other performance measures.

3) What else would you like your funder to know about the effectiveness of your program? May include;
    a. demographics of the population and its impact on performance,
    b. intensity and duration of the program and results
    c. difference between participants who complete the entire dosage of service, compared to those who opt out early,
    d. other areas that interest you and may interest your funder.