Community Impact Funding Outcome Framework

The following tables outline the outcomes UWGN will be funding through the 2023-2025 Community Impact Funding (CIF) process. For each outcome, we provide a definition, suggested methods for collecting the data, and details about reporting requirements in eCImpact. Agencies are required to select outcomes from this list when applying for CIF. If awarded, grantees submit a mid-year (due January 30 of each year) and year-end report (due July 30 of each year) in eCImpact and will be required to report on each of the outcomes that were selected during the initial application.

- The definitions given for each outcome are intentionally broad. Each agency should further define how their work targets a specific outcome and how they define success, based on the specific context that you work in.
- We provide guidance on appropriate ways to measure outcomes based on good evaluation practice. Each agency's evaluation strategy will vary based on their services, populations, and resources.
 - For some outcomes, we recommend a standardized assessment. This means an assessment that is the same every time it is completed (as opposed to a semi-structured or unstructured interview or observation), and that staff complete in the same way. Standardized assessments might be developed in house or adopted from other agencies.
 - For some outcomes, we recommend a validated assessment. This means research was conducted on the assessment itself to ensure it takes a reliable measurement of the concepts it is measuring. For example, literacy assessments for children are well-researched and score against national benchmarks. All validated assessments are standardized by not all standardized assessments are validated.

Promote Strong & Healthy Co	ommunities	1	1		
Outcome Name	Definition	Data Collection Guidance	eCImpact Outo	comes Reporting	
	How UW is defining	How to measure this	How to report this outcome		
	achievement	outcome with clients	# Served	# Achieved	
			How to count individuals	How to count individuals who	
			served under the outcome	have achieved the outcome	
1.01	Grantees define what specific	Client self-report	# of individuals receiving	# of individuals who report	
Increase health knowledge.	health knowledge they seek to	standardized assessment	services that target health	increased health knowledge	
	increase for participants in their	measuring the specific	knowledge during the	through self-reported	
	grant application.	health knowledge targeted	reporting period.	measure from baseline to follow-up.	
		by the grantee's services		10110W-up.	
		or programming from			
		baseline to follow up. This			
		can be a pre and post			
		assessment or a			
		retrospective pre-post.			
1.02	In general, this outcome	Client self-report	# of individuals receiving	# of individuals who report	
Behavior change to support	encompasses behavior changes	assessment of their health-	services that target health	increase in healthy behaviors	
health improvements.	that will lead to improved health	related behaviors targeted	related behavior change	or a decrease in unhealthy	
	indicators, such as reduced	by the program.	during the reporting period.	behaviors during the	
	tobacco use, reduced substance	Assessment should be		reporting period.	
	use, increased exercise, etc.	administered at baseline			
	Specific behaviors targeted will	and follow up.			
	vary by program, and grantees				
	define the health behaviors they				
	target in their grant application.				
1.03	Encompasses all physical health	Standard physical health	# of individuals receiving	# of individuals who improved	
Improve physical health.	indicators, excluding oral and	measures or assessments	services that target physical	their physical health measures	
	mental health indicators.	taken by medical staff	health indicators during the	from baseline to follow up OR	
	Examples include A1C, blood	from baseline to follow up.	reporting period.	are in the healthy range for	
	pressure, cholesterol, etc.	Appropriate measures vary		the selected measures during	
	Grantees specify the specific	by intervention or		the reporting period.	
	health indicators targeted by	program.			

	their programming in their grant application.			
1.04 Improve mental health.	Encompasses all mental health indicators. Examples include depression symptoms, suicidal ideation, manic symptoms, etc. Grantees specify the specific mental health indicators	Validated assessments of mental health symptoms or indicators targeted by the grantee's services. Assessments should be administered at baseline	# of individuals receiving services that target mental health indicators during the reporting period.	# of individuals who improved their mental health measures OR are in the sub-clinical range for the selected measures during the reporting period.
	targeted by their programming in their grant application.	and follow up.		
1.05 Improve oral health.	Encompasses all oral health indicators. Examples include tooth loss, gum disease severity, cavities, etc.	Standard oral health measures or assessments taken by medical staff from baseline to follow up. Appropriate measures vary by intervention or program.	# of individuals receiving services that target oral health indicators during the reporting period	# of individuals who improved their oral health measures OR are in the healthy range for the selected measures
1.06	Individuals achieve this outcome	Standardized self-report	# of individuals who received	# of individuals who report
Increase positive beliefs	when they report increased	assessment administered	services targeting their beliefs	increased positive beliefs
about the future.	positive perceptions about their own future after participating in the programming.	pre and post programming or retrospective pre/post. Wherever possible, utilize a validated assessment that measures the specific construct your programming targets.	about their future	about their future from baseline to follow-up.
1.07	Trusting relationships refer to	Standardized self-report	# of individuals who received	# of individuals who report
Increase trusting	emotional safety with friends,	assessment administered	services targeting their social	increased positive beliefs about their future from
relationships.	family, mentors, etc. Applies to youth, adults, and elders.	pre and post programming or retrospective pre/post. Where ever possible, utilize a validated assessment that measures	network and trusting relationships	baseline to follow-up.

		the specific construct your programming targets.		
1.08 Increase connections to others.	Connections refer to weaker social ties that individuals may have contact with. The focus of this outcome is to reduce isolation by increasing connections of any type with others.	Self-reported standardized assessments	# of individuals who received services targeting their connections to others.	# of individuals who report an increase in connections to others from baseline to follow-up.
1.09 Increase formal participation or roles in community organizations.	This includes formal participation of all kinds with any social or civic organization. Grantees should specify what kinds of participation the proposed services focus on.	Self-reported standardized assessments	# of individuals who received services targeting their formal participation in community organizations.	# of individuals who report increased formal participation or roles in community organizations from baseline to follow-up.
Achieve Literacy Proficiency Outcome Name	Definition	Data Collection Guidance	eCImpact Outco	omes Reporting
			How to report this outcome	
	How UW is defining achievement	How to measure this outcome with clients	How to report	• •
	-		How to report # Served How to count individuals served under the outcome	• •

	dynamics. Specific parenting skills may vary based on population served and curriculum used.	and post or retrospective pre/post self-assessments. Whenever possible, utilize standardized assessments that align with or are part of the parenting skills curriculum used in the program.		
2.02 Increase knowledge among parents regarding early childhood literacy and/or numeracy.	Specific topics within early childhood literacy and numeracy can vary. Grantees specify in their application what topics their parent education programming will focus on.	Pre and post or retrospective pre/post self-report assessments that measure targeted knowledge areas from baseline to follow up. Whenever possible, utilize standardized assessments that align with or are part of the parent education curriculum used in the program.	# of individuals who received services focused on increasing their knowledge of early childhood literacy and numeracy.	# of individuals who demonstrated improvement in the knowledge assessment from baseline to follow-up.
2.03 Increase knowledge among parents, caregivers, and/or teachers regarding social emotional learning (SEL) among children.	Specific topics within social emotional learning can vary. Grantees specify in their application: - the population of focus for this outcome - how they define social emotional learning among children - topics within SEL that their programming focuses on	Pre and post or retrospective pre/post self-report assessments that measure targeted knowledge areas from baseline to follow up. Whenever possible, utilize standardized assessments that align with or are part of the education curriculum used in the program.	# of individuals who participated in services focused on increasing target population's knowledge of SEL among children.	# of individuals who demonstrated improvement in the knowledge assessment from baseline to follow-up.

2.04 Increase or maintain parental or caregiver engagement in their child's education.	Specific behaviors that constitute "engagement in child's education" can vary. Grantees specify in their application what behaviors they define as engagement. Examples could include parent or caregiver engagement with their child's teacher, engagement with the school administration, increased time spent helping their child with homework, etc.	Parent or caregiver self- report assessment that measures targeted engagement behaviors at baseline and follow up time points, such as a pre/post assessment or a retrospective pre/post.	# of individuals who received services focused on increasing their engagement in their child's education.	# of individuals who demonstrated an increase in engagement behaviors from baseline to follow-up, based on assessment.
2.05 Achieve or maintain high attendance among children.	Attendance can include attendance to out of school time (OST) programs and school attendance, based on what is appropriate for the grantee's services. "High" attendance can vary based on program, and grantees should specify an appropriate threshold for the proposed services.	This outcome requires grantees to track attendance as defined by the program and define a benchmark or threshold for what constitutes "high" attendance. Options for tracking attendance include: - Tracking attendance at OST program - Parent reported school attendance from baseline to follow up. - Recording attendance from report cards or progress reports - Accessing attendance data through MNPS or other providers	# of children receiving services focused on improving or maintaining attendance.	# of children with attendance that is within the "high" attendance range at follow up, as defined by the grantee. This includes both children who began and ended the grant year within the "high" range AND children who began the grant year with low attendance and moved into the "high" range.

2.06	Social emotional skills refers	Validated assessment to	# of children who participated	# of children who
Increased social emotional	broadly to skills necessary for	measure the social	in services focused on	demonstrated an increase in
skills among children.	children to recognize and regulate	emotional skills targeted	improving their social	their social emotional skills
	their emotions and behaviors and	by the proposed services	emotional skills.	assessment from baseline to
	build healthy relationships.	at baseline and follow up.		follow-up.
	Grantee agencies may include	Assessments should be		
	other dimensions of social	appropriate for the age		
	emotional skills as well. Grantees	group served, and may		
	specify in their application what	include observations or		
	social emotional skills their	self-report assessments		
	services focus on increasing	for older children.		
	among children.	Whenever possible, utilize		
		standardized assessments		
		that align with or are part		
		of the curriculum used in		
		the program.		
2.07	Individual growth within children	Validated assessment to	# of children who received	# of children who
Increased literacy and/or	from baseline to follow up on	measure literacy and/or	services focused on improving	demonstrated an increase in
numeracy skills among	literacy and or numeracy skills.	numeracy skills from	literacy and/or numeracy	literacy and/or numeracy
children.		baseline to follow up	during the reporting period.	skills from baseline to follow-
		point(s). Assessments		up during the reporting
		must be appropriate for		period.
		the age group		
		participating in the		
		proposed services.		
		Whenever possible, utilize		
		standardized assessments		
		that align with or are part		
		of the curriculum used in		
		the program.		
2.08	Literacy skills among adults refers	Because adult literacy is	# of individuals who	# of individuals who
Increase literacy and/or	to reading, writing, and	functional and may be	participated in services focused	demonstrate an improvement

numeracy skills among adults.	numeracy. Literacy among adults focuses on functioning in daily life and individual goal achievement. This can apply to native English speakers or English Language Learners.	focused on individual goals, grantees may choose to assess literacy and/or numeracy gains in a number of ways: - Literacy or numeracy assessments at baseline and follow up - Individual goal achievement - Self-report measure of confidence navigating literacy in daily life	on improving literacy and/or numeracy skills during the reporting period.	in literacy and/or numeracy according to the grantee's measure of these skills.	
Achieve Household Self-Suffic	iency.				
Outcome Name	Definition How UW is defining achievement	Data Collection Guidance How to measure this outcome with clients	eCImpact Outcomes Reporting How to report this outcome		
	acinevement	outcome with chefts	# Served How to count individuals served under the outcome	# Achieved How to count individuals who have achieved the outcome	
3.01 Increase graduation from	Includes high school, HSE and all post-secondary formal education types. Includes job skills	Client self-report of completion.	# of individuals who received services to support completion of	# of individuals who completed a secondary or	

3.02 Participate in on-the-job opportunities for career exposure.	Includes youth and adults working directly on the job to improve employment skills and gain working experience.	Client attendance records.	# of individuals who participated in on-the-job training.	# of individuals who completed on-the-job training.
3.03 Increase job skills through training opportunities.	Includes job skills training in a classroom or program setting not provided on the job or through formal education. Can include resume building, interview skills, customer service skills, skilled trades, etc. Grantees should specify the job skills targeted by the proposed services.	Appropriate data collection methods may vary based on the skills targeted by services. Standardized pre and post or retrospective pre/post assessments capture changes in knowledge and attitudes. Observation checklists pre and post capture changes in behavior.	# of individuals who received job skills training in classroom or program settings.	# of individuals who demonstrated increases in knowledge, attitudes, or skills targeted by the training.
3.04 Obtain employment.	Employment is obtained in an industry credentialed field.	Client self-report of employment status or wage verification with employers.	# of individuals receiving employment placement services.	# of individuals who obtained employment.
3.05 Maintain employment.	Clients "maintain" employment when they remain in a job at least 3 months after initial employment AND are working at least the same hours and making the same income as their initial employment. A reduction in hours or pay at the same job does not qualify as "maintaining" for this outcome.		# of individuals employed who are receiving support services to maintain employment.	# of individuals who remain employed at least 3 months after initial employment with at least the same hours and pay.
3.06 Incubate or launch Small Business.	Individuals or families successfully establish a small business with proper license or expands an existing small business. "Expansion" can be defined by the grantee.	established or expanded during reporting period.	# of individuals receiving services to support small business incubation.	# of individuals who secured a business license or expanded their business.

3.07	In the initial application, grantees	Data collection methods	# of individuals receiving	# of individuals who
Improve Financial Behaviors.	must specify what financial	vary based on the financial	services that target their	demonstrated improvement
	behaviors the proposed services	behaviors targeted by the	financial behaviors, as defined	in the targeted financial
	target by selecting from this list	program. The time between	by the grantee.	behaviors based on relevant
	(select all that apply):	pre and post will also vary		measures.
	- Increase savings	and should be set by the		
	- Decrease debt	grantee.		
	 Increase credit score 	 Increase savings: Bank 		
	 Established bank accounts 	statements pre and post		
	 Increased financial knowledge 	programming		
	(youth only)	- Decrease debt: Account		
		statements pre and post		
		programming		
		- Increase credit score: Third		
		party credit report pre and		
		post programming		
		- Establish bank accounts:		
		Bank statement post		
		programming		
		- Increased financial		
		knowledge (18 or younger):		
		Pre and post assessment		
		measuring knowledge		
		targeted by the		
		programming		

Outcome Name	Definition How UW is defining	Data Collection Guidance How to measure this	eCImpact Outco How to report	eCImpact Additional Reporting	
	achievement	outcome with clients	# Served How to count individuals served under the outcome	# Achieved How to count individuals who have achieved the outcome	Improve Quality of Life Detail
4.01 Provide emergency financial assistance.	Financial assistance provided to meet an emergent need. Assistance is intended to keep families housed but is NOT limited to housing related items only - assistance with other areas protects families' ability to pay rent and stay housed.	All clients served can be counted as achieved for basic needs services.	# of individuals who received emergency financial assistance.	 # of individuals who received emergency financial assistance. This will be the same as number served. 	 # of households who received emergency financial assistance. # of people in each household Average amount per family.
4.02 Provide short term emergency shelter.	Any emergency shelter provided for 90 days or less.	All clients served can be counted as achieved for basic needs services.	# of individuals who received short term emergency shelter.	 # of individuals who received short term emergency shelter. This will be the same as number served. 	Total # of bed nights available to participants. Total # of bed nights provided. Average length of stay during reporting period.
4.03 Obtain stable housing.	"Stable" housing is housing the client can stay in longer than 90 days. Excludes living in a place unintended for habitation (streets, parks, cars), hotel/motel, or a combination of these.	Client self-report of housing status or verified housing status during reporting period.	# of individuals who received services targeting stable housing during the reporting period.	# of individuals who moved into stable housing during the reporting period.	# of households obtaining housing. # of individuals in each household that were served and housed.

Maintenance is defined as	Client self-report of	# of individuals who	# of individuals who	Total # of individuals in
staying in stable housing for	housing status or verified	received services targeting	remained in housing for six	a household.
6 months from the date of	housing status during	maintaining housing during	consecutive months or	
moving into housing.	reporting period.	the reporting period.	longer from the date of	Housing status at
Excludes living in a place			entry during the reporting	baseline and follow up
unintended for habitation			period.	time points, collected
(streets, parks, cars),				in program records.
hotel/motel, or a				
combination of these.				
Providing food boxes, meals,	All clients served can be	# of individuals who	# of individuals who	# of meals provided.
or access to food pantries.	counted as achieved for	received emergency food	received emergency food	
	basic needs services.	assistance.	assistance.	# of households served.
			This will be the same as	# of people in
			number served.	households.
Food security refers to a	Client self-report	# of individuals receiving	# of individuals who	# of households who
family's ability to regularly	assessment measuring	services that target long	reported an increase in	report increased food
access healthy foods.	regular access to healthy	term food security during	food security during the	security.
	food from baseline to	the reporting period.	reporting period.	
	follow up. This can be a			Total # of individuals in
	pre and post assessment			households served.
	or a retrospective pre- post.			
Assistance provided to	All clients served can be	# of individuals receiving	# of individuals receiving	Types of crises.
address a health related	counted as achieved for	services to address a health	services to address a	
emergency or crisis situation	basic needs services.	related crisis during the	health related crisis during	# of referrals following
to stabilize an individual.		reporting period.	the reporting period.	crisis response.
			This will be the same as	
			number served.	
	staying in stable housing for 6 months from the date of moving into housing. Excludes living in a place unintended for habitation (streets, parks, cars), hotel/motel, or a combination of these. Providing food boxes, meals, or access to food pantries. Food security refers to a family's ability to regularly access healthy foods.	staying in stable housing for 6 months from the date of moving into housing. Excludes living in a place unintended for habitation (streets, parks, cars), hotel/motel, or a combination of these.housing status or verified housing status during reporting period.Providing food boxes, meals, or access to food pantries.All clients served can be counted as achieved for basic needs services.Food security refers to a family's ability to regularly access healthy foods.Client self-report assessment measuring regular access to healthy food from baseline to follow up. This can be a pre and post assessment or a retrospective pre- post.Assistance provided to address a health related emergency or crisis situationAll clients served can be counted as achieved for basic needs services.	staying in stable housing for 6 months from the date of moving into housing. Excludes living in a place unintended for habitation (streets, parks, cars), hotel/motel, or a combination of these.housing status or verified housing status during reporting period.received services targeting maintaining housing during the reporting period.Providing food boxes, meals, or access to food pantries.All clients served can be counted as achieved for basic needs services.# of individuals who received emergency food assistance.Food security refers to a family's ability to regularly access healthy foods.Client self-report assessment measuring regular access to healthy food from baseline to follow up. This can be a pre and post assessment or a retrospective pre- post.# of individuals receiving services that target long the reporting period.Assistance provided to address a health related emergency or crisis situationAll clients served can be counted as achieved for basic needs services.# of individuals receiving services that target long term food security during the reporting period.	staying in stable housing for 6 months from the date of moving into housing. Excludes living in a place unintended for habitation (streets, parks, cars), hotel/motel, or a combination of these.housing status during reporting period.received services targeting maintaining housing during the reporting period.remained in housing for six consecutive months or longer from the date of entry during the reporting period.Providing food boxes, meals, or access to food pantries.All clients served can be counted as achieved for basic needs services.# of individuals who received emergency food assistance.# of individuals who received emergency food assistance.Food security refers to a family's ability to regularly access healthy foods.Client self-report assesment measuring regular access to healthy food from baseline to follow up. This can be a pre and post assessment or a retrospective pre- post.# of individuals receiving services that target long term food security during the reporting period.# of individuals receiving services that target long term food security during the reporting period.All clients served can be of and from baseline to follow up. This can be a pre and post assessment or a retrospective pre- post.# of individuals receiving services to address a health related crisis during the reporting period.# of individuals receiving services to address a health related crisis during the reporting period.All clients served can be counted as achieved for basic needs services.# of individuals receiving services to address a health related crisis during the reporting period.Assistance provided to addr