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## Conducting an Evaluation Audit as a Quality Improvement Approach for Non-profits: A Canadian Case Study

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### Abstract

*To assess compliance of current practice with evaluation policy and its embedded standards, this audit systematically reviewed the evaluation activities of a Toronto non-profit organization. A mixed method explanatory sequential approach was applied to gather quantitative data from 26 programs and qualitative data from 16 key stakeholders. Triangulation of the data revealed that the quality of evaluation activities varied, and was positively influenced by the presence of a logic model. Supportive leadership, organizational culture, and quality data were key drivers for evaluation practices. This initiative demonstrated that an evaluation audit is not only conceivable, but also achievable for non-profits.*

**Keywords:** *Evaluation audit, Logic model, Organizational culture, Accountability, Standards of evaluation, Supportive leadership, Data quality, Quality improvement*

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## ***INTRODUCTION***

An evaluation audit represents a quality improvement initiative (House, 1987) to measure adherence of the evaluation process to a set of accepted standards, and the outcomes of the evaluation activities against pre-determined objectives. The two main steps involved in an evaluation audit are gathering information from relevant stakeholders around the practice of evaluation and the discrepancy between the agency policy on evaluation and actual practices, (Diffen, 2018). Essentially, an audit does not carry out any experiment or intervention; rather, it assesses evaluation activities without interfering with the practices of any user or staff of the agency or involving any additional risk (Wirral Council Public Health Research & Development Team, 2014). One key assumption is that the scope of such an audit validates the evaluation process and practices at the non-profit organizations with regards to the reach, relevance, effectiveness, efficiency, impact and sustainability. Consequently, an evaluation audit is assumed to improve the quality of the evaluation practices, and helps to remove any skepticism around the non- intended outcomes (Jabeen, 2017).

## ***EVALUATION OF HEALTH AND WELLNESS PROGRAMS OF NON-PROFITS MATTERS***

The non-profit sector in Canada works within an evidence-informed framework to help improve the health and wellness of the public, and provides a considerable social safety net to help ensure that the unmet social, political and emotional needs of individuals living in impoverished communities are catered to (Quarter et al., 2002). In Canada, there are over 85,000 non-profit organizations with charitable status employing over two million workers (Hall et al., 2005). This sector contributes nearly 76 billion dollars to the nation's Gross Domestic Product (GDP), accounting for 8.5% of the nation's economic activity (Hall et al., 2005). The non-profit sector is operating within an era of increased accountability, and due to its extremely important role, it is crucial that strong, effective evaluations help organizations improve their commitment towards the public and the people they serve.

The vast majority of funders require some form of evaluation of the programs they fund to explain how they will ensure that the goals of their project are met. Boards, especially those with a keen understanding of their fiduciary responsibility, often require leadership on behalf of the organization to be shown how programs and services are being evaluated. It is also in the interest of community



members, those who may or may not access services but who live in the service area and belong to the neighbourhood, to ensure that service providers in their community are delivering the programs/services they were meant to deliver. The practice of evidence-informed planning and evaluation within community health centres (CHCs) in Ontario, although acknowledged as a critical component of needs-based program/service delivery, is still a developing area, as demonstrated through the baseline assessment of a provincial capacity building project with CHCs on equity-focused planning and evaluation, led by Access Alliance from 2017-2018. There are a number of factors which often prevent CHCs from carrying out quality evaluations, or even restrict their appreciation of the need to do so, namely, limitations in capacity, resources, or budget to prepare comprehensive evaluations. This often leads them to the point where actual data collection and analysis may be hindered (McNamara, 2002).

Within this context, Access Alliance led the pack by conducting such an evaluation audit. This audit comprises an attempt to practice 'lateral accountability', i.e. whereby an organization demonstrates its ability to fulfill its own mission-based activities (Christensen, 2002), in addition to the conventional accountability to patrons (vertical accountability upwards) and clients (vertical accountability downwards) (Najam, 1996). Access Alliance adopts a transformative approach for evaluating its community programs, one that deviates from the traditional testing of whether or not a particular strategy or intervention worked at a program's conclusion (Whitehead, 2002). Pawson & Tilley (1997) introduced a theory-based realist practice that considers the outcomes (i.e. whether or not it works) as well as the mechanism (i.e. what works, how, for whom, in what contexts, to what extent, etc.). This organization follows that approach. As such, the evaluation process begins with a theory of change (delineating the pathway between the context-mechanism-outcome); this is embedded within a formative evaluation model to assess a program's outputs and process, and/or a summative evaluation model to identify a program's effectiveness, impact, and sustainability. Each model has its own set of appropriate evaluation tools.

This organizational approach to evaluation is captured within the *Program Planning and Evaluation Policy* (2019), which emphasizes the importance of generating high quality evidence and developing



the elements of an effective evaluation plan through accepted standards. The policy highlights:

1. The evaluation process that starts at the pre-planning stage (formative evaluation), continues throughout the program cycle (process evaluation), and also after the completion of the program to identify the impact, effectiveness, and next steps (summative evaluation).
2. The four standards (utility, feasibility, accuracy, and propriety) which are consistent with global ethical protocols (CDC, 1999; JCSEE, 2016).
3. Staff compliance for using a program planning template, program-specific logic model, and the evaluation framework. McLaughlin et al. (1999) consider the logic model as a valuable tool linked to quality evaluation practices.

The evaluation framework used for the audit is a live document supporting the Program Planning and Evaluation Policy, and contains agreeable standards, ethical discourse (CES, 2014; Bowen, 2017; TCPS2, 2017), and guidelines for use of evidence-informed planning tools such as the logic model, the creation of a business case, etc. This evaluation audit focused on the Program Planning and Evaluation Policy, whereby the evidence generated through this process was assumed to describe any gap in compliance between this evaluation policy and current practice, as well as to prompt a useful dialogue within the organization around the challenges and opportunities surrounding future changes in program planning and evaluation.

The Ethics for Research-like Activities Policy 2017, another relevant policy of the organization, is geared towards ensuring that program evaluations, client or community consultations, needs assessments, and chart reviews follow all ethical protocols in order to minimize risk/harm and maximize benefits for the vulnerable populations served by Access Alliance.



## ***OBJECTIVES OF THE EVALUATION AUDIT***

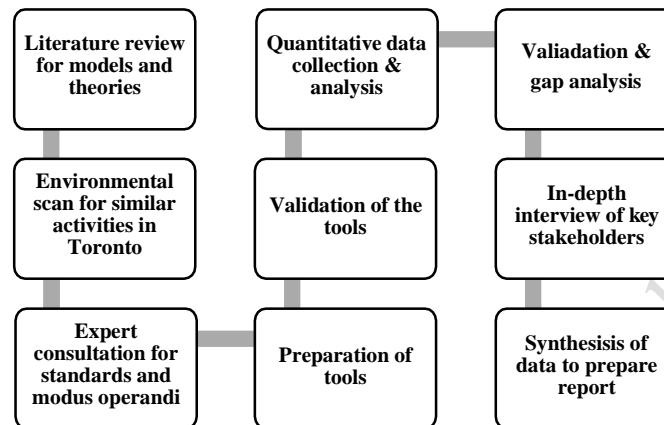
The goal of the evaluation audit was to advocate for this process as a means of enhancing quality of evaluation within the non-profit sector, including the community health centres. Moreover, it aimed to support the case that an organization-wide evaluation audit is not only conceivable but also achievable.

The objectives of this evaluation audit were:

- To prepare an inventory for the evaluation ‘status’ of the programs and services of the organization (i.e. current practice around the use of evaluation tools, and recent evaluation history);
- To identify the drivers that influence evaluation in such a non-profit organizational context;
- To assess the compliance and quality of the evaluation activities with regard to set organizational standards (as captured in the *Program Planning and Evaluation Policy*)
- To design an evidence-informed evaluation strategy of the organization; and
- To scale up the tools and techniques for utilization within the broader sector.

## ***METHODOLOGY***

The theory of change for this evaluation audit is that conducting such an audit will enhance organizational capacity for evidence-informed planning by identifying and understanding the facilitators for quality evaluation, and bridging the identified gaps between policy and practice. In order to generate credible in- depth evidence, this audit utilized an explanatory sequential mixed-method approach (Figure 1), whereby quantitative data were analyzed in order to establish a ‘current state’ of evaluation practice among staff; this was followed by the collection of qualitative data to contextualize the quantitative findings (Creswell, 2014). Quantitative data were gathered from 26 programs and qualitative data from 16 key stakeholders of varying positions in the organization (i.e. staff, managers, etc.). No personal or health information was collected through this audit, and no harm to any participating individual or to the organization is expected to result from this process. Compliance to organization confidentiality and privacy was maintained.



**Figure 1: Explanatory Sequential Mixed-Method Approach**

Over the period of February 2015 to April 2015, data from all of the on-going programs at that time were collected using a survey tool. The survey was filled out by the program leads and signed off by the respective managers. The survey contained the key questions like: (1) whether or not the program(s) had a program-specific logic model, and (2) whether or not the program had been evaluated during the period 2012-2015. Reports from 21 out of 26 programs were considered for analysis; those with incomplete survey data and/or were programs that did not run continuously were excluded. In-depth interviews with the responsible members of the management team were conducted to gather contextual and policy-level insight on the evaluation activities and associated challenges. Qualitative data were organized into pre-selected primary codes which were reinforced by secondary emerging codes. These were converted into categories and ultimately into themes. This coding methodology was informed by Saldana (2013) and Creswell (2013). All data (quantitative and qualitative) were then triangulated thematically to interpret the findings.

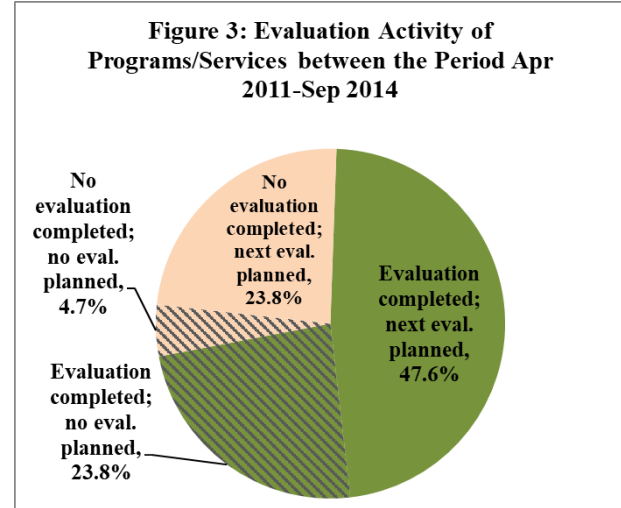
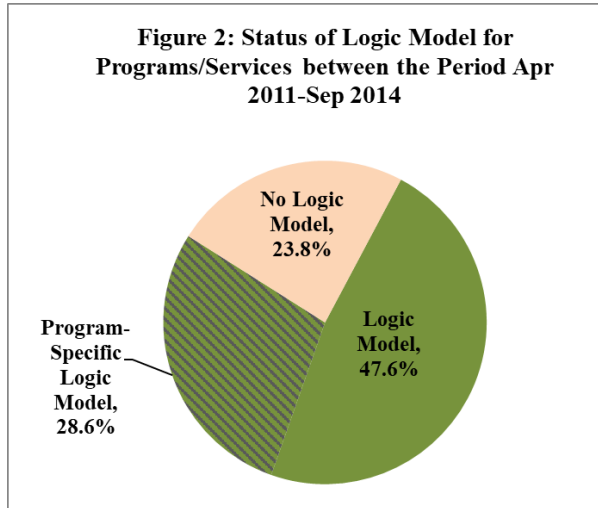
Key evaluation questions, of the audit were: i) How does the organization ensure quality of the evaluation practices? ii) What are the facilitators that influence the quality of evaluation? and iii) How are the traditional evaluator roles being engaged in developing new approaches (e.g. appreciative enquiry, art-based methods, etc.) to conduct evaluation in non-profits? Credibility, fittingness, and auditability were set as the quality indicators for the audit for internal validity,



external validity, and reliability, respectively (Brannen, 2005). Quality assurance in evaluation was checked in the audit, whereby that the breadth, validity, reliability, consistency, and prioritization of tools at Access Alliance are consistent with the data quality dimensions (relevance, accuracy, comparability, timeliness, and usability) set by the Canadian Institute for Health Information (CIHI, 2009; Laberge & Shachak, 2013). A systematic literature review was conducted to identify the relevant theories as well as models upon which to develop the foundation for the audit process. In addition, an environmental scan was carried out among CHCs across Greater Toronto Area (GTA) for their experience, tools, and reports around such an evaluation audit.

## ***FINDINGS***

The environmental scan for evaluation audit activity among comparable organizations in GTA could find no documents as evidence. Twenty-one programs reported using evaluation tools which included indicators that are required by: (i) the funders, (ii) the sector, for comparison between organizations, and (iii) the organization's continuous quality improvement strategy and learning goals. Among these programs, 76.2% (n=16) used a logic model, while 23.8% (n=5) did not. Six of those 16 programs used program-specific logic models, while the remaining ten used departmental logic models (Figure 2). Overall, 71.4% (n=15) of programs had been evaluated (Figure 3) within the period of the last three years at the time of the audit (2011-2014), 23.8% (n=5) had scheduled their evaluation, leaving one (4.8%) program which had neither been evaluated nor planned to do one. Thirteen of the fifteen (86.7%) programs which had been evaluated used logic models. Cross-tabulation of the total number of programs with a logic model, program-specific or otherwise, and the total number of programs with a history of evaluation calculated that there is an 80% positive predictability of programs having undergone an accountable evaluation (i.e. using organizational tools, approach, etc.) if they use a logic model.



After merging primary and emergent codes, the qualitative interview findings revealed three broad thematic areas as representative of facilitators of quality evaluation practice: (i) Leadership, (ii) Organization culture, and (iii) Access to quality data for use.

*(i) Strong Leadership for Evaluation*

Interviewees identified a leadership role which integrates the skills of the internal evaluation team with the priorities of the senior management as a critical driver for quality evaluation in the organization. They described the value in having the evaluation team engage the senior management and relevant (departmental) management teams at all relevant phases of the evaluation activities. This approach guarantees the necessary support for making evaluation impactful within the programs and services of the organization, i.e. through the design and implementation of meaningful planning to integrate new knowledge. During the ‘reporting back’ sessions, departmental teams expressed a call for more support to develop skills around evaluation methodology, evaluation tools, statistical software, and the triangulation of mixed data, with one interviewee asking, “How do we synthesize results from a variety of stories into a cohesive story?” These topics can inform next steps in the capacity building process.





Interview findings generated the concept of the evaluator as a leader as working on two levels: internally, in providing both technical and abstract evaluation support to staff, and also externally, in playing a dynamic role in sharing knowledge, policy advocacy, as well as in securing and advocating for organizational resources. The external leadership role is characterized by participation as a system partner in regional (Toronto Central Local Health Integration Network), provincial (Evaluation Framework Indicator Validation Working Group), and system level activities (Canadian Evaluation Society). In summary, the identified critical success factors for strong evaluation leadership within the organization were micro (staff) to macro (sector) level engagement of the evaluation team for supporting skills development among staff, assisting in the implementation of evaluation activities, engaging with senior management to nurture a culture of evaluation in the agency, and participating in external knowledge sharing and policy advocacy activities.

(ii) *Building a Culture of Evaluation*

In-depth interviews with management revealed how evaluation permeates the organizational fabric of Access Alliance to become an evidence-informed service-model (the 'Access Model') to strengthen program and service planning and delivery processes. The model is supported by several key structures: (i) organizational policies on Planning and Evaluation as well as Ethics for Research-like Activities, an evaluation framework, (ii) a program logic model template, and (iii) measurement tools conducive to quality evaluation in the agency. As is evident from the existence of two explicit policies pertaining to evaluation as well as an evaluation framework document, senior management and the trusteeship board put quality evaluation at the forefront to generate credible evidence for monitoring quality, accountability and functionality. Furthermore, the promotion of planning and evaluation by senior management as a standing agenda in team meetings was motivational for the staff members to learn more around the importance, scope and complexities in evaluation processes at the agency. It is also evidence of an organizational culture that is supportive of evaluation at the operational level, as well as at the strategic (board) level.

Such motivation was reflected in interviews with staff, who asked questions (as a proxy indicator)



showing their interest in evaluation activities of the agency: “Should entire departments be evaluated, or should individual programs be evaluated with less intensity...how frequently?” They also asked questions around ‘What to evaluate?’ (i.e. individual services or programs, a department as a whole, indicators of interest, etc.); ‘How to evaluate?’ (i.e. methodology and tools); ‘How much should be spent?’ (i.e. a dedicated budget for program evaluation activities); ‘Who is the audience?’ (i.e. clarity on who will be reading the evaluation report and how the findings will be used), and ‘What is our (staff) part?’ (i.e. clarity around the role of the organization’s evaluation team in facilitating the evaluation). Staff suggested using a longitudinal program evaluation calendar over several years allowing for sufficient time to effectively measure any changes put in place. Another strategic suggestion was to adopt more participatory evaluation approach, meaning to have the evaluation team fully integrated into all stages of the program cycle. Such an idea is consistent with the realist evaluation approach which aims to understand the context and mechanism of the change.

### *(iii) Access to Quality Data for Use*

The interviews identified that effective evaluation practice requires access to credible valid evidence in order develop useful products from the evaluation activity. Data collection and data input were viewed as resource intensive processes, and represents an operational challenge for an organization that provides a multitude of services to a high number of clients. The time contributed by volunteers and students, in support roles, was viewed as a valuable resource in this process. Another developmental area identified was around challenges in retrieving data whereby various storage locations with different permissions may be used; it is imperative that everyone stores data in the designated place which is accessible to the end users. Effective organizational support and a clear purpose for data collection help to ensure data quality. Here, the availability of high quality data was identified as critical for effective program planning and service delivery. For example, one staff cited how administrative data on clients’ preferred language could be used to hire a set of peer outreach workers. Clearly communicating the potential applications of the data can help staff not only understand the importance of data quality, but also promote good practices in data collection. Lastly, training and education of the staff handling data (collection and analysis) are also critical components that the audit revealed through discussions with the managers and the evaluation team.



## *DISCUSSION*

A scoping review of evaluation capacity-building among Ontario public health units identified several key themes considered important for building a culture of evaluation within an organization, including ‘leadership support’ and ‘an organizational environment conducive to evaluation’ (Hotte et al., 2015). Schwartz & Mayne (2005) also explore the influence of ‘organizational and political impediments’ to successful implementation of evaluative activities, and Roche et al., 2012 describe evaluation as politics of ‘power and relationship’. These same themes emerged through this audit process, where careful triangulation of data identified three drivers of quality evaluation, two of which that are comparable to this literature — leadership, organizational culture, and access to quality data. In terms of leadership, it was determined that a cohesive value-based team (evaluation team and the senior management) was optimal to facilitating the overall evaluation process. Organizational culture and access to data quality will be discussed below.

Schwartz & Mayne’s (2005) meta-analysis reviewed the practice of quality assurance of evaluation practices across jurisdictions, whereby one of their key concerns was credibility of evaluative information produced. One type of approach to assuring quality in evaluation is structural, which would involve the setting of ‘organizational/governmental guidelines and standards’. Hotte et al.’s (2015) scoping review also discusses the value of a ‘comprehensive organizational evaluation framework’ within an organizational environment (culture) that is supportive of evaluation, beyond that simply at the individual staff (micro) level. At Access Alliance, such standards for evaluation activities are embedded within its organizational policies around Program Planning and Evaluation and Ethics for Research-like Activities, and are supported by guidelines captured in the evaluation framework. These two features can ensure the structural credibility and foundation of quality of all evaluation activities.

During interviews, management identified data quality as a critical facilitator for generating credible evidence for planning, which is ensured by measuring completeness and consistency of data. Five criteria are set for measuring completeness of data at Access Alliance: (i) percentage of missing data (errors of omission), (ii) precision, (iii) accuracy (reliable), (iv) usefulness, and (v) validity



(credibility). The criteria for consistency at the organization are: (i) comparability (of indicators, tools, methods etc.), (ii) auditability (of processes and methods), and (iii) reproducibility (universality). Access to evidence by the end-users is another paradigm recognized by staff to be addressed. The current practice at the organization is to store all evaluation reports and findings in a shared folder of the agency which is accessible to all staff, volunteers, and students. Finalized reports are published on the Access Alliance website as well as distributed to partner organizations, e.g. Ontario Community Health Profiles Partnership.

Lastly, findings from the audit found that programs are evaluated at different points in time as required by (i) the funders, (ii) sector agreements, or (iii) as a part of the organization's continuous quality improvement strategy. However, in order to make the best use of resources and evidence for planning processes, a calendared evaluation schedule of the agency is optimal.

Audit results also indicated that over 76% of the programs studied in this audit used a logic model, and over 86% programs were found to have been evaluated during the study period, whereby the probability of evaluation was found to be higher for programs with customized logic models. In order to further promote and enhance uptake of systematic evaluation practices, the organization requires meeting staff interests in two key ways: (i) an effective communication strategy on evaluation pathways, process, consequences, and a description of the end-users, and (ii) organizing targeted capacity building training sessions, as well as through individual consultations and meetings, with relevant stakeholders around expressed training needs. An immediate tangible solution involves the expansion of existing policy to include explicit program evaluation expectations (frequency, methods, etc.), as well as an articulation of the level of support provided by the evaluation department. Another solution could be having evaluation- to-practice (E2P) as a standing agendum in all of the team meetings as a means to determine the resulting planning implications from an evaluation activity. Taking a two-tiered approach, the evaluation staff can provide expert professional guidance, insight, and recommendations to support evaluation activity for programs at the micro level. Such an effort, combined with the evaluation framework containing a set of explicit organizational guidelines (meso level), can help to build and mobilize a culture of evaluation at Access Alliance.



The audit process began with an anecdotal assumption that such an activity will identify gaps, facilitators, and barriers in the current evaluation activities at a population-based non-profit agency, and will improve capacity of staff to carry out evidence-informed evaluation in the future. Through an exploration of the state of evaluation practice within Access Alliance, it was determined that a program evaluation audit is indeed achievable in small to moderate-sized non-profit agencies. Moreover, conducting such an audit can strengthen the accountability process of non-profits.

### ***IMPACT OF THE EVALUATION AUDIT***

The experience and the findings of the audit can be used (i) at micro level to inform the practices of the service providers of the agency by integrating into all stages of program planning and operations, (ii) at meso level to design a strategic evaluation calendar for the programs of the organization at operational or governance level, and (iii) at macro level to share in a broader group (region and sector) as a capacity building and quality improvement initiative.

### ***CONCLUSION***

Learning from own experience with this initiative, Access Alliance considers an evaluation audit as a critical monitoring approach for non-profits representing a novel initiative that strengthens the opportunity to improve future evaluation practices founded on generated evidence. This audit assessed the 'current state' of evaluation activities in the interest of strengthening compliance with existing policy and standards, and informing future planning efforts. The evidence was used to create a dialogue around the gap between current evaluation practices to plan an evidence-informed 'future state' of evaluation practice. Correct integration of the leadership support for building an evaluation-focused organizational culture and data quality management skills can be instrumental to build an efficient evaluation culture in non-profits. An effective communication strategy for staff on explicit guidelines and expectations surrounding evaluation practices along with a comprehensive accountability framework were identified as enablers for this process. Although scope and budget represent a source of risk for the sustainability of the organization's evaluation practices, opportunities remain to share knowledge and to build partners' capacity on evaluation research.



Finally, experiential learning from such a case study suggests that having a program-specific logic model, ensuring access to quality data, as well as training of the staff members on evaluation, data quality, and data policy will be instrumental to improve the process and utility of evaluation. This report recommends that non-profits conduct a systematic evaluation audit to improve the quality of all programs and services, to help leverage resources rationally, and to support the organization's evidence-informed practice.

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