2019-20 California Performance Measurement Worksheet (PMW)

PMW Cover Sheet

Program Information--complete for the entire program

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| --- | --- |
| Program Name: |  |
| Total Number of MSY: |  |
| Total Number of Slots: |  |
| Member Hours Per Slot Type for PROGRAM: | **1700 x \_\_\_ = \_\_\_; 1200 x \_\_\_ = \_\_\_; 900 x \_\_\_ = \_\_\_; 675 x \_\_\_ = \_\_\_; 450 x \_\_\_ = \_\_\_; 300 x \_\_\_ = \_\_\_** |
| Total Member Hours for the PROGRAM: |  |
| Will Member perform ANY fundraising activities? | **YES** and a Fundraising PMW is included.  **NO,** members will not do any fundraising activities |

MSY Allocation per Performance Measure – *Enter the total share of program resources (MSYs and members) that will be directed to each national service objective for your program’s needs and service performance measures. Count member development/training hours in the total percentage of member time for the objective. Duplicate the table as needed.*

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| --- | --- | --- | --- | --- | --- | --- | --- |
| Performance Measure Title: | | | | | | | |
| CNCS Strategic Plan Objective[[1]](#footnote-1): Focus Area[[2]](#footnote-2): | | | | | | | |
| PM Type:  Applicant-Determined Measure[[3]](#footnote-3)  National Performance Measure[[4]](#footnote-4) | | | | | | | |
| Member Type | MSY Multiplier for Type | X | Number of Members for Type | X | % of Member Time for Objective | = | MSY Allocation |
| FT | 1 |  |  |  |  |  |  |
| TQT | .7 |  |  |  |  |  |  |
| HT | .5 |  |  |  |  |  |  |
| RHT | .3809524 |  |  |  |  |  |  |
| QT | .26455027 |  |  |  |  |  |  |
| MT | .21164022 |  |  |  |  |  |  |
| Total Members: | | |  | Total MSYs: | | |  |
| Performance Measure Title: | | | | | | | |
| CNCS Strategic Plan Objective[[5]](#footnote-5): Focus Area[[6]](#footnote-6): | | | | | | | |
| PM Type:  Applicant-Determined Measure[[7]](#footnote-7)  National Performance Measure[[8]](#footnote-8) | | | | | | | |
| Member Type | MSY Multiplier for Type | X | Number of Members for Type | X | % of Member Time for Objective | = | MSY Allocation |
| FT | 1 |  |  |  |  |  |  |
| TQT | .7 |  |  |  |  |  |  |
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| RHT | .3809524 |  |  |  |  |  |  |
| QT | .26455027 |  |  |  |  |  |  |
| MT | .21164022 |  |  |  |  |  |  |
| Total Members: | | |  | Total MSYs: | | |  |

California Performance Measurement Worksheet (PMW) --DO NOT change the format of PMW

### **Needs and Service PMW**

\*\*Must be completed using this exact PMW format. See RFA Instructions for more detailed guidance on how to complete this PMW.\*\*

|  |  |  |
| --- | --- | --- |
| **Answer for THIS Performance Measure (PM)** |  | |
| **Performance Measure Title:** |  | |
| **Performance Measure Type:** *check all that apply* | PRIMARY PMW—where members spend most of their hours  Non-primary PMW | National Performance Measure (NPM)  Applicant-Determined Measure (APM) |
| **Number of MSYs and Slots Dedicated to This PM:** | # of MSYs: | # of Slots: |

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| **PMW Elements** | | **PROGRAM DESIGN** |
| **1** | **Community Need**  State the community problem and the specific need addressed by the program. This is a brief summary highlighting key relevant data not to exceed 500 characters with spaces. |  |
| **2** | **Target Population:**  Answer a. through c. for the high-need target population. | 1. Describe the high need target population: 2. # of direct high need beneficiaries: 3. Describe the high need beneficiary ***selection*** process: |
| **3** | **Amount of Service**  Amount of member service hours dedicated to this intervention. Answer a. through e. for this PM. | 1. # of Members: \_\_\_\_\_\_\_\_ 2. Hours per day: \_\_\_\_\_\_\_\_ 3. # of days per week: \_\_\_\_\_\_\_\_ 4. Duration [in weeks]: \_\_\_\_\_\_\_\_ 5. Total estimated member hours for this intervention: \_\_\_\_\_\_\_\_ |
| **4** | **Intervention**  Describe the **core activities** that define the intervention members will implement or deliver. Include the ***dosage***:  a. Frequency or number of sessions per/ week; b. Intensity or length of each session; and  c. Duration or total number of hours, weeks, sessions or months of the intervention. | 1. Describe core activities: 2. Describe dosage: |

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| **PMW Elements** | | **OUTPUT** | **OUTCOME** |
| 5 | **Result**  A brief statement of the desired result (i.e., Increase academic skills; or Increase recycling awareness, etc.). Reflects the result the community desires. |  |  |
| 6 | **Indicator**  The thing the community will look at to gauge progress toward the result. | The number of… | The number of… |
| 7 | **Instrument**  Describe the specific instrument(s) you will use to measure the output or outcome indicators. Include the title of the instrument(s), a brief description of what it measures and how it will be administered, and details about its reliability and validity if applicable. **Each** indicator identified in Row 3 needs to have a corresponding instrument. Answer a-e for each instrument used to measure the output target and a-h for each instrument used to measure the outcome target. | Instrument Description to include the following:   1. Name or title of instrument 2. Specific data it will collect 3. The minimum number of hours, days, or other units of participation required to be counted 4. Who will administer the instrument 5. How often each service recipient will be assessed | Instrument Description to include the following:   1. Name or title of instrument 2. What the instrument will measure and how the construct to be measured is defined 3. The minimum number of hours, days, or other units of participation required to be counted 4. The level of improvement that is necessary to meet target and be counted as having improved 5. Procedure for ensuring service recipients will not be double-counted 6. Details on the instrument’s reliability and validity: 7. Who will administer the instrument 8. How often each service recipient will be assessed 9. If applicable, how the instrument is sufficient to meet the data collection requirements outlined in CNCS National Performance Measures Instructions. |
| 8 | **Targets**  **Output** Targets are simple tallies and counts.**Outcome** targets must have four components:   * + - 1. # of people/things that changed       2. What changed       3. Amount of the change       4. Dosage |  |  |
| 9 | **Prior Data** | **FILL THIS IN** with relevant prior data! | **FILL THIS IN** with relevant prior data! |

CALIFORNIA PERFORMANCE MEASUREMENT WORKSHEET

### [REQUIRED] **Common Strengthening Communities**

**Answer for THIS Performance Measure (PM)**

|  |  |
| --- | --- |
| **Performance Measure Title:** | **Volunteer Recruitment** |
| **Performance Measure Type:** *check all that apply* | Self-nominated or applicant-determined  National performance measure  PRIMARY PMW—where members spend most of their hours  Non-primary PMW |

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| **PMW Elements** | | **PROGRAM DESIGN** |
| **1** | **Community Need**  State the community problem and the specific need addressed by this PM. This is a brief summary highlighting key relevant data not to exceed 500 characters with spaces. |  |
| **2** | **Target Population**  Describe the Target Population to recruit (e.g. *Baby boomers, seniors, etc.)* |  |
| **3** | **Amount of Service**  Amount of member service hours dedicated to this intervention. Answer a. through e. for this PM. | 1. # of Members: \_\_\_\_\_\_\_\_ b. Hours per day: \_\_\_\_\_\_\_\_ c. # of days per week: \_\_\_\_\_\_\_\_ d. Duration [in weeks]: \_\_\_\_\_\_\_\_ 2. Total estimated member hours for this intervention: \_\_\_\_\_\_\_\_ |
| **4** | **Intervention/Activity**  Describe how members will recruit  volunteers, & if applicable, any other activities in this PM. |  |

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| **PMW Elements** | | **OUTPUT--** *required* | **OUTCOME--***optional* |
| 5 | **Result**  A brief statement of the desired result Reflects the result the community desires. |  |  |
| 6 | **Indicator**  The thing the community will look at to gauge progress toward the result. | [1] The number of volunteers recruited for on-going activities  [2] The number of volunteers recruited for one-time activities  [3] The number of on-going volunteer hours served  [4] The number of one-time volunteer hours served | The number of… |
| 7 | **Instrument**  What **data** and **instruments** will be used to measure indicators? | [1] Volunteer Log to collect data on # of volunteers recruited for on-going activities.  [2] Volunteer Log to collect data on # of volunteers recruited for one-time activities.  [3] Volunteer Log to collect data on # of volunteer hours for on-going activities.  [4] Volunteer Log to collect data on # of volunteer hours for one-time activities. |  |
| 8 | **Targets**  State the **targets** that you expect to meet on this PM for each of three years. | [1] \_\_\_\_\_\_\_\_volunteers recruited for on-going activities  [2] \_\_\_\_\_\_\_\_ volunteers recruited for one-time activities  [3] \_\_\_\_\_\_\_\_ volunteer hours for on-going activities  [4] \_\_\_\_\_\_\_\_ volunteer hours for one-time activities |  |
| 9 | **Prior Data** | **FILL THIS IN** with relevant prior data! | **FILL THIS IN** with relevant prior data! |

**CALIFORNIA PERFORMANCE MEASUREMENT WORKSHEET**

### [REQUIRED] Common Member Development

**Answer for THIS Performance Measure (PM)**

|  |  |
| --- | --- |
| **Performance Measure Title:** | **Member Development** |
| **Performance Measure Type:** *check all that apply* | Self-nominated or applicant-determined  National performance measure  PRIMARY PMW—where members spend most of their hours  Non-primary PMW |

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| --- | --- | --- |
| **PMW Elements** | | **PROGRAM DESIGN** |
| 1 | **Community Need**  State the community problem and the specific need addressed by this PM. A brief summary, not to exceed 500 characters with spaces | *Members deserve to be appropriately trained to perform the services assigned, to increase both professional skills and community development skills, and to enhance their esprit de corps experience.* |
| 2 | **Target Population**  Answer a-f regarding AmeriCorps members. | a. # of FT Members [1700 hrs.]: \_\_\_\_\_\_\_\_ d. # of TQT Members [1200 hrs.]: \_\_\_\_\_\_\_\_  b. # of HT Members [900 hrs.]: \_\_\_\_\_\_\_\_ e. # of RHTT Members [675 hrs.]: \_\_\_\_\_\_\_\_  b. # of QT Members [450 hrs.]: \_\_\_\_\_\_\_\_ e. # of MT Members [300 hrs.]: \_\_\_\_\_\_\_\_  f. # MSY: \_\_\_\_\_\_\_\_ |
| 3 | **Amount of Training**  Enter the number of hours per member. See <http://www.nationalservice.gov/sites/default/files/upload/policy%20FAQs%207.31.14%20final.pdf> for orientation requirements. No member service hours may be earned from home without written CV approval. | a. Orientation: [# of members \_\_\_\_\_\_\_] x [# of hours \_\_\_\_\_\_\_\_] = \_\_\_\_\_\_\_\_\_\_\_  b. Ongoing Hours: [# of members \_\_\_\_\_\_\_] x [# of hours \_\_\_\_\_\_\_\_] = \_\_\_\_\_\_\_\_\_\_\_  c. National Service: [# of members \_\_\_\_\_\_\_] x [# of hours \_\_\_\_\_\_\_\_] = \_\_\_\_\_\_\_\_\_\_\_  d. Other: [# of members \_\_\_\_\_\_\_] x [# of hours \_\_\_\_\_\_\_\_] = \_\_\_\_\_\_\_\_\_\_\_  e. Total Member Training Hours [add a., b., c., and d.] \_\_\_\_\_\_\_\_\_\_\_\_ |
| 4 | **Intervention/Activity**  Briefly outline the training and support your programwill provide to members. Include core trainings members need to deliver program services. Include frequency/number of hours. |  |

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| **PMW Elements** | | **OUTPUT** | **OUTCOME** |
| 5 | **Result**  A brief statement of the desired result (i.e., Increase academic skills; or Increase recycling awareness, etc.). Reflects the result the community desires. | Members receive the training to provide quality service to the community and *…[add as needed for program]* | Members increase knowledge & skills, gain insight into the community, experience the power of national service, and…*[add as needed for program]* |
| 6 | **Indicator**  The thing the community will look at to gauge progress toward the result. | *The number of members trained in program’s Core Training* | *The number of members who increase their knowledge and skills and[add as needed for program]…* |
| 7 | **Instrument**  What **data** and **instruments** will be used to measure indicators? | 1. Instrument Description: Training Log to collect data on member names, specific topic, and # of hours 2. Completed by: Member, Verified by Member Supervisor 3. Frequency: As needed for each training provided. | 1. Instrument Description: Member Performance Review to collect data on member skill increases. 2. Completed by: Member Supervisor 3. Frequency: Two times per year (minimum) |
| 8 | **Targets**  State the **targets** that you expect to meet on this PM for each of three years. | XX number members will complete XX hours of Core Training. | XX of members will increase skills by XX%. |
| 9 | **Prior Data** | **FILL THIS IN** with relevant prior data! | **FILL THIS IN** with relevant prior data! |

1. See current year CNCS Performance Measures Instruction [↑](#footnote-ref-1)
2. See current year RFA [↑](#footnote-ref-2)
3. An Applicant-Determined Measure is a performance measure determined by the applicant that is not included in the CNCS National Performance Measures Instructions. [↑](#footnote-ref-3)
4. National Performance Measure are included in the CNCS National Performance Measures Instructions. [↑](#footnote-ref-4)
5. See current year CNCS Performance Measures Instruction [↑](#footnote-ref-5)
6. See current year RFA [↑](#footnote-ref-6)
7. An Applicant-Determined Measure is a performance measure determined by the applicant that is not included in the CNCS National Performance Measures Instructions. [↑](#footnote-ref-7)
8. National Performance Measure are included in the CNCS National Performance Measures Instructions. [↑](#footnote-ref-8)