**DOMAIN:** Program Quality

**OUTCOME:** Staff-Reported Program Quality

**MEASURE:** Staff Perceptions of Program Practices (SPPP)

**AGENCY PRACTICES SECTION**

**Management and Planning (8 items):**

| To what extent do you agree or disagree with the following statements about management and planning in your agency? | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Slightly Disagree | Slightly Agree | Agree | Strongly Agree | Don’t Know |
| 1. I have referred to our mission statement for guidance in my work. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I have referred to my program’s specific goals and objectives in my work. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I have referred to our manual of policies and procedures for program operations. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I have seen our strategic plan charting our future. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I have been involved in discussions regarding policies, procedures, and planning decisions. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I have been informed of new policies, procedures, and planning decisions. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My agency has a clearly defined structure for leadership and responsibility. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My agency is transparent about how decisions are made. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

**Staffing and Personnel (15 items):**

| To what extent do you agree or disagree with the following statements about staffing and personnel in your agency? | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Slightly Disagree | Slightly Agree | Agree | Strongly Agree | Don’t Know |
| 1. I have been provided with a clear and up-to-date set of personnel policies. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I know and understand the responsibilities of everyone in our program staffing structure. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My agency hires people with background, education, and experience well suited for their responsibilities. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. New staff receive adequate orientation and training for their roles. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I receive regular supervision and support in my job. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I have opportunities to network with fellow staff and other colleagues in the field of mentoring. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I have opportunities for ongoing professional development (e.g., trainings, conferences, courses). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I receive recognition when I have strong job performance. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I receive regular reviews and evaluations of my performance. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My agency makes an effort to retain staff who are good at their jobs. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My agency offers reasonable and competitive compensation. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My agency adjusts compensation according to performance. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My agency has the appropriate number of staff to fulfill its mission. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My agency has accurate position descriptions for each paid position in the organization. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My agency has the ability to recruit needed staff in a timely manner. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

**Funding and Finances (8 items):**

| To what extent do you agree or disagree with the following statements about funding and finances in your agency? | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Slightly Disagree | Slightly Agree | Agree | Strongly Agree | Don’t Know |
| 1. My organization has a management system in place to monitor program income and expenses. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization regularly updates fundraising and resource development plans. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization obtains revenue from diverse and/or stable sources. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization raises enough funds to support its operations. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization has recently considered eliminating or closing a program as a result of a lack of funding. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization has been successful in funding existing programs. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization easily attracts new funds for new initiatives and projects (new or expanded services). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Our funding is adequate to meet our service demands. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

**Connecting with the Community (10 items):**

| To what extent do you agree or disagree with the following statements about connecting with the community? | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Slightly Disagree | Slightly Agree | Agree | Strongly Agree | Don’t Know |
| 1. My organization regularly updates its marketing and communications plan. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I have been asked to provide input on marketing and communications plans. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization regularly communicates program successes to participants, stakeholders, and community members. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization seeks feedback and ideas on potential program improvements from participants, staff, board, and other stakeholders. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Through my position, I have tried to build awareness and support for mentoring in the community. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Through my position, I have tried to advocate for policies and funding in support of mentoring. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization has established policies and procedures that facilitate work with other organizations. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization trusts partner organizations to do a good job for our clients. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization assesses the potential of other organizations to be good partners. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization actively pursues collaboration with other organizations. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

**Managing Data (6 items):**

| To what extent do you agree or disagree with the following statements about managing data in your agency? | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Slightly Disagree | Slightly Agree | Agree | Strongly Agree | Don’t Know |
| 1. My organization has a user-friendly data management and information system. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. I have reviewed my organization’s guidelines about collecting, storing, and using program data. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Staff regularly follow written protocols for data privacy and security. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Staff routinely use a data management system to access information about program participants. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Staff consistently update records tracking all mentoring matches (e.g., staff contacts, activity attendance, general progress). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization electronically tracks program outputs and participant outcomes. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

**Evaluation (8 items):**

| To what extent do you agree or disagree with the following statements about evaluation in your agency? | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Disagree | Slightly Disagree | Slightly Agree | Agree | Strongly Agree | Don’t Know |
| 1. My organization has clearly stated criteria for accepting or rejecting mentors. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization has clear and understandable procedures for screening potential mentors. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization has clear statements of program goals and intended outcomes. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization has well-defined indicators for measuring program success. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization regularly tracks the development and progress of matches toward intended outcomes. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization conducts formal evaluations that collect data to measure the success of matches. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization uses evaluation findings to change and improve program practices. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. My organization shares evaluation findings with stakeholders. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

*Note: Scores are calculated by averaging responses for all items within each of the subscales in the AGENCY PRACTICES section.*

**PROGRAM PRACTICES SECTION**

| For mentors recruited and trained in the past 6 months, please estimate how many: | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | None/We don’t do this | Almost none  (1-20%) | Some  (21-40%) | About half  (41-60%) | Most  (61-80%) | Almost all  (81-100%) | Don’t know |
| 1. Were realistically informed of the benefits and challenges of being a mentor in the program before being matched. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Were provided with an accurate description of their roles and expectations. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Were required to complete a written application and a background check. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received an orientation to the program’s aims (e.g., mission, goals, and intended outcomes). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received an orientation explaining program policies and guidelines. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received training on topics relevant for effective mentoring prior to being matched (e.g., how to handle difficult situations in mentoring relationships). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Were informed about how and when to contact the agency for support. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

| For new mentor-mentee matches made in your program over the past 6 months, please estimate how many: | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | None/We don’t do this | Almost none  (1-20%) | Some  (21-40%) | About half  (41-60%) | Most  (61-80%) | Almost all  (81-100%) | Don’t know |
| 1. Were made in a way that accounted for the personal characteristics of the mentor. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Were made in a way that accounted for the personal characteristics of the mentee. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Were made in a way that accounted for the goals and preferences of the mentor. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Were made in a way that accounted for the goals and preferences of the mentee. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Had an initial meeting between the mentor and mentee facilitated by a staff member. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Completed a match agreement that covered the terms of participation. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

| For all matches in your program over the past 6 months, please estimate how many: | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | None/We don’t do this | Almost none  (1-20%) | Some  (21-40%) | About half  (41-60%) | Most  (61-80%) | Almost all  (81-100%) | Don’t know |
| 1. Participated in a group activity for matches organized or hosted by the program. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received all regular check-in support contacts over the phone or in-person for the mentor (on schedule set by program). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received all regular check-in support contacts over the phone or in-person for the mentee (on schedule set by program). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received all regular check-in support contacts over the phone or in-person for the parent/guardian (on schedule set by program). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Experienced efforts by program staff to connect the mentee and/or parent/guardian with resources (e.g., referrals to other services and programs). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

| For all mentors in your program over the past 6 months, please estimate how many: | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | None/We don’t do this | Almost none  (1-20%) | Some  (21-40%) | About half  (41-60%) | Most  (61-80%) | Almost all  (81-100%) | Don’t know |
| 1. Received suggestions and ideas for activities from your program. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received ongoing training designed for mentors from your program. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Attended program-sponsored opportunities to interact and share ideas with other mentors. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received specific information about their mentees from your program (e.g., background situation, changes in life circumstances). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received formal recognition and appreciation for their contributions as volunteers from your program. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

| For mentor-mentee matches that officially ended in the past 6 months, please estimate how many: | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | None/We don’t do this | Almost none  (1-20%) | Some  (21-40%) | About half  (41-60%) | Most  (61-80%) | Almost all  (81-100%) | Don’t know |
| 1. Had completed their expected time commitment in the program. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Had the decision for a closure made by the program staff member (as opposed to mentor, youth or parent). | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Received guidance or training on formal procedures for closing the match. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Had a staff-facilitated match closure meeting between the mentor and the mentee. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Involved the parent/guardian in a final closure meeting or conversation. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Involved individual conversations between the program staff member and the mentor regarding the closure. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Involved individual conversations between the program staff member and the mentee regarding the closure. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |
| 1. Involved a stated agreement about the nature and extent of any future contact between the mentor and mentee. | □  1 | □  2 | □  3 | □  4 | □  5 | □  6 | □ |

*Note: Past research has used items in the PROGRAM PRACTICES section to assess the breadth of practices implemented with high consistency by noting the total number of practices indicated by staff as being experienced by almost all [81-100%] mentors.*

Citation: Keller, T. E., Herrera, C., Spencer, R. Assessment of Staff Perceptions of Program Practices. Unpublished manual. Portland State University.