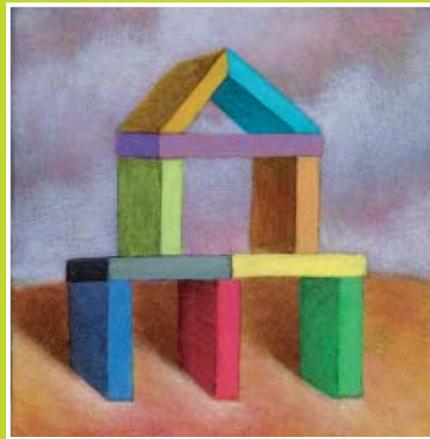
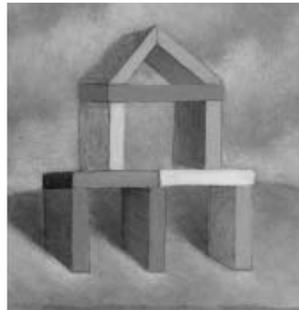


# Finding Out What Happens to Former Clients



# Finding Out What Happens to Former Clients



This guide is part of a series on outcome management for nonprofit organizations. Other guide topics include

- keys steps in outcome management
- surveying clients
- using outcome management
- analyzing and interpreting outcome data
- developing community-wide indicators

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# Preface

Outcome measurement offers an invaluable tool for monitoring the impact of our services and for tracking our clients' progress toward desired program goals—whether to provide safe and affordable housing to the disabled and disadvantaged, or to rehabilitate those with addictions or past criminal involvement. Volunteers of America, one of the largest nonprofit faith-based social services organizations in the country, delivers a broad range of services nationally to more than 1.6 million individuals annually. Touching so many lives, we feel a strong commitment to ensuring the highest possible quality and effectiveness of the services we deliver.

As Volunteers of America begins implementing outcome measures in our approximately 100 different types of programs, one of our most difficult challenges is determining the long-term impact of our services. Do the newly employed retain their jobs and self-sufficiency? Do the parents and children who have been reunited remain together and continue healthy functioning? To measure these lasting effects, clients must be tracked after they leave our programs. Yet collection of follow-up data often strains the resources of community-based nonprofits, such as our local offices. Gathering these data may require staff efforts to be diverted from ongoing service delivery, and former clients may be difficult to locate or reluctant to provide follow-up information.

This report tackles these major obstacles to obtaining data on client outcomes. Drawing from the lessons learned by a number of other community based nonprofits, including Volunteers of America local offices, it offers practical advice on methods to secure this data cost-effectively. The information provided on using follow-up data to identify best practices and areas where program improvement efforts are needed is particularly valuable.

With technical assistance resources, such as this report, and commitment from organizational leadership, nonprofits can successfully implement outcome evaluation systems that will help ensure the long-term effectiveness of their services to improve the lives they touch.

**Charles W. Gould**  
National President  
Volunteers of America

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# Introduction

What constitutes program success? If a client stops abusing substances while participating in a treatment program, but resumes a few months after completing treatment, did the program succeed? If a teenager receives pre- and post-natal support and guidance after her first pregnancy, but reports a second pregnancy six months after giving birth to her first child, was the support effective? If a foster parent reports a missing child three months after completing a youth development program, did the program succeed? These examples illustrate the importance of following up with clients after they complete or leave services.

The outcome of a program designed to improve clients' conditions or behaviors and sustain this improvement beyond the period of service provision cannot be adequately assessed at the time the client leaves service. Information on the client's status at some point in time after the client has left service—three, six, nine, or 12 months, for example—is a considerably more valid basis for assessing program results.

Since many nonprofit programs seek to help clients enjoy long-term success, it makes sense—and is organizationally strategic—to obtain regular feedback from clients. Such information provides not only an assessment of program effectiveness, but also a solid basis for identifying needed improvements to services. While many nonprofits do not follow up with clients post-service, some others, such as vocational rehabilitation and job training programs, have followed up and reported on the number and earnings of clients who retained their job for specified periods after placement.

After-service follow-ups can be done efficiently, successfully, and at reasonable cost. This guide to tracking clients offers step-by-step procedures, model materials (including planning tools and feedback forms), and suggestions for keeping costs low. The manual is primarily geared to nonprofit managers and other professional social service staff who are most likely to design and implement a process for following up with clients—and who ultimately will apply this information to their organization's programs and practices.

This manual is not intended for programs that (1) provide services that are not expected to lead to longer-term effects, such as homeless shelters or food kitchens that offer mostly “one-day” help; or (2) serve long-term clients who receive regular and ongoing treatment, such as the institutionalized.

The grantmaking community, which can provide the needed moral and resource support for outcome measurement by nonprofits, is another major audience for this guide. Funders report that they want meaningful and measurable results of their grants, not only to highlight the accomplishments of grantees, but also to illustrate their own accountability in disbursing funds.

## Why Follow Up with Clients?

Following up with former clients helps nonprofits determine whether improvements in clients' behavior or condition have been sustained.<sup>1</sup> In fact, the process of assessing program outcomes has many other uses for an organization. These include the following:

### Internal Uses

- Assessing whether clients have maintained program results after leaving service
- Discovering what contributes to long-term success
- Motivating staff by letting them know the extent to which their former clients have achieved satisfactory results
- Identifying problems that may lead clients to leave the program before completion
- Identifying common post-service problems that may indicate a need for program modifications
- Helping former clients stay connected in case additional services or referrals are needed

### External Uses

- Meeting funder requirements to assess the impact of grants
- Marketing the organization's services

### In the Field—Using Follow-up Information

The Family Leadership Program of Crossway Communities originally taught a single curriculum to its participating adults, all of whom had diverse educational backgrounds. Using information from its annual alumni survey, the Leadership Program subsequently designed two separate curricula and divided its class into individuals with some college education or a bachelor's degree, who need additional training to get them back on their feet; and individuals who need more education and life skills training to succeed. The organization reports increased enthusiasm for the leadership program since the change.

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<sup>1</sup> "Nonprofit" refers to community-based organizations that directly serve clients.

## In the Field—Using Follow-up Information

*Before implementing a client follow-up process, the Alexandria Resource Mothers (ARMS) program of the Northern Virginia Urban League set a goal of graduation or completion of vocational training by 80 percent of its participating teen mothers. The actual number achieving this goal was 60 percent. An analysis of feedback obtained through follow-up telephone surveys with clients revealed that young Latina mothers were more reluctant than teen mothers of other ethnic backgrounds to stay in school. As a result, ARMS hired a recent graduate of the program—a young Latin-American woman—to serve as a resource for participating Latina mothers. In addition, all resource mothers were trained to take a more culturally sensitive approach to discussing continuing education with Latinas. The ARMS program coordinator feels that collecting and using client follow-up information has not only improved this program for parenting teens, but also serves to motivate staff by letting them know how their efforts help clients.*

Nonprofits are concerned that follow-up procedures will require additional staff, increase the burden on current staff, or will require additional training or use of consultants. They sometimes feel that locating former clients will be too difficult or that they will be unwilling to participate, thus shifting resources from the primary mission to help clients in service. The follow-up procedures recommended in this guide attempt to reduce these problems.

The proposed procedures differ in many ways from full “program evaluation” studies by professional organizations or universities, which can be very expensive. Follow-ups can be done inexpensively, especially if the organization maintains a good relationship with its clients while they are in service.

## About This Guidebook

This guide presents 14 key steps—for use by all types of nonprofits—to conducting effective follow-up with clients (see exhibit 1).<sup>2</sup> The steps are grouped into four sections, with a fifth section on overarching issues.



**Before Starting Follow-Up** describes what needs to be done before the follow-up process even begins.



**While Clients Are in Service** covers what preliminary steps should be taken while clients are in programs and receiving services.



**While Conducting Client Follow-Ups** identifies key steps after clients have left services to increase the likelihood that follow-up will be successful.



**After Outcome Information Becomes Available** provides guidance on how to analyze and report data obtained from the clients, as well as how to use the information to improve programs.



**Other Key Issues** discusses in more detail such important issues as maintaining client confidentiality, training program staff, and reducing the costs of following up with former clients.

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<sup>2</sup> Limited literature exists on procedures for following up with former clients on an ongoing basis. See for example David P. Desmond, James F. Maddux, Thomas H. Johnson, and Beth A. Confer, “Obtaining follow-up interviews for treatment evaluation,” *Journal of Substance Abuse Treatment* 12 (1995): 95–102; and Elizabeth A. Hall, “Homeless Populations: Strategies for Maximizing Follow-up Rates” (paper presented at Center for Substance Abuse Treatment Addictive Treatment for Homeless Technical Assistance Workshop, November 29–30, 2001, Bethesda, Maryland). Detailed manuals on following up with clients have also been produced by federal agencies, including the U.S. Department of Health and Human Services’ Center for Substance Abuse Treatment, and the U.S. Department of Education’s Division of Adult Education and Literacy (as part of the National Reporting System for Adult Education).

**EXHIBIT 1**

# Steps for Following Up with Former Clients

**Before Starting Follow-Up**

- Step 1.** *Decide what information is needed and from whom.*
- Step 2.** *Determine timing of follow-up.*
- Step 3.** *Choose how to administer the survey.*

**While Clients Are in Service**

- Step 4.** *Assess condition and behavior at entry.*
- Step 5.** *Inform clients about the need for follow-up.*
- Step 6.** *Obtain current contact information.*
- Step 7.** *Establish good relations with clients.*
- Step 8.** *Obtain client consent for follow-up.*
- Step 9.** *Discuss follow-up procedures with clients at exit.*

**While Conducting Client Follow-Ups**

- Step 10.** *Maintain contact with former clients.*
- Step 11.** *Offer clients incentives for participating.*
- Step 12.** *Administer the follow-up questionnaire.*

**After Outcome Information Becomes Available**

- Step 13.** *Analyze and report follow-up outcomes.*
- Step 14.** *Take action.*



# Before Starting Follow-Up

## Step 1: Decide What Information Is Needed and from Whom

Organizations must first identify outcomes to assess and client characteristics associated with these outcomes; service characteristics and other factors that may influence clients' success; and which clients to track. These decisions determine the content of the data collection instruments used to assess program outcomes.

**Outcomes and outcome indicators:** To decide what to measure, an organization must identify the organization's mission and objectives, the outcomes of the program, and specific indicators to measure the outcomes.<sup>3</sup>

Exhibit 2 provides sample outcome indicators that a nonprofit with multiple programs might choose to track on a regular basis. These indicators, designed for a six-month follow-up, come from Volunteers of America's efforts to improve program quality and accountability.

**Client and service characteristics:** Relating specific client characteristics to outcome information allows the assessment of success in helping individual client groups. This process also helps identify necessary program changes. For example, programs that serve substance abusers generally find it useful to report outcomes by characteristics such as

- gender
- age
- race/ethnicity
- income
- type of substance abuse
- education level

Relating outcomes to key service characteristics will help identify successful service procedures as well as the training and technical assistance needs of program staff. These characteristics often include

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<sup>3</sup> For more information, see *Key Steps in Outcome Management*, another guide in the Urban Institute's series on outcome management for nonprofit organizations.

## EXHIBIT 2

# Sample Outcome Indicators Based on Follow-up Information

### **Corrections/community sanctions centers and reentry programs**

- Number of program participants with no new arrests during the six months after program completion.
- Number of participants who maintain sobriety during the six months after program completion.
- Number of participants who experience financial stability during the six months after program completion.

### **Mental health/case management**

- Number of participants who secure and maintain a safe and stable living environment during the six months following program completion.
- Number of participants who maintain financial stability during the six months following program completion.
- Number of participants who do not require psychiatric hospitalizations/re-hospitalizations while in the program and during the six months following program completion.

### **Substance abuse/residential treatment**

- Number of participants who maintain sobriety during the six months after the end of their treatment.

- Number of participants who reduce their involvement in illegal activities during the six months after the end of their treatment.
- Number of participants who secure and maintain a safe and stable living environment during the six months following program completion.

### **Employment and training/employment counseling/job placement**

- Number of participants who are employed in supported or unsupported employment during the six months following program completion.
- Number of participants who maintain financial stability during the six months following program completion.

### **Homeless services/transitional housing**

- Number of residents who use all desired and available community resources for which they qualify during the six months after program completion.
- Number of participants who maintain financial stability during the six months after program completion.

- location of service (information about specific facilities, if more than one)
- type of service (group or individual counseling)
- length of service (number of hours of service received by the client, number of sessions the client attended)
- specific staff person working with client

Once client and service characteristics are selected, nonprofits must decide if such information should come from client survey responses or from agency records. If the program has automated client records, and there are appropriate safeguards for confidentiality, returned questionnaires can be linked to client records.

**Influencing factors:** During follow-up, a nonprofit has the opportunity to identify other key influences on clients since leaving service. This information can provide a more comprehensive set of reasons for long-term program success or failure and can be a critical aspect of determining possible corrective action. For example, clients who left service in one program but then went to another program may have different outcomes six months later, when compared with clients who received no further service. Other potential influences on client outcomes could include loss of employment or a family trauma (for example, the death of a family member). Follow-up surveys can address these influencing factors by asking both direct questions (“Have you received services from another program since you left?”) and “open-ended” questions, such as “Did anything else happen after you left that may have affected the benefits you received from this program?”

**Which clients should be followed up:** Most programs, especially smaller ones, will find it desirable (and easier) to follow up with all clients. If tracking all clients is not feasible, programs can select a representative sample of clients. Administrating this sampling process, however, can itself become a major burden. The appendix provides guidance in selecting a sample for follow-up.

Should clients who drop out before completing a program be included in follow-ups? Such follow-ups may yield reasons for the dropouts or show patterns of client behavior that precede premature exit from the program. On the other hand, this will entail extra effort that may not be cost-effective, especially if the dropout rate is small. Following up with clients who leave a program before completion is likely to be worth the effort only if the program has a large proportion of dropouts.

The minimum amount of service that a client needs to have received before being included for follow-up should also be defined. For example, should clients who only come in once and register, but never come back, be followed up? Probably not. But what about clients attending only two sessions, or three sessions? This minimum level and unit-of-service measure will, of course, differ among types of services. A youth recreation program might want feedback from all clients that attended one event, but will need to decide about following up with those who left during the event. Unless guidelines have been established by funders, nonprofits must make these decisions.

## Step 2: Determine Timing of Follow-Up

When and how often should outcome information be sought? One follow-up—at three, six, nine, or 12 months, for example—may be sufficient. Some organizations may have the resources to attempt more than one, say at three months and again at six months, or at six months and again at 12 months.<sup>4</sup> (The ideal timing may vary among types of service organizations.) While conducting more than one survey with former clients increases the potential for collecting important information, it also increases costs and required staff time.

The sooner clients are contacted after departure from a program, the easier it is to locate and survey them. However, the information obtained may not provide a good test of the sustainability of outcomes. For example, data from participants in a smoking cessation program after three months will not be as conclusive as follow-ups at 12 months.<sup>5</sup>

It is important to have a system for scheduling and tracking follow-up efforts with clients. Exhibit 3 offers a sample form for tracking attempts to mail and phone clients.

## Step 3: Choose How to Administer the Survey

Nonprofits can obtain program outcome data from clients through in-person, telephone, or mail questionnaires, through a combination of these methods, or through reviews of agency records.<sup>6</sup> The appropriate survey method generally depends on the budget, type of clients served, and availability of information. For example, homeless people or substance abusers may have no permanent address, which would eliminate questionnaire administration by mail or telephone.

If follow-up data from the nonprofit providing the service or from another organization's records are available, seeking feedback from former clients may not be necessary.

Individual client preference about survey methods (see step 9) and about incentives (see step 11) are also important.

**In person:** For most programs, sending interviewers to homes or another location is not feasible or appropriate. It is usually more practical to ask former clients to complete the follow-up questionnaire (either through an interview or written form) at the nonprofit's facility. This process will be considerably easier if incentives are both provided and publicized.

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<sup>4</sup> Department of Labor–funded employment programs are usually required to conduct follow-up at six months.

<sup>5</sup> Longer follow-up periods—beyond 12 months—are more appropriate for formal evaluations and other specially funded studies.

<sup>6</sup> More details on preparing and conducting client surveys can be found in another guide in this series.



For example, Meta House, a residential substance abuse and mental health treatment program for women, conducts all follow-up through six- and 12-month interviews at the facility. Because of the need for confidentiality, Meta House avoids telephone interviews and mail questionnaires. The program provides an incentive of \$30.

**Telephone:** Follow-ups by telephone are an option if telephone numbers of former clients are available. Multiple attempts, as well as calling at night and installing an “800” number to encourage callbacks, will increase completion rates. Nonprofits serving transient or very low income populations may need to use additional contact methods to obtain follow-up information.

For example, the Alexandria Resource Mothers Project, a support system for pregnant teenagers run by the Northern Virginia Urban League, employs a part-time administrator to conduct telephone questionnaires. This staff member primarily works in the evening, so former clients who are employed can be contacted at home.

**Mail questionnaires:** Mailing questionnaires to former clients is inexpensive, but the clients must consent and valid addresses must be available. Second (and possibly third) mailings may be required to increase response rates.

Questionnaires should be short and take little time to complete (perhaps 5–10 minutes). They should be in the appropriate language for non-English speaking clients, and of course are not appropriate for low-literacy or vision-impaired clients. A self-addressed stamped return envelope will help improve the response rate. A post office box in the return address may help maintain the survey’s confidentiality.

**Combination of methods:** Service organizations often find that using a combination of telephone and mail surveys is most effective in getting high response rates (see step 12). For example, there might be two mailings, then telephone calls.

**Administrative records from government sources:** Some sources of records that may provide both outcome or contact information about former clients include

- school system—for grades and attendance information
- state unemployment insurance database—for wage and employment records
- department of motor vehicles—for contact information or accident reports
- criminal justice system—for state and county booking information, arrest reports, FBI reports, county jail lists, parole and probation records, and deportation records
- vital statistics records—for the names of clients’ parents, children, and/or spouses
- social service agencies—for those receiving some form of public assistance

Accessing these records may be difficult, if not impossible. But nonprofits can improve their chances by establishing good relationships with government agencies with these records and maintaining appropriate confidentiality procedures.



# While Clients Are in Service

## Step 4: *Assess Condition and Behavior at Entry*

The answers to a questionnaire that evaluates client condition and behavior at the time services begin can serve as a baseline for comparison with the follow-up information. Entry data also provide program staff with diagnostic information on clients.<sup>7</sup>

Three types of analysis can then be supported:

- Extent of improvement, by comparing condition or behavior at the time of follow-up with that at entry. This comparison requires identical wording of the questions, so that reliable data on such indicators as the number and percent of clients whose conditions improved substantially are collected.
- Extent of improvement, by directly asking former clients whether any change occurred and how much (and, perhaps, asking former clients the extent to which they believe the improvement was due to the service provided).
- Client condition at follow-up. This type of analysis is not concerned about whether the client's condition had changed. This approach is the simplest, and likely the only appropriate approach for some program outcomes (such as youth finding employment after graduation from high school, where the entry employment condition is likely irrelevant).

All three calculations will be useful for some programs. Each provides somewhat different information. If resources permit, a nonprofit would do well to obtain data on each.

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<sup>7</sup> This guide does not address obtaining outcome data when the client leaves service. While such information may provide an early measure of client success, it does not reflect the sustainability of these outcomes.

## **Step 5: Inform Clients about the Need for Follow-Up**

As a regular operating practice, clients should be informed during service (perhaps at the time of entry) that the organization would like to find out how they are doing at regular intervals after discharge to help strengthen its assistance to other clients.

The way nonprofit staff present the need for follow-up and the importance of tracking client outcomes will be a major determinant in the program's ultimate success in collecting such information.

## **Step 6: Obtain Current Contact Information**

A detailed tracking form for each client who enters service is useful for program staff. One section of this form should prompt staff to periodically update contact information, both while receiving service and after completion.

Requesting contact information on another person who may help locate clients after they complete the program is a good practice. For homeless clients, information on locations of frequently used resources such as the following might be sought:<sup>8</sup>

- Shelters or other locations (ask for both summer and winter locations)
- Soup kitchens, restaurants, or other food establishments
- Liquor or other types of stores (store owners who give credit may know where clients tend to hang out)
- Check cashing facilities
- Other nonprofits or government-provided services

Exhibit 4 offers a sample form for keeping client contact information up-to-date.

## **Step 7: Establish Good Relations with Clients**

Good rapport with clients during service provision is vital in gaining cooperation with the follow-up process. For example, Meta House is a Milwaukee County Central Intake Unit for substance abuse service. They do six- and 12-month follow-ups for all residential clients after service. Due to confidentiality issues and the nature of their clients (transient, unstable, and difficult to track), Meta House has

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<sup>8</sup> From Hall, "Homeless Populations."

**EXHIBIT 4****Sample Client Contact  
and Update Form**

Date \_\_\_\_\_

Name \_\_\_\_\_

Aliases \_\_\_\_\_

Date of birth \_\_\_\_\_

Address \_\_\_\_\_

Telephone (pager and/or cell phone) \_\_\_\_\_

Telephone numbers of friends or family members who will know where client can be reached

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Typical places that client can be found (such as a club or park) \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_

Aliases \_\_\_\_\_

Date of birth \_\_\_\_\_

Address \_\_\_\_\_

Telephone (pager and/or cell phone) \_\_\_\_\_

Telephone numbers of friends or family members who will know where client can be reached

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Typical places that client can be found (such as a club or park) \_\_\_\_\_

\_\_\_\_\_

Date \_\_\_\_\_

Name \_\_\_\_\_

Aliases \_\_\_\_\_

Date of birth \_\_\_\_\_

Address \_\_\_\_\_

Telephone (pager and/or cell phone) \_\_\_\_\_

Telephone numbers of friends or family members who will know where client can be reached

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Typical places that client can be found (such as a club or park) \_\_\_\_\_

\_\_\_\_\_

found that the bond established between the client (while still in-house) and program staff is crucial in maintaining contact and following up successfully.

As staff turnover can be a major obstacle to maintaining contact, supervisors might increase their contact with clients to maintain the bond if a key volunteer or staff member is leaving. For example, Volunteers of America of Southwest California has a substance abuse program with detailed documented procedures and forms to facilitate follow-up. However, the client data management coordinator reported that loss of rapport due to employee turnover was a major reason for disappointing completion rates. Because of high turnover, Volunteers of America was only able to achieve a completion rate of approximately 20 percent at six months, and 15 percent at 12 months.

## **Step 8: Obtain Client Consent for Follow-Up**

It is often easier to ask for consent when a client enters the program, or shortly afterward. Consent may be built into the “contract” between the client and the non-profit. For example, the caseworker may say, “We are going to do our best for you, but you have a role to play also. Part of the role is helping us to determine how to be as good as we can be.” By the time a client departs from the program, the client’s consent to be contacted later for outcome information should be on file. Exhibit 5 is a sample consent form.<sup>9</sup>

The client should also be asked what contact procedures are acceptable, such as mail, telephone, or in-person interviews. Also, if telephone follow-up is to be done, a client should be asked for the best times to contact him or her—both during the week and on weekends. Be sure to directly ask about unsafe times for contact or other methods that should be avoided. If a program is offering a variety of incentive options for client participation in follow-up, the client should be notified about these options. (See step 11 for incentive suggestions.)

## **Step 9: Discuss Follow-up Procedures with Clients at Exit**

Exhibit 6 provides a checklist for discussion with exiting clients.

An “appointment card,” like those given out by dentists or doctors, with the date of the follow-up, description of the incentive, location if in-person, and a telephone number to confirm or change the survey date, may be an effective reminder.<sup>10</sup> Two cards—one with the organization’s name and address and one without—may be necessary to address confidentiality concerns. A toll-free phone number to call if contact information is changed can also be included.

<sup>9</sup> For another example of client consent forms, see exhibit 6.2 in the Treatment Improvement Protocol (TIP) Series 14, *Developing State Outcomes Monitoring Systems for Alcohol and Other Drug Abuse Treatment*, published by the Center for Substance Abuse Treatment, 1995.

<sup>10</sup> This idea came from Cris Sullivan, Maureen H. Rumpitz, Rebecca Campbell, Kimberly K. Eby, and William S. Davidson II, “Retaining Participants in Longitudinal Community Research: A Comprehensive Protocol,” *Journal of Applied Behavioral Science* 32(3): 262–76 (1996).

## EXHIBIT 5

# Sample Consent Form for Post-Service Follow-Up

I, \_\_\_\_\_, grant [nonprofit organization] permission to contact me after I have finished services, for the purpose of follow-up. If [nonprofit organization] is unable to reach me, the staff has my permission to get in touch with the contacts identified below.

Contacting these people will be kept to a minimum and ONLY for the purpose of obtaining my new address or phone number. The permission to contact me will expire thirteen (13) months after my departure from the program.

All information provided by me and by my contacts is strictly confidential and will be used only for assessing program outcomes to improve future service to clients.

### Personal Information

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Employer: \_\_\_\_\_ Telephone: \_\_\_\_\_

### Contact Information

Primary contact name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

Secondary contact name: \_\_\_\_\_ Relationship: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

\_\_\_\_\_  
Client signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness signature

\_\_\_\_\_  
Date

Client elected not to sign consent form: \_\_\_\_\_  
Staff signature and date

Source: Adapted from materials developed for the Alcoholism and Drug Services Center at Volunteers of America, Southwest California (2002).

## EXHIBIT 6

### Follow-up Procedures to Discuss with Clients at Exit

- Remind client why the follow-up information is important.
- Confirm post-service contact information.
- Obtain preferences on how and where information should be collected.
- If appropriate, review the steps the organization is taking to maintain confidentiality.
- List the incentives for returning the completed questionnaire, and where appropriate, offer a choice.
- Provide a reminder card, indicating when, where, and how the questionnaire will be administered, plus the incentive for completion.



# While Conducting Client Follow-Ups

## Step 10: Maintain Contact with Former Clients

By maintaining contact with former clients, locating them for follow-ups will be much easier. Talking with former clients can strengthen their determination to avoid slipping back into past behavior. Follow-ups are also an opportunity to reinforce lessons learned during treatment or training.

There are three basic ways to maintain contact with former clients. First, if some form of “aftercare” services is provided to clients, staff should ask for periodic updates of contact information, remind clients of the date of follow-ups, and encourage their participation.

Second, if there is no aftercare, staff could informally establish a “check-in” process, perhaps by phone. If problems are identified, the staff could provide limited assistance, suggest re-enrollment in the program, or refer clients to another service provider. At the same time, contact information can be updated and clients urged to complete the follow-up questionnaire.

Third, even if aftercare and check-in calls are not feasible or appropriate, low-cost tracking procedures and a database of the contact information provided by the clients will help the nonprofit organize the information.

For example, Volunteers of America of Southwest California sought outcome follow-up information from clients a number of times, starting one month after departure. It found that this first follow-up was crucial to maintaining later contact with former clients in alcohol and other drug (AOD) and corrections programs.

Some clients, particularly those who are homeless or substance abusers, are particularly difficult to track. They often have no permanent address and few family ties, may be involved in criminal activity and therefore suspicious of efforts to follow up with them, and may hang out in dangerous areas.<sup>11</sup> Exhibit 7 lists some ideas for locating these types of former clients.

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<sup>11</sup> From Hall, “Homeless Populations.”

### In the Field—Low-Cost Tracking

Volunteers of America of Southwest California developed a Microsoft Excel database that includes client information from both when they are in service and after they have departed. It helps track when follow-ups are due and record data on the outcome indicators.

Each client's record, begun at the time of entry into the program, includes the following:

- Routine entry and exit information: Name; ID; introduction interview; dates of entry and exit.
- Preliminary success indicators: Number of days in the program; whether client left after less than 90 days; any relapse while in the program (for at least 90 days); planned or unplanned exits; graduation date.
- Evaluation information: Consent form signed or not; baseline and exit addition severity index (ASI); date of evaluation.
- Follow-up information (at one, three, six, nine, and 12 months): computer-generated follow-up date; whether follow-up was completed; whether the client was sober, conviction-free, and/or employed.

## Step 11: Offer Clients Incentives for Participating

Incentives are often key to participation and therefore achieving credible completion rates. Incentives can be cash (perhaps \$10–\$15 for completing a questionnaire or interview) or noncash goods, such as bus passes, free meals, movie passes, or gift certificates or food coupons to nearby grocery stores. Cash payments may not be appropriate for certain programs, such as drug abuse prevention or treatment.

Clients who complete a follow-up questionnaire may also be entered in a raffle for a valuable item, such as a bicycle, “boom box,” television, DVD player, DVDs, or other attractive prize. Clients should be reminded the odds of winning are dramatically greater than standard lotteries or sweepstakes. The expense of this approach is not large given its potential to increase participation rates. If possible, having multiple prizes in the raffle will increase the chance of winning for former clients.

A choice of incentives may also increase interest, and therefore willingness to complete the survey. For clients who want to remain anonymous, incentives can sometimes be used to obtain feedback. The procedures are discussed under “Maintaining Client Confidentiality” in section V.

## In the Field—Innovative Incentives

The alcoholism and drug services center of Volunteers of America of Southwest California originally held separate monthly raffles for clients who completed follow-up interviews (at one, three, six, and nine months after service) and for those who completed a 12-month interview. To be eligible, the client had to fill in the raffle form personally. The winner could choose from either a movie gift certificate or two \$5.00 gift certificates to a local grocery store.

The program later changed this system to increase the interview completion rate. Now all clients who complete the one-, six-, and 12-month follow-ups receive a \$10 gift certificate, and all clients who send in postcards with their changes of address automatically become eligible for a monthly \$10 raffle.

## Step 12: Administer the Follow-up Questionnaire

Although much hard work has been done to this point (deciding when to follow up, choosing incentive and survey method, collecting contact information, etc.), this step—getting clients to respond—is essential.

Adequate completion rates (at least 50 percent) are critical for obtaining meaningful information on outcomes.<sup>12</sup> In fact, many of the steps identified in exhibit 2 are designed to help improve response rates. Exhibit 8 summarizes these ideas.

Some examples of completion rates include the following:

- **Alcohol and substance abuse:** Meta House has a contact rate of approximately 90 percent, a follow-up scheduling rate of 80 to 90 percent, and a follow-up completion rate of 70 to 80 percent.
- **Teenage pregnancies:** Northern Virginia Urban League’s ARMS (Alexandria Resource Mothers) project, a support system for young pregnant women, reports a follow-up completion rate of 95 percent.
- **School learning assistance:** Vista Hill’s Learning Assistance Center in San Diego, CA, provides school- and home-based therapy and counseling services to emotionally disturbed and behavior disordered youth. Its follow-up completion rate is between 70 and 80 percent.

<sup>12</sup> A 50-percent response rate has been deemed the “minimum acceptable” rate for states by the U.S. Department of Education, Division of Adult Education and Literacy, National Reporting System for Adult Education. Reporting is required by Title II of the Workforce Investment Act. The Center for Substance Abuse Treatment established an 80-percent response rate for the grantees of its program to expand substance abuse treatment capacity in targeted areas in 2002. No targeted rate existed prior to this.

## EXHIBIT 7

### Tips for Locating Former Clients

- Call all phone numbers and send letters to all addresses on the client's contact sheet. Include information on incentives offered.
- Search phone directories to check incorrect phone numbers and to find numbers if only addresses are available.
- Check directories that provide names and phone numbers when an address is available.
- Create a "HOT PHONE LIST" with all the numbers to be called at off-hours, if there is no response during daytime hours.
- If addresses are known, knock on the doors of nonrespondents.
- Periodically call disconnected phone numbers, in case of a reconnect.
- Contact social service agencies to see if they have had recent contacts with the client.
- Check with credit bureaus for address updates.
- Visit or contact shelters and other frequently used locations for information on clients who might be homeless.
- Check death records at the County Recorder's Office or call the coroner.

*Source: Adapted from Integrated Evaluation Methods, "Staying in Touch: A Fieldwork Manual of Tracking Procedures for Locating Substance Abusers for Follow-up Studies." January 1996. National Evaluation Data and Technical Assistance Center (NEDTAC); Center for Substance Abuse Treatment, SAMHSA; UCLA Drug Abuse Research Center.*

## EXHIBIT 8

# Tips for Obtaining Follow-up Information from Former Clients

- Keep questionnaires short, attractive, and easy to complete (step 3).
- Notify clients in service of the need for follow-up information (step 5).
- Before clients depart service, obtain post-service contact information. Also obtain contact information for people (close friends, for example) who are likely to know the clients' contact information for six months to a year after their exit (step 6).
- Establish a rapport with clients to help gain their cooperation (step 7).
- At exit, give a choice of follow-up by phone, mail, or in person. Make sure that clients are comfortable with efforts to keep client information confidential (steps 3 and 9).
- At exit, give clients a reminder card, indicating when, where, and how the questionnaire or interviews will be administered. Include the incentive for providing a completed questionnaire (step 9).
- Give clients who want to remain anonymous a "code name" so they can still complete the survey and receive the incentive (step 9).
- Maintain contact with clients after discharge. Mail them greeting cards with a reminder that they will be contacted within a specific time frame to schedule the follow-up (step 10).
- During any after-service contacts, obtain updated contact information, remind former clients of the need for the follow-up information, and encourage them to complete and deliver the questionnaire by the due date (step 10).
- Provide modest incentives for returning completed questionnaires (step 11).
- Try multiple mailings or phone calls in administering the follow-up. Also, provide multiple reminders (two to three) to complete the survey. Don't give up too soon (step 12).

# After Outcome Information Becomes Available



## Step 13: Analyze and Report Follow-up Outcomes

Analysis of the data allows organizations to better understand the impacts of their programs and enhances their ability to improve services. Exhibit 9 lists some basic questions that follow-up outcome data can help answer.

The following is an overview of the steps in analysis.<sup>13</sup>

### Look at the Big Picture

Identify the outcomes that appear particularly good or particularly bad and highlight them as deserving particular attention. Examine previous outcome data to assess whether outcomes are improving or declining.

### Compare the Outcome Data with Benchmarks

Tabulate and compare the outcomes for various client demographic characteristics of interest. For example, program outcomes for men might be compared to those for women, and outcomes for Latinos might be compared to those for Caucasians.

Calculate the number and the percent of clients, tracked within a specific reporting period, who achieved each desired outcome.

A more complicated analysis would group clients into categories based on the anticipated difficulty in improving their condition or behavior. In the case of adoptions, it is relatively easy to find parents for healthy Caucasian babies but generally more difficult to find adoptive parents for older or minority children, as well as those with mental or physical disabilities. After clients are categorized, tabulate outcomes for each category.

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<sup>13</sup> More details on outcome data analysis are provided in another guide in this series.

For outcome indicators that compare client status at follow-up and intake, tabulate the change from intake to the time of follow-up. For example, the indicator might be the number and percent of clients whose mental distress (as measured on a particular scale) improved by a specific amount between entry and follow-up. First, calculate the change demonstrated by each client surveyed during the reporting period. Then, tabulate the number of clients achieving that specific level of improvement to get the indicator's value.

Prepare tables that compare outcomes demonstrated by clients served by *different units within the organization* that provide similar services. Consider comparing outcomes for clients served by *different caseworkers*.

Prepare tables that compare outcomes for clients who received different amounts, or types, of service. For example, compare outcomes for those clients participating in different numbers of "sessions" in order to assess how and to what extent the number of sessions affect outcomes. Similarly, assess whether specific service procedures, such as group versus individual counseling, appear to affect outcomes. (Such analyses require that the program has collected this information and can link it to outcome data for particular clients.) Some programs might compare outcomes for clients who enter another related program after leaving service with those who do not.

### **Seek Explanations for Unexpected Outcomes**

Carefully review client responses to follow-up survey questions. Outcome questionnaires should ask for specific reasons the former client gave a low rating to any aspect of the service. It is also good practice to ask at the end of a questionnaire for suggestions for improving the program. These responses can provide important clues as to why outcomes were disappointing.

## **Step 14: Take Action**

It will be a waste of time, effort, and money if client follow-up data are not used to improve services.<sup>14</sup> The following are just some of the many ways to use the results:

- Identify poor outcomes, and groups of clients demonstrating poor outcomes, that need special attention.

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<sup>14</sup> For more details on the use of outcome information by nonprofits, see Elaine Morley, Harry P. Hatry, and Jake Cowan, "Making Use of Outcome Information for Improving Services: Recommendations for Nonprofit Organizations" (Washington, D.C.: The Urban Institute, 2002); and Elaine Morley, Elisa Vinson, and Harry P. Hatry, "Outcome Measurement in Nonprofit Organizations: Current Practices and Recommendations" (Washington, D.C.: Independent Sector and The Urban Institute, 2001).

- Find program characteristics that are related to less than desirable outcomes.
- Provide a basis for program and staff recognition for good performance.
- Help identify general staff training needs.
- Help identify individual caseworkers needing additional training or technical assistance.
- Motivate staff to continually seek service improvement, using outcome data.
- Assess the effectiveness of alternative approaches to service delivery.
- Pinpoint how specific practices appear related to successful outcomes (such as to identify “best” practices).
- Provide baseline data for developing service improvement action plans.

While this list focuses on internal uses, follow-up information also can be used for external purposes, such as requesting funding, demonstrating to donors the non-profit’s value to the community, and enhancing the organization’s public relations efforts.<sup>15</sup>

For example, Volunteers of America of Southwest California regularly reports outcome findings to its funders and staff. One particularly useful finding was that many clients were having trouble with job placement and retention because they did not have cars. The job placement officer subsequently refocused her search on job opportunities that are accessible by public transport and do not require car ownership. Volunteers of America’s national office is also collecting follow-up outcome data from its local offices. It will be used to identify successful programs for replication and to expand best practices.

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<sup>15</sup> The uses of regularly collected outcome information are discussed further in another guide in this series.

## EXHIBIT 9

# Questions That Follow-up Data May Answer

- Which categories of clients achieved satisfactory outcomes? Which did not? (Clients may be grouped by age, gender, race/ethnicity, income, education level, household composition, size, or other categories of interest.)
- Do outcomes vary for clients that received services in different facilities (if more than one)?
- What outcomes have been achieved by clients of individual program supervisors (if more than one)? Of individual program caseworkers?
- How do recent outcomes compare with those in previous reporting periods?
- How do outcomes compare with program goals?
- What service delivery practices (such as type and amount of service) appear related to successful outcomes? To unsuccessful outcomes?
- Have outcomes changed after changes in program operating procedures or policies?
- Do the data indicate a need for additional caseworker training?
- Have outcomes changed after increases, decreases, or shifts in program resources?



# Other Key Issues

Some issues should be addressed institutionally to increase the ease and success of the follow-up effort.

## Maintaining Client Confidentiality

Maintaining client confidentiality is critical in many direct-service organizations. For example, those serving clients with substance abuse problems and sexually transmitted diseases may have a substantial proportion of clients who want to remain anonymous.

Federal regulations on releasing information about clients served by alcohol and drug facilities are extremely rigid. The Center for Substance Abuse Treatment (CSAT) manual, *Staying in Touch: A Fieldwork Manual of Tracking Procedures for Locating Substance Abusers for Follow-up Studies* (1996), states the following about confidentiality and ethical practices when tracking former clients:

Because members of these populations have been involved in activities that are stigmatized by mainstream society, it is difficult both to locate them for evaluation purposes and to secure their consent for an interview. Significant numbers of clients would never be located and interviewed if they could not be assured that their privacy would be protected. Thus, to protect client privacy, confidentiality safeguards are established and maintained for all tracking and locating activities for the duration of the study, and participants are informed that they will be protected.<sup>16</sup>

The following steps may be taken to obtain completed follow-up questionnaires from clients wishing to remain anonymous:

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<sup>16</sup> M. Douglas Anglin, B. Danila, T. M. Ryan, and K. Mantius, *Staying in Touch: A Fieldwork Manual of Tracking Procedures for Locating Substance Abusers for Follow-up Studies* (Washington, D.C.: National Evaluation Data and Technical Assistance Center, 1996).

- At the time of entry, ask clients to select a unique identifying number or word and provide basic demographic information (without giving personal identifiers, such as name and Social Security number).
- Ask clients to provide the follow-up information themselves by phone, mail, or in person. For example, programs may give clients an addressed, stamped envelope containing the questionnaire and a reminder about the timing of the follow-up when they leave the program. Alternately, clients may pick up the questionnaire at the appropriate time and return it by mail or in person. Clients should be reminded to complete the surveys using their unique identifier (if it was not already included on the questionnaire by the program). In this way, program staff can both match the entry condition and demographic information with their follow-up status and ensure confidentiality.
- It is both possible and desirable to offer incentives for completing follow-up surveys or interviews to clients who wish to remain anonymous. These clients could use their unique identifiers to pick up incentives. If the reward is an entry in a raffle, clients would need to call in to find out whether they have won.

Some additional steps to protect client confidentiality include

- be sure staff is up-to-date on confidentiality issues
- use “health study” or similar title
- be sure letterhead and correspondence do not reveal participation in drug treatment
- use a separate phone line just for follow-up
- let clients know what steps you are taking to ensure their confidentiality
- get a Certificate of Confidentiality, which protects your records from subpoena<sup>17</sup>

Exhibit 10 offers guidelines for protecting client confidentiality during telephone follow-up.

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<sup>17</sup>From Hall, “Homeless Populations.”

## Assigning Responsibilities

The follow-up process needs to be a normal part of the job. A sample weekly assignment of responsibilities to various staff members—updating records, making tracking log entries, making follow-up calls, and entering the outcome data—is outlined in exhibit 11.

For example, Meta House clearly distinguishes between the responsibilities of program staff (who provide service) and program evaluators. Program evaluators (a lead evaluator and an assistant) establish a relationship with clients while they are still in-house through twice-monthly meetings. Program evaluators also are responsible for maintaining contact with former clients, doing the follow-ups, and writing reports.

## Training Staff

Training for staff and/or volunteers involved in the follow-up process will increase efficiency and improve the accuracy of outcome data collected. While all new staff should have training, periodic sessions for those already involved is also desirable. Participants should include not only caseworkers (who play a major role in establishing trust with clients and encouraging them to participate in follow-up efforts) and the follow-up interviewers, but also those who maintain the tracking logs and enter the data.

The basics outlined in this guide should be covered, including

- a basic orientation to the project, its purpose, and the content of the questionnaire
- instruction on the systems used to record client information and the survey information
- discussion of maintaining client confidentiality when handling mailings, interviews, completed questionnaires, and the follow-up data
- interviewing techniques and guidelines regarding consent, confidentiality, and the handling of sensitive questions and client reluctance to answer (if verbal interviews are used)

All participants should be aware that clients have the right to refuse to answer a question or set of questions, or to terminate the interview, at any time, even if they have previously signed a written consent.

## Reducing Costs of Follow-Up

A follow-up process may mean additional costs for staff coverage and investments in equipment, such as improved computers or special software.

Start-up costs are likely to be higher than those for ongoing follow-up efforts. Of course, costs depend primarily on the data collection methods, the amount of information to be obtained, the number of clients or services for which follow-ups are done, the number of follow-ups attempted, and the value of incentives offered.

Exhibit 12 provides tips for reducing follow-up costs. While many nonprofits consider follow-up costs as part of their program budget, some obtain separate grants to undertake these activities.

## EXHIBIT 10

## Guidelines for Protecting Client Confidentiality during Telephone Follow-Up

- Ask for the former client by name.
- If questioned about who is calling, give only your first name.
- If still more information is requested, give the name of your organization and say that you are calling to conduct a brief survey. Do not refer at any time to sensitive services, such as alcohol and drug treatment.
- If the client is not there, leave your name and number and ask for a call back.
- If you are leaving a message on an answering machine, give your name and number only—do not state the organization's name.
- If you are calling a former client at work, ask if this is a good time. If not, ask for a good time to call back. (Note: Only call clients at work if they gave permission to do so on the consent form).
- When the former client answers the phone at home, ask if this is a good time to conduct the follow-up survey.
- When calling contacts listed on a client's consent form, say, "Your name was given as a contact for (former client's name) if we have difficulty contacting (former client's name). The last number and address I have is (number and address). Do you have anything different?" Always thank contacts for their time and efforts.
- If the contacts do not have any information, ask if a letter can be mailed to them to be given to the former client in case they see the client.

Many of these tasks can be done by trained volunteers.

Source: Adapted from "Confidentiality Regulations for Aftercare Department," Volunteers of America of Southwest California, 2002.

## EXHIBIT 11

# Sample Assignment of Follow-up Responsibilities

### Caseworker

- Enter information on client while still in service
- Maintain contact sheet
- Encourage clients to participate in follow-ups
- Maintain aftercare contact (if applicable)
- Send out mail questionnaires
- Conduct short in-person interviews (if appropriate)
- Conduct phone interviews (if appropriate)
- Enter collected data into database

### Administrative Assistant

- Maintain tracking log
- Send out postcard reminders (if no confidentiality problems), especially for clients who prefer coming into the service facility for their follow-up

### Supervisor

- Examine, interpret, and act on follow-up findings
- Review follow-up process and ensure data quality

## EXHIBIT 12

### Tips for Reducing Follow-up Costs

- Use volunteers. Volunteers from a variety of sources and groups (colleges and universities, the business community, retirees, homemakers) may have interviewing experience and skills in survey design. They can also help with more general tasks such as preparing mailings and calling former clients.
- Use a mail questionnaire when feasible, as it is less expensive than telephone or in-person interviews. Completing questionnaires at the nonprofit's facility is also low-cost, but may require incentives.
- Solicit donations from local businesses to use as incentives for completion of follow-up surveys. Donated products or services might also be raffled to keep costs low.
- If clients have access to computers and the Internet, use e-mailed questionnaires, if confidentiality requirements can be met.
- If possible, use program staff (or volunteers with the necessary skills) to analyze the outcome data. Keeping the follow-up instrument simple will help to keep data analysis in-house.
- Follow up with former clients only once. Conducting surveys six **and** 12 months after treatment will almost double the cost of six- or 12-month interviews done alone.

# APPENDIX

## Selecting a Client Sample for Follow-Up

### Why?

To help reduce costs, direct-service nonprofits with large numbers of clients may choose to follow up with only a sample of the client population.<sup>18</sup> If this option is selected, the organization should use a random sampling procedure that gives every client an approximately equal chance of being included in the sample. Random sampling generally produces more valid findings and makes the follow-up process more credible with external reviewers.

### How?

Clients enter and exit services throughout the year. One relatively easy way to develop a sample is for the organization to select every  $n^{\text{th}}$  client exiting the program. For example, a nonprofit that serves approximately 800 clients per year and estimates that it has resources to follow up with 200 clients should select every fourth exiting client for the survey sample.

An alternative to counting exiting clients is using a table of random numbers, such as a random number generator on a calculator. In the absence of an automatic number generator, a random sample can be drawn by literally picking numbers out of a hat. For example, the nonprofit with 800 clients that wishes to select 200 clients for follow-up would have four slips of paper numbered 1 through 4. One of these numbers (say, 1) would be preselected as the identifier for inclusion in the sample. For each client exiting service, a staff member would draw a number and assign it to the client. Any client for whom the number 1 was drawn would be included in the sample for follow-up.

### When?

Nonprofits will obtain more accurate outcome data if clients are placed in the survey sample when they exit service, or when it becomes clear they are not returning for further planned services. If clients are identified as part of the sample when they enter service, or while they are still in service, there is a chance that staff may give them special care.

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<sup>18</sup> A useful threshold for making this determination is 300 clients. In other words, if a program serves 300 or fewer clients per year, the nonprofit should probably survey all eligible clients. Nonprofits serving more than 300 eligible clients may choose to draw a random sample to survey.

## Who?

Nonprofits may include in the sample clients who have dropped out of services. However, clients who have not received a minimum level of service (as identified by program staff) should be excluded. Because dropouts are usually harder to locate and are less willing to provide follow-up information, a nonprofit may want to track dropouts and their outcomes separately, rather than include them in the process of following up clients who have completed service.



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