



THE PERFORMANCE PRACTICE

LEARN. IMPROVE. REPEAT.

PRINCIPLES & PROOF POINTS

PILLAR 3

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LEAP OF REASON
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Principle 3.1: Leaders and managers who run programs that are intended to produce meaningful life changes **hold themselves accountable for helping participants achieve desired outcomes**. Programs intended to provide important but not life-changing products or services, such as food for homeless families, are not accountable for outcomes but **must deliver high-quality outputs**.

3.1.1. My organization's leaders and managers ensure that we track the quality of our *outputs* in an ongoing manner using a clear set of appropriate and measurable indicators. We review output quality regularly and work continually to deliver high-quality outputs.

3.1.2. In cases in which program outputs are intended to drive participant *outcomes*, my organization's leaders and managers track outcomes using a clear set of measurable indicators. Leaders and managers involve staff in monitoring outcome progression and working to improve results.

Principle 3.2: Leaders, managers, and staff **treat constituents with respect, authenticity, and empathy**.

3.2.1: My organization selectively hires those who have a deep understanding of the people and causes we serve and have demonstrated a strong ability to connect with people in a compassionate, accepting, and collaborative manner.

3.2.2: My organization cultivates these abilities through ongoing staff development.

3.2.3: My organization's leaders and managers hold staff accountable for treating those we serve with respect, authenticity, and empathy.

Principle 3.3: Leaders and managers select or design their programs and strategies based on a **sound analysis of the issues and evidence-informed assumptions** about how the organization's activities can lead to the desired change (often referred to as a "theory of change").

3.3.1: My organization has assembled and regularly reviews the best available evidence as part of selecting, designing, and developing its key programs and strategies. (For service organizations, the continuum of evidence usually consists of the following, from weakest to strongest: 1) ideas put forward by credible practitioners; 2) ideas acknowledged and validated over time by practitioners in the field; 3) field-wide reviews of programs for which evidence of effectiveness exists; 4) knowledge that has been developed by researchers studying similar target populations; 5) applying data science techniques that can rigorously evaluate outcomes using longitudinal program data; 6) borrowing core elements from similar programs that have benefited from rigorous impact evaluations; and 7) research on the organization's program(s) validated through rigorous impact evaluations.)

3.3.2: My organization has a theory of change that includes a target population/audience and a detailed service/program model with aligned outputs, outcomes, and measurable indicators.

3.3.3: My organization's theory of change is:

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- plausible (makes sense to the informed reviewer)
- doable (can be executed with available resources)
- measurable (key elements can be monitored using qualitative and quantitative data)
- testable (program model or advocacy strategies are codified in ways that allow for internal monitoring and external evaluation)
- socially significant (success would have high value for our target population or cause).

3.3.4: My organization is committed to maintaining fidelity to our theory of change. We have instilled it in our culture and manifest it in the way we implement our programs; conduct our daily operations; and assess the quality and effectiveness of our programs.

Principle 3.4: Once programs and strategies are up and running, leaders and managers continually ask: “**Are we collecting the information we need to ensure we’re effectively meeting the needs of our participants?** Are we reviewing and acting upon the latest evidence in our field? Are we open to counter-evidence that suggests we should be doing things differently?”

3.4.1: To deliver highly effective programs and services, my organization periodically reviews what data it collects, the reasons for collecting these data, the quality standards for these data, and the uses for these data.

3.4.2: My organization designates an individual or team to review and report on relevant research in the field and flag findings that support or challenge our assumptions about program delivery, what works, and why.

Principle 3.5: Leaders and managers **implement their programs in a high-quality manner** using rigorous implementation standards.

3.5.1: My organization’s program teams implement our services based on codified program models that address:

- intended outputs and outcomes
- key implementation indicators and data-collection standards
- phasing, dosage, and duration of activities
- professional requirements for staff.

3.5.2: My organization holds an individual or team accountable for monitoring whether we are implementing our programs with fidelity.

3.5.3: My organization conducts frequent reviews of our implementation data and makes corrections to our activities in real time to improve quality and effectiveness.

Principle 3.6: Leaders and managers are **sensitive to the cultural, racial, and political dynamics in the communities they serve** and are open to making adjustments to their programs and strategies when these dynamics shift.

3.6.1: My organization invests time and other resources to study the local dynamics that affect our ability to deliver highly effective programs and services. (Depending on the type of organization,

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this could include identifying key influencers/power centers in a community, studying the historical roots underlying present-day attitudes, and/or mapping relevant programs or efforts engaging the same population or audience.)

3.6.2: My organization intentionally and routinely works to build strong relationships and productive collaborations with relevant organizations and influencers whose actions and decisions affect our target population/audience and our ability to succeed.

Principle 3.7: Leaders and managers **establish and rigorously apply clear criteria for who is in their target population.**

3.7.1: My organization has defined and made clear to all staff and stakeholders our target population (clients at the core of our mission with whom we work to achieve improvements in measurable outcomes) and/or our target audience (groups we need to influence if we are to create our intended knowledge, attitude, behavior, or policy change).

3.7.2: My organization collects data on how each enrollment aligns with our target-population criteria.

3.7.3: My organization actively applies the criteria in the process of enrolling new participants.

Principle 3.8: Leaders and managers do a good job of **recruiting, retaining, motivating, listening to, and learning from their participants.**

3.8.1: My organization is relentless about recruiting people in our target population.

3.8.2: My organization actively seeks feedback from members of our target population or target audience—those closest to the problems we’re addressing—and uses this information to help us design and improve our programs and strategies.

3.8.3: My organization is relentless about helping participants stay engaged until they achieve the intended outcomes and about learning why some drop out despite our best efforts to retain them.

Principle 3.9: In the case of direct-service organizations, all management and staff **seek to build strong relationships with those they serve.** These relationships are often the single biggest determinant of whether participants will stay engaged in programming and thereby achieve the desired results.

3.9.1: My organization’s managers and staff engage with participants in ways that make participants feel heard and understood.

3.9.2: My organization systematically uses data on staff-participant relationships to inform staff recruitment, training, coaching, and development—as well as drive program improvement.

Principle 3.10: Leaders and managers **guard against the temptation to veer off course in search of numbers that look good in marketing materials or reports to funders.**

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3.10.1: My organization has checks and balances to ensure that the organization does not engage in corner-cutting measures (e.g., cherry-picking participants, biasing data) in pursuit of misleadingly impressive results

3.10.2: My organization has checks and balances to ensure that we accurately report both the number and percent of enrolled participants who achieve intended outcomes.

3.10.3: My organization has checks and balances to protect against “mission creep”—chasing funding opportunities by tacking on new programs that stretch beyond our core purpose.

Now that you’ve had a chance to carefully work your way through each proof point, we encourage you to **take a step back and reflect** on your organization’s overall progress on **Pillar 3**.

Where are you excelling? Where are you falling short of your own expectations? What two or three actions could you take in the next 12 months to lead to the biggest improvement on your Pillar 3 self-assessment the next time around?

Given the importance of human capital for making progress on Pillar 3 do you have the “right people in the right seats” in the words of *Good to Great* author Jim Collins? What more could you do to develop the talent you have and find the additional talent you need? What talent actions would likely lead to the greatest improvements on your Pillar 3 self-assessment the next time around?

What additional resources or support do you need?

GLOSSARY

This glossary provides explanations of terms we used in this pillar. While not exhaustive, it includes terms that may have multiple meanings, due to different perspectives.

Dosage – The amount of service a program delivers to its clients (e.g., one hour of tutoring per week, four two-hour home visits per month).¹

Evaluation – The systematic assessment, usually conducted by outside experts, of an organization’s attempt to produce significant change through intentional actions. For information on the two key types of evaluations, see “Formative evaluation” and “Summative evaluation” below.²

Fidelity – The extent to which a program is implemented as designed.³

Formative evaluation – An evaluation organizations commission to help them improve the performance of a program while it is underway. Also called *process evaluation*. Formative evaluations can be designed to assess any of the following aspects of program delivery: the quality of internal data; the fidelity of a program to its model; how well a program is recruiting and enrolling the population for which it is designed; program utilization, program completion, and participant engagement; and which clients achieve the intended outcomes, which do not, and which exit the program prematurely.

Impact (also referred to as Net Impact) – Meaningful, measurable results beyond what would have happened anyway. Achieving impact requires not only that good things happen, but also that those things are a *direct result of the organization’s efforts*. Assessing whether an organization has achieved impact almost always requires external evaluations that are capable of factoring out (at a high level of statistical probability) other explanations for how the results came to be.⁴

Indicator – Specific, observable, and measurable characteristics, actions, or conditions that demonstrate whether a desired change has happened toward the intended outcomes. For example, grades and standardized test scores can be used as indicators of academic achievement.⁵

Mission creep – The gradual broadening of the original objectives of a mission of an organization beyond its strengths and capabilities, often in response to funding opportunities. Mission creep leads to a loss of focus, which can have a negative effect on organizational effectiveness.⁶

Outcomes – Socially meaningful changes for those served by a program, generally defined in terms of expected changes in knowledge, skills, attitudes, behavior, condition, or status. For example, a tutoring program might define its intended outcomes as measurable improvements in reading and math skills.⁷

Outputs – The volume of a program’s actions, such as products created or delivered; number of people served; and activities and services carried out.⁸

Program model – A clear, actionable description of all the key activities, and the linkages among activities, designed to produce a set of outcomes. Elements of a program model include what services should be delivered; what activities provided; what competencies staff/volunteers need to deliver the model at a high level of quality and effectiveness; the amount and frequency of services; and the duration of program participation.⁹

Summative evaluation – Evaluation of a program in its later stages or after it has been completed to (a) assess its impact (b) identify the factors that affected its performance (c) assess the sustainability of

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its results, and (d) draw lessons that may inform other interventions. Summative evaluations are almost always performed by outside experts.¹⁰

Target audience – Groups an organization needs to influence if it is to create its intended knowledge, attitude, behavior, or policy change.

Target population – Clients at the core of an organization’s mission with whom it works to achieve measurable outcomes. High-performance organizations are rigorous about defining the criteria for their target populations and using those criteria as the basis for determining who qualifies for services.

Theory of change – The overarching set of formal relationships presumed to exist for a defined population, the intended outcomes that are the focus of the organization’s work, and the logic model for producing the intended outcomes. A theory of change should be meaningful to stakeholders, plausible in that it conforms to common sense, doable with available resources, and measurable.¹¹

Validity – The extent to which the data collection strategies and instruments measure what they purport to measure.¹²

¹ Adapted from Wasik, B. A., Mattera, S. K., Lloyd, C. M., & Boller, K. (2013). *Intervention dosage in early childhood care and education: It’s complicated* (OPRE Research Brief OPRE 2013-15). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from http://www.acf.hhs.gov/sites/default/files/opre/dosage_brief_final_00r_o.pdf

² Adapted from Hunter, David E. K. (2013). *Working Hard and Working Well: A Practical Guide to Performance Management for Leaders Serving Children, Adults, and Families*. Hartford CT: Hunter Consulting.

³ Adapted from National Implementation Research Network. (Undated). *Glossary*. Retrieved from <http://nirn.fpg.unc.edu/learn-implementation/glossary>

⁴ Adapted from Morino, M. (2011). *Leap of Reason: Managing to Outcomes in an Era of Scarcity*. L. Weiss & Collins, C. (Eds.). Washington, DC: Venture Philanthropy Partners, in partnership with McKinsey & Company.

⁵ Adapted from Morino, M. (2011). *Leap of Reason: Managing to Outcomes in an Era of Scarcity*. L. Weiss & Collins, C. (Eds.). Washington, DC: Venture Philanthropy Partners, in partnership with McKinsey & Company.

⁶ Adapted from Merriam-Webster Dictionary. (2016). Retrieved from <http://www.merriam-webster.com/dictionary/mission%20creep>

⁷ Adapted from Morino, M. (2011). *Leap of Reason: Managing to Outcomes in an Era of Scarcity*. L. Weiss & Collins, C. (Eds.). Washington, DC: Venture Philanthropy Partners, in partnership with McKinsey & Company.

⁸ Morino, M. (2011). *Leap of Reason: Managing to Outcomes in an Era of Scarcity*. L. Weiss & Collins, C. (Eds.). Washington, DC: Venture Philanthropy Partners, in partnership with McKinsey & Company.

⁹ Adapted from: National Implementation Research Network. (Undated). *Glossary*. Retrieved from <http://nirn.fpg.unc.edu/learn-implementation/glossary>; and Hunter, David E. K. (2013). *Working Hard and Working Well: A Practical Guide to Performance Management for Leaders Serving Children, Adults, and Families*. Hartford CT: Hunter Consulting.

¹⁰ Adapted from USAID (2009). *Glossary of Evaluation Terms*. Washington, DC: Planning and Performance Management Unit, Office of the Director of U.S. Foreign Assistance, United States Agency for International Development. Retrieved from http://pdf.usaid.gov/pdf_docs/Pnado82o.pdf



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¹¹ Morino, M. (2011). *Leap of Reason: Managing to Outcomes in an Era of Scarcity*. L. Weiss & Collins, C. (Eds.). Washington, DC: Venture Philanthropy Partners, in partnership with McKinsey & Company.

¹² OECD Development Assistance Committee. (Undated). Evaluation and Aid Effectiveness: Glossary of Key Terms in Evaluation and Results Based Management. Retrieved from <http://www.oecd.org/dac/evaluation/18074294.pdf>