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Using a Priority Grid as a Tool for Shaping Strategy and Building Impact

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Keywords: Foundation, grantmaking, strategy, learning, impact, tool use

Key Points

- This article describes the priority grid – an analytic tool to assess grant proposals – and how it has fundamentally changed and improved the work of the Kate B. Reynolds Charitable Trust.
- Developed by the Trust, the priority grid focuses staff attention on key strategic elements: alignment with focus areas, depth of impact, and scope of impact. It has also served as an agent to develop, disseminate, and implement a foundation's grantmaking strategy, helping program officers understand how specific projects serve the larger goal and cultivate projects and applications that align with the foundation's long-term mission.
- With use of the priority grid, applications have increased in quality and alignment with foundation strategy, and staff recommendations to approve or decline applications have fallen more in line with the grid.

Introduction

A foundation's work extends well beyond its grantmaking, yet funding grants remains a key task. Which organizations, ideas, and projects should be funded? More important, how can a foundation's strategy be furthered by these critical decisions? Much has been written about strategic philanthropy, less about putting that strategy into everyday practice.

Once a foundation's strategy is chosen, it must be institutionalized and translated into new ways for

the funder to do its day-to-day work. How best can a foundation both refine and codify the strategy? How can a solid understanding of the foundation's strategy be shared among staff? How do staff better understand the kinds of organizations and projects they should be seeking and cultivating? What tools are available to assist foundations in operationalizing their strategies?

Tools are used in philanthropy for multiple purposes, including scoring applications. Some of those tools have elements related to foundation strategy, but few are focused on distilling a foundation's strategy into the day-to-day practice of grantmaking – including the cultivating, reviewing, and dispositioning of proposals. Dashboards, such as the ones developed by the Duke Endowment, may capture progress on established metrics in each of its program areas of funding. This is an important use of data visualization and relates to the foundation's strategy, but it is not driving the development of that strategy. Other tools assess the success of completed grants. Again, they may include elements related to foundation strategy, but they are not focused primarily on operationalizing the overall strategy. For example, the Community Foundation of Western North Carolina's tool to assess some grants retrospectively includes components of the foundation's strategy – for the foundation to be seen in a leadership role, for example, and for foundation-funded projects to leverage investments from other funders and other funds within the community foundation itself. The use of the

tool does not, however, appear to be shaping the foundation's strategy itself (Bacon & Belcher, 2014).

On the other hand, the William Penn Foundation has developed a set of tools – program plan, markers, and evaluation plan – based entirely on its strategic goals. The program plan in particular does assist program staff in keeping the strategy in mind when doing their work.

Program staff are encouraged to use their program plans regularly as a guidepost for their work. By reviewing the program plan and considering all proposed grants in light of the body of work around a particular strategy, program staff ensure that strategy is at the center of their decision making.” (Davis Picher & Yetman Adams, 2011, p. 43)

The set of tools also provides a consistent way to communicate about work across groups of foundation staff and with board members. Observation of the use of the tools led to identifying several limitations: varying levels of adoption of the tools, the labor-intensive nature of creating and updating the tools, and their lack of flexibility to reflect the full nature of the foundation's grantmaking (Davis Picher & Yetman Adams, 2011).

The Kate B. Reynolds Charitable Trust needed a strategy-based tool, but one with a different focus. This article describes an analytic tool – the priority grid – developed as a means of assessing grant proposals. In the process, the tool has served as an agent to develop, disseminate, and implement the foundation's overall grantmaking strategy. The tool enables a program officer to rate each application against common standards; that is the initial task accomplished by the tool. The priority grid has gone beyond ranking grants, however, to improving grantmaking, enhancing learning, and operationalizing strategy.

Context

The Kate B. Reynolds Charitable Trust is one of the largest private foundations in North Carolina. For several decades, the strategy at the Trust had been to “let a thousand flowers bloom.” The Trust's Health Care Division works to improve the quality of health of financially disadvantaged

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people across North Carolina. The list of issues funded by the division included almost everything that could be considered to be health care for low-income people in the state. Within those broad bounds, the Trust funded what it considered to be “good people doing good things,” much in line with the Center for Effective Philanthropy's classification of a charitable banker. Indeed, many of the staff literally were bankers by training. Key staff leaders included several long-term former employees of the foundation's sole trustee, Wells Fargo Bank (known then as Wachovia Bank).

New executive leadership in 2005 led to a new strategy for the Trust. Since then, it has made a journey from charitable banker to partial strategist. Charitable banker decision-making focuses almost exclusively on reviewing and deciding on individual grant applications. There is no application of a strategy for what the foundation intends to achieve, much less a theory of how that change will occur. A partial strategist, in comparison, “articulate[s] hypothesized causal connections between use of foundation resources and goal achievement” for at least some portion of its grant portfolio (Center for Effective Philanthropy, 2007, p. 3).

The first strategy set out by Karen McNeil-Miller, the new Trust president, was framed around impact, innovation, and influence – all three being

FIGURE 1 Health Care Division Funding Interests

Health Care Division Issues and Funding Interests

Through the Health Care Division, the trust responds to health and wellness needs and invests in solutions that improve the quality of health for financially needy residents of North Carolina. Grant proposals focusing on these funding interests will be given the highest priority in our funding decisions.

Access to Primary Care

Increasing Health Care Coverage – Efforts to increase the number of low-income North Carolinians who have coverage. Includes increases in coverage supported by both the private and public sectors.

Providing a Medical Home – Efforts to identify and secure a medical home for all. In addition to episodic primary care, a medical home features coordinated care and one or more of the following: chronic-disease management, medication assistance, and preventive care. Includes the fields of internal medicine, family practice, general practice, obstetrics, and pediatrics, and providers such as nurse practitioners and physician assistants.

Community-Centered Prevention

Efforts that are geographically based (either countywide or neighborhood-based) and involve multiple stakeholders (e.g., local education authorities or chambers of commerce) with aspects that may include work around the built environment, safe environment, greater food access, and physical activity.

Diabetes

Access to Quality Medical Care – Efforts to provide a physician-coordinated team for a comprehensive initial patient evaluation and a continuum of care. Teams may include mid-level practitioners, nurses, dietitians, pharmacists, and mental health professionals. Proposals that use cost-effective care without compromising patients' needs are of particular interest.

Diabetes Care and Self-Management – Providing medical care and self-management education intended to keep the illness under control and delay, diminish, or prevent its many debilitating impacts on both physical health and quality of life. Includes programs for people recently diagnosed with diabetes taking place in an outpatient setting or the implementation of a heightened level of standardized care in a community-clinic setting, among others. Efforts to provide individualized self-management planning to include glycemic control, reasonable physical activity, and psychosocial care and support as recommended by the American Diabetes Association.

Diabetes Prevention – Programs and strategies that focus on the prevention of diabetes in at-risk populations. Efforts that reflect best practices to identify and support those most at-risk of developing diabetes.

Mental Health and Substance Abuse

Developing or Strengthening a Continuum of Care – Efforts that respond to both systemic gaps and gaps in individual care.

Integrated Care – Efforts that bring mental and primary health care providers together in concurrent assessment and treatment. Includes co-location and reverse co-location models.

Prevention Services – Efforts to identify and support those most at risk of impairment and addiction reflecting the best practices in the field.

Substance Abuse – Expansion of evidence-based treatment to those most in need. Priority will be given to those proposals that are consistent with the North Carolina Institute of Medicine's Substance Abuse Task Force recommendations.

new concepts for the Trust. The first component of the strategy that staff was asked to focus on was impact. Decisions, including grantmaking decisions, would need to be made with this in mind.

The next step of building the new strategy was to focus on fewer areas of funding. The Health Care Division chose four issue areas: access to primary medical care, community-centered prevention, diabetes, and mental health and substance abuse. Later, more specific funding interests were chosen

in each of those areas. (See Figure 1.) To account for flexibility, the Trust's strategy allowed for 10 percent of grantmaking to be outside of those funding interests.

This narrowing of focus gave the Trust staff a completely different mandate, but also left them with many questions. How should strategy be reflected in the grants that are chosen for approval? How should the Trust implement changes to its grantmaking process so that strategy was

FIGURE 1 Health Care Division Priority Grid

Applicant: «Org Name» Issue/Funding «Codes Funding Interests»
 Amount: \$«Request Request Amount» Interest: Population: «Codes Underserved Group Population»
 Request ID: «Request Reference Number»

PRIORITY – Is the proposed work within an identified Funding Interest?

*Diabetes, Substance Abuse and Mental Health, Access to Primary Medical Care, Community Change
 Any of the areas that attempts to use systems-based strategy (8)*

LOW (0)	AVERAGE (4)	HIGH (6)	STRATEGIC (8) High-priority proposal, includes system-change strategy
Other/Not Funding Interests	Issue Area	Funding Interest	
0			

IMPACT What depth and scope do we actually believe the applicant can achieve?

Depth

What is expected depth of individual impact? What is applicant/program's potential to create lasting change?

LOW (2)	AVERAGE (4)	HIGH (6)
Little/ no change by unit of analysis	Some change over time expected	Expect lasting, measureable change
0		

Scope

What is scope of impact possible? What proportion of the population can the applicant reach?

LOW (2)	AVERAGE (4)	HIGH (6)
Serves limited or small population	Meets some need/targets single population (of many)	Serves entire population/meets geographic need
0		

ADDITIONAL CONSIDERATIONS

Assign indicated points if answer is yes and zero points if answer is no.

Are the majority of the counties impacted by the proposed activities designated as Tier 1?

(2)

Is the applicant new to the Trust over the last seven years?

(2)

Does the proposal include implementation of best practice with fidelity to the model?

(1)

Is the applicant organization minority-led?

(1)

Is the approach “innovative”?

(1)

Total Score: 0

Comments:

PO: «Request Staff ID»

11/28/2012

the primary driver? How could Trust staff explain saying no to an organization that had been consistently funded by the foundation for 20 years? The grantmaking process needed to change to reflect the new, focused strategy the Trust was building.

Individual perspectives of staff members and other stakeholders were already deeply embedded in the grantmaking process. Often these perspectives were driven by things other than a foundationwide strategic imperative. The Trust wanted

In the initial development of the priority grid, the Trust researched what was used by other foundations to score or segment applications. One of the primary shortcomings of most existing tools was that the scales used to score proposals tended not to be anchored with concrete points of reference, which compromised reliability.

to minimize this and add a level of rigor and consistency, both tied to strategy, which heretofore had been missing from its grant-review process.

In the initial development of the priority grid, the Trust researched what was used by other foundations to score or segment applications. One of the primary shortcomings of most existing tools was that the scales used to score proposals tended not to be anchored with concrete points of reference, which compromised reliability. One person's 20 could be another's 15. The Trust was looking for a way to lessen the active promotion of proposals based on individual staff members' opinions, not offer a way to inflate scores for their favorites.

Moreover, many existing tools were excessively long and detailed, with many categories and sub-categories. The Trust needed simple, not complex. The tool still needed to accurately represent the Trust's grantmaking strategy, but a complicated form would have met with great staff resistance and not been a valuable use of their time. The Trust also wanted to be certain that each element on the priority grid was something that should influence staff behavior and decisions – that is, each element must be directly related to something that would indicate an application's

likelihood to advance the Trust's strategy. Otherwise, it would be repetitive to other parts of the standard grantmaking process (e.g., due diligence) and seen, justifiably, by staff as busywork.

The Tool

The priority grid was developed as a one-page document to enable Trust staff to rate an individual application on multiple dimensions. Each element of the priority grid is tied specifically to the Trust's strategy. (See Figure 2.) All of the selections are scored, leading to a maximum of 27 points. Multiple staff, including program officers, foundation fellows, and evaluation staff, worked on the tool. A small team of staff members drafted an initial grid, which was adapted based on larger group conversations. As the Trust's strategy became deeper and more refined, the evaluation staff revised the priority grid to align with that new understanding. The tool has remained stable for more than a year and will likely change only to reflect a different strategic direction of the Trust.

The priority grid focuses staff attention and the many grantmaking discussions on key strategic elements: alignment with focus areas, depth of impact, and scope of impact. Each of these essentially has a low, medium, and high ranking. The average score serves as an anchor and is the assumed starting point. Program officers must be able to logically justify a higher rating. The three-point rating scale lends itself to higher interuser reliability. The scoring is much less important for ranking the application against others as it is in signaling to program officers what is important when cultivating, reviewing proposals for, and, later, monitoring grants.

The first question is the most important and has the highest assigned point value: Is the proposed work within an identified funding interest? A grant in the Trust's more broad issue areas (e.g., a project about primary medical care) would only be marked as "average." The same application, if it focused on providing a medical home, would fit within a funding interest and would be marked as "high." The same grant, but with a systemic approach, would be a home run in regard to the Trust's strategic priorities – because the grant

would be well within the Trust's funding interests and more likely to have a deeper and longer-lasting impact on more people because of the systems-change approach. Because of the use of the priority grid, program officers now know that an application completely outside of the four broad issue areas of the Trust is extremely unlikely to be funded. In addition, each program officer is also more aware of exactly what is meant by each of the more specific funding interests.

Impact is a critical element of the Trust's strategy. In order to conform to the new tagline of "investing in impact," staff needed to be able to translate that into grant applications. Impact was deliberately broken into two categories – depth and scope. How deep or transformational the grant results were was important, but so was the breadth or scope of the population that would be impacted. Evaluation staff realized that it was difficult to compare a program that might reach an entire population, possibly with a light touch, with an intensive program that produces transformative life changes but only reaches a few people. These impact questions also take the discernment of program staff, who are asked not what the applicant said they could accomplish, but what the program officer, based on professional judgment, believes they are capable of accomplishing. Although the priority question has the highest potential score for any component of the priority grid, the combined two elements addressing impact have a higher possible total score. This signals to the program officers that impact is critical – not only through the Trust's words but also in its actions.

The priority grid also includes a series of potential bonus points, which can be given for a variety of reasons that reflect the particular outlook of the Trust and represent the current strategic season. The Trust strategy includes focusing on rural counties, supporting health equity, and encouraging both best practices and innovation. All of these are represented in the bonus points of the priority grid.

Terms such as innovation, as well as many other phrases in the priority grid, have multiple meanings and nuances for different people. Reaching

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consensus on the practical definitions of each of the elements on the priority grid took many discussions over multiple grant cycles. Regarding innovation, for example, the Trust is looking to highlight approaches that are new to the field of health care rather than just new to North Carolina, much less new only to an organization. As scores were repeatedly corrected to represent the Trust's definition, the program officers began to consistently give a bonus point for innovation only to proposals that met that definition.

The tool has been adapted through an iterative process. Changes were made judiciously to balance comparability of application scores with the need to build an accurate reflection of the evolving, deepening strategy. The bulk of changes to the priority grid have been additions and clarifications to the instructions and explanations embedded in the tool rather than substantial changes to its content. However, the original grid included a section for organization capacity. Eventually, this was removed and the staff's judgment of an organization's capacity to implement the project and achieve the stated results was incorporated into other elements, such as depth of impact.¹

¹ The early grid also included a plus factor. A program officer could give an application a "+" based on something that wasn't captured in the grid. At its best, the plus was used to note discussions of "what about" or "what if" that weren't included in the rest of the grid. At its worst, it encouraged program officers to advocate for pet projects that weren't aligned with the Trust's strategy. The plus factor was a sort of peace offering made to program staff as they transitioned into a new way of working. It became a subjective, personal identifier that was given to too many applications and was dropped from the tool.

Now, program officers can make the call that a project is likely to be competitive or uncompetitive earlier in the process. This often begins with the earliest conversations with community members and potential applicants, long before an application is submitted.

The priority grid is used for each application that is submitted during the Trust's semi-annual funding cycles. Each program officer completes a priority grid for each pending application. The priority grid is an automated template in the Trust's grants management database, MicroEdge GIFTS. An Excel table is embedded in the template to calculate the total score automatically.

The entire program staff acts as a collective in making recommendations to the trustee. There is no board grants committee, so the priority grid acts as a mechanism to keep staff on track given the absence of a traditional board filter. The Trust also does not operate in an environment where a program officer or program director has been granted autonomy over a certain amount of money. Individuals present each application with an initial recommendation, but a larger group determines the recommendation that will be sent to the trustee. That group is composed of program staff, evaluation staff, Trust leadership, and trustee representatives. After each application is reviewed, the priority grid is also reviewed with the group. Changes are made, if necessary; the group finds that many fewer changes are needed now than in the early years of the priority grid. The final score and the group's recommendation for approval or denial are stored in a customized field in GIFTS.

The Trust receives 60 to 80 applications per cycle. After the final application is reviewed individually, the applications are reviewed again – but this time in a batch. A spreadsheet is generated to show each application in descending order of priority grid score and includes the initial group recommendation to approve or decline. The same larger group reviews the list, paying particular attention to higher scores that were recommended for denial as well as lower scores that were recommended for approval. Occasionally, there may be reasons that Trust staff chooses to recommend an application for approval or denial that simply aren't captured on the priority grid. It was never intended to be used as the only factor in decision-making. It does, however, help to make those exceptions explicit. The group also looks for consistency in recommendations for similar types of grants.

How Has the Grid Changed Grantmaking?

When Trust leadership requested the development of a grantmaking tool, it was expected to help grantmaking decisions become more consistent. More important, leadership wanted grantmaking decisions, and all of the behaviors and inputs that lead up to those, to reflect the Trust's strategy. This has happened. The Trust strategy has been developed well beyond "we'll know it when we see it," which isn't particularly helpful to program staff in cultivating new applications. Now, program officers can make the call that a project is likely to be competitive or uncompetitive earlier in the process. This often begins with the earliest conversations with community members and potential applicants, long before an application is submitted.

This allows the program officer to align her efforts with the ultimate decision – or even to decide not to pursue a line of potential inquiry. A program officer knows how each application will ultimately be discussed and what questions will be asked. Most importantly, the group has demonstrated through its actions that decisions for funding will actually be made based on those questions. A program officer considers these strategic elements during initial engagement with

potential grantees. This is vastly different than a come-one-come-all approach that focuses on eligibility. Now the focus is strategy, a much more nuanced concept.

The priority grid helped the Trust move away from the old way of reviewing and approving – one grant at a time without an eye on the bigger picture. Before, the money available for that particular grant cycle often drove the decisions. How much money is left? How many of these grants meet the basic criteria? How many can be funded? Now, the Trust’s strategy drives the decisions. The final review conversation looking at the entire group of applications at once also helps to remind the group of and reinforces earlier conversations.

Over time, the program officer’s initial recommendation and the group’s final recommendation for an application have converged with the grid score. That is, Trust staff is generally arriving at initial recommendations that match the number on the priority grid, and thus are a better reflection of the Trust’s strategy. The tool always had validity to the Trust strategy. It simply took time to move staff behavior and decisions to match it. Decisions are based now, in large part, on the chosen strategy and what the Trust said was important. The professional judgment of program staff is, of course, embedded into the tool. Program officer due diligence and judgment is still necessary; individual passion, however, has to be tied to something related to strategy. At the end of each cycle, the program officer’s ranking matches Trust leadership’s vision the majority of the time.

Discussions among the entire team about the priority grid built a common idea of Trust strategy among staff. That understanding is further developed and reinforced with each successive grant cycle. The priority grid serves as an important tool in helping program officers embrace the foundation’s strategy, understand how specific projects serve the larger goal, and ultimately, cultivate projects and applications that align with the foundation’s long-term mission. Decisions are aligned more with the foundation’s strategy rather than whether the application is well written, a quality that doesn’t necessarily correlate

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with the ability to carry out a project and achieve impact. The tool increases understanding of and reinforces alignment with the Trust’s strategy.

The tool also serves as a check for the program officers as to whether they are on target. The process has moved away from personal jockeying about which application to fund, especially for the last remaining funds for a given cycle. Pet projects have given way to more strategic discussions. Thus, the priority grid provides a filter for staff intuition based on strategy rather than affinity with a project or particular relationship with the applicant.

The Trust approved a few low-scoring applications in the early years of the priority grid. Experience has shown that a number of those grants are not just lackluster, but also problematic. It was a process at both the organizational and individual levels to let go of “good people doing good things” as the basic arbiter of grantmaking decisions. Some high-scoring applications have also failed to deliver as grants. Often, the program officer was convinced that the work was more transformational than the organization or the concept was actually capable of delivering, thus the importance of professional judgment. Of course,

The actual process of developing and refining the priority grid helped the Trust refine its strategy and disseminate its understanding and use among the staff. What did the Trust really mean by impact? What is “in” and what falls “out” of the definition of a given funding interest? What is meant by a depth of impact?

some grants are less than successful because of elements that have nothing to do with the priority grid, such as the departure of a key staff member.

The priority grid and the resulting score are not the be-all and end-all of the decision-making process for pending applications. It was never intended to work that way. For example, applications that are denied may be denied based on reasons that are not captured on the priority grid, such as prematurity or contextual factors. However, the priority grid as an important part of that decision has strengthened individual and team thinking and the overall grantmaking process at the Trust. Applications have increased in quality and alignment with the foundation’s strategy, and staff recommendations to approve or decline applications have fallen more in line with the priority grid. The grid aired out personal preference and illogical reasoning relatively easily and still serves that function very well. It also serves as a constant indicator of when the group is inconsistent in making recommendations. The priority grid puts numbers to a sometimes abstract set of questions. It reinforces the idea that grants benefiting small groups of people or those that don’t go beyond a surface-level intervention are at a great disadvan-

tage. Of particular importance, it gives the trustee a sense of rigor and predictability that a general discussion does not.

Additional Benefits of the Priority Grid

The Trust needed a type of shorthand that would translate and embed the new strategy into its grantmaking process and serve as a vehicle to first move staff conversations to its funding interests and then keep those conversations focused on the potential impact of the grants. The priority grid has indeed introduced some discipline and additional rigor, focused on strategy, to the discussions. With its three primary questions to ask about each grant application, the priority grid focuses Trust staff on its strategy via impact and its chosen funding interests.

The actual process of developing and refining the priority grid helped the Trust refine its strategy and disseminate its understanding and use among the staff. What did the Trust really mean by impact? What is “in” and what falls “out” of the definition of a given funding interest? What is meant by a depth of impact? If gaining knowledge about drug use at a one-time health fair is low depth, then achieving and sustaining sobriety following long-term treatment would be high. The priority grid gives the group a chance to practice their understanding of these concepts approximately 80 separate times (on each application), twice a year. Some of the conversations and examples are repetitive, but that is needed for learning at a level that changes practice.

Changing the questions it asks – and creating a process to revisit those questions again and again – prevents the Trust from experiencing an autopilot effect or even reversing course to an old flight pattern. This happens because the chosen grantmaking strategy is never far from the collective mind or the decisions that are made. The autopilot effect has been discussed in relation to implementing change-making strategy in complex systems outside of the foundation walls (Patrizi, Heid Thompson, Coffman, & Beer, 2013), but the concept also applies to the Trust’s process of implementing its grantmaking strategies within its own walls.

The tool helped to clarify what was in minds of the Trust's leadership and then teach that understanding to staff. Group reliability converged as experience was gained and definitions became clearer. Individual perspectives on what was meant by terms on the priority grid shifted increasingly to a common group perspective. One person's view of scope of impact versus another's became the group's collective version of scope of impact, for example.

The Trust also came to realize that the tool and the grantmaking conversations that surround its use are critical to training new staff to the Trust's particular lens of grantmaking. The tool prevents drift when a new person enters the equation. It is now obvious when a program officer doesn't "get it." This can be seen if a program officer continues to advocate for approval of lower-scoring applications, if the program officer's scores on the priority grids are often changed (either higher or lower) by the group, or if the program officer does not begin to cultivate and bring in higher-scoring applications. The priority grid has become the best single moment in time to highlight a program officer's level of understanding of the Trust's strategy and ability to apply it to the day-to-day practice of grantmaking.

Overall, the development and implementation of the priority grid has been a learning exercise for the entire team. To paraphrase Peter Senge, a learning organization is one that is building the capacity to create the future to which it aspires (as cited in Darling, 2014). The Trust does not claim to have reached the level of a learning organization, something that is much easier said than done. However, the process of implementing a new strategy, including the development and use of the priority grid, has certainly moved the Trust in that direction.

Future Implications

Implementation of the priority grid is iterative. As usual, there is always more work to be done, more improvements and adaptations to be made. The priority grid was only recently applied to the Trust's other division. The Poor and Needy Division works to improve the quality of life

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of low-income individuals in Forsyth County, N.C. Revisions and potential reinforcements of concepts and definitions will be needed. The group will also have to work to move the process from simply filling out a required form to one that shapes the grantmaking decisions and staff behavior all along the continuum of the grantmaking process. In many ways, the early journey in implementing the priority grid in the Poor and Needy Division has been similar to the Health Care Division's journey.

This year, the first new program staff member will join the foundation since the grid was fully developed. This will be a chance to foster Trust strategy and the grantmaking process by teaching the priority grid. It can serve as a concrete tool for training and determining where a new employee needs additional assistance. What is the assessment of the program officer regarding what is being heard from the applicant? Does the assessment of the project and its potential impact go beyond a direct translation of what the program officer has been told? Or does it include an interpretation of how the project might play out based on analysis, experience, and context? How does the program officer's initial recommendation relate to the priority grid, as well as the Trust's overall strategic direction?

When the priority grid was created, evaluation staff expected to return to the priority grid scores and compare them to the actual results of closed

A priority grid or similar tool can easily include different elements, such as the diversity of the applicant's staff, the financial health of the applicant, or the amount of other funds leveraged for the project. The tool can be designed around the particular priorities for any given funder.

grants. This has not occurred. The coming years will bring a reflective study comparing priority grid scores to success of grants. Did the Trust make the right grants? Was the initial assessment similar to staff perspective of the completed grant?

The priority grid has been used to assess individual applications rather than groups of grants in a given portfolio. The Trust could develop its strategy further to include targets for the mix of grants (i.e., different types of grantees, approaches) or specific measures it believes are critical to success in each funding interest. If so, those elements of a further refined strategy can be included in the priority grid. That is, the priority grid could be modified to assess the aggregate portfolio's fit with the Trust's strategy, rather than just the fit of individual grants.

The priority grid has worked well for the Trust. Could it work at a foundation with a different strategy? A different grantmaking process? A priority grid or similar tool can easily include different elements, such as the diversity of the applicant's staff, the financial health of the applicant, or the amount of other funds leveraged for the project. The tool can be designed around the particular priorities for any given funder. On the flip side, an organization's strategy can be

simple enough that the few factors for consideration can be tracked in one's head, negating much of the need for such a tool. The same is true of a strategy that has been static long enough and supported well enough that the understanding and application of it is common and consistent.

Volume of applications might also be a critical aspect in implementing a priority grid. If a foundation processes only a handful of grants a year, the effort will not bring enough value. If a foundation processes hundreds of grants per year, on the other hand, consistency and buy-in can be barriers to successful implementation. The Trust typically has five staff members serving as program officers for its pending applications and grants. That is a manageable number to coach to consistency. A foundation with a program staff many times larger than that of the Trust might find different benefits of the tool, such as some degree of consistency across a large number of only loosely connected groups. If a common understanding is developed and the strategy is clear from the tool, it can help disseminate and embed strategy among a larger group of staff.

The level of staff who assess grants can also influence the development and implementation of such a tool. If grants are reviewed by junior staff with little content experience, then a tool might need to be more explicit and rely less on individual judgment. If individual staff members are given autonomy over a portfolio of a set dollar amount, then the tool will only be useful if a staff member chooses to make decisions based on the elements outlined in the priority grid. The same case will hold in a foundation or department that is staffed by only one individual. The priority grid, to be useful, will have to be used by that person to make decisions throughout the grantmaking process, not just as a form to fill out. The priority grid has to matter to and be seen as useful by those who have the power to make or enforce decision-making.

A successful tool must also match with how the findings will be used. Does the foundation have a grants committee? What are the priorities of the ultimate decision-makers on applications? What

form of information is the most meaningful to them? When in the process is that information the most helpful? Depending on a foundation's governance structure, the tool can serve different purposes or be designed in different ways.

Conclusion

Effective grantmaking practice involves multiple stages including soliciting, reviewing, and approving applications. Intersection of a foundation's strategy with all of those tasks is critical to success. The priority grid has helped the Trust team formalize its strategy and improve its grantmaking decisions. Because the Trust's strategy is thoroughly embedded in the tool, the changes that have occurred in the grantmaking process have advanced the strategy. The use of the priority grid has evolved with the refinement of the foundation's strategy and the experience of the Trust staff.

Foundations grapple with important questions. A tool such as the priority grid can help with those. In the case of the priority grid, what some staff see as a focus on scoring and approving grants is actually a tool to communicate strategy and embed it into everyday practice. What starts with "which grants should we approve?" can ultimately lead to deeper understanding and learning. That can only be positive.

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