

The California Wellness Foundation

2006 GRANTS PROGRAM SURVEY

The California Wellness Foundation (TCWF or the Foundation) is interested in receiving comments from grant applicants and recipients about their experiences working with the Foundation's grants program in 2005. We hope to receive feedback that will help us enhance our responsiveness to organizations that seek funding. Your comments will be kept confidential, which is why we have not asked for your name or that of your organization. The survey is designed to be completed in approximately 20 minutes. Please have the person who has had the most direct contact with TCWF complete this survey. If you have more comments, please feel free to attach additional sheets. Return your completed questionnaire in the enclosed addressed, stamped envelope postmarked by October 2, 2006. Your participation in this effort will be most appreciated.

The National Health Foundation (NHF) is conducting this survey on our behalf. If any of the questions or sections of this survey are unclear, please contact Jennifer Ricards, NHF's project coordinator, at (213) 538-0743 or at jricards@nhfca.org.

A. YOUR PERCEPTIONS OF TCWF

1. In your opinion, what three words or phrases best describe TCWF?

- a. _____
- b. _____
- c. _____

B. SOURCES OF INFORMATION ABOUT THE FOUNDATION & ITS GRANTMAKING PROGRAM

2. How did you hear about TCWF? (Check all that apply.)

- | | |
|--|---|
| <input type="checkbox"/> Referral by another nonprofit organization | <input type="checkbox"/> Personal contact with a TCWF staff person |
| <input type="checkbox"/> Referral by another grantmaker or corporate-giving program | <input type="checkbox"/> Previous experience with the Foundation or staff member |
| <input type="checkbox"/> Suggestion from a member of your organization | <input type="checkbox"/> The Foundation Center or a local nonprofit resource center |
| <input type="checkbox"/> Articles about TCWF or TCWF-sponsored advertisements | <input type="checkbox"/> I can't remember |
| <input type="checkbox"/> Visiting TCWF's website | <input type="checkbox"/> Other (Please explain.) |
| <input type="checkbox"/> TCWF materials such as funding guidelines and annual reports. | _____ |
| <input type="checkbox"/> Public presentation from a TCWF staff member (e.g., "Meet the Grantmaker," TCWF-sponsored events) | _____ |
| | _____ |

3. In 2005, what TCWF communications materials or information did you receive or access? (Check all that apply.)

- | | |
|---|--|
| <input type="checkbox"/> TCWF Annual Report | <input type="checkbox"/> TCWF postcard |
| <input type="checkbox"/> www.tcwf.org website | <input type="checkbox"/> News release |
| <input type="checkbox"/> Foundation e-mail | <input type="checkbox"/> None of the above |
| <input type="checkbox"/> <i>Portfolio</i> newsletter | <input type="checkbox"/> Other (Please explain.) _____ |
| <input type="checkbox"/> <i>Reflections</i> publications series | _____ |
| <input type="checkbox"/> <i>Information for Grantseekers</i> brochure | |

4. In 2005, did you read our *Information for Grantseekers* brochure? Yes No (If no, please skip to question #5.)

If yes, were the application procedures easy to understand? Yes No

What are your suggestions for improving it? _____

5. In 2005, did you read our Annual Report? Yes No (If no, please skip to question #6.)

If yes: Did you read the online or print version? Online Print

Was the information useful? Yes No

If yes, how was it useful? _____

6. In 2005, did you read our *Portfolio* newsletter? Yes No (If no, please skip to question #7.)

If yes: Did you read the online or print version? Online Print

Was the information useful? Yes No

If yes, how was it useful? _____

7. In 2005, did you read any of our *Reflections* publications series on lessons learned in philanthropy?

Yes No (If no, please skip to question #8.)

If yes: Did you read the online or print version? Online Print

Was the information useful? Yes No

If yes, how was it useful? _____

8. Of all the TCWF materials you received or accessed, which ones most helped you understand TCWF's grantmaking program and why? _____

The next two questions focus on TCWF's website.

9. Do you have Internet access at your work? Yes No Don't Know

10. In 2005, did you visit our website? Yes No (If no, please skip to question #11.)

If yes: When did you last visit? (Check one only.)

Within the last week Within the last month Within the last 3 to 6 months More than 6 months ago

How often do you visit? (Check one only.)

At least once a week At least once a month At least once every 3 to 6 months

Other (Please explain.): _____

If yes, what is your overall assessment of it? _____

If yes, what are your suggestions for improving it? _____

C. TCWF GRANTMAKING PROGRAM

Over the last five years, TCWF has been implementing its Responsive Grantmaking Program.

The following three questions focus on this topic.

11. TCWF's grantmaking program is centered around eight health issues and special projects.

How well do you feel you understand TCWF's funding priorities? (Check one.)

Very well Moderately well A little Not at all

12. How useful were the following in helping you understand them? (Check one for each communications channel.)

	Very useful	Moderately useful	A little useful	Not useful	Not Applicable
www.tcwf.org website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Information for Grantseekers</i> brochure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Portfolio</i> newsletters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Reflections</i> publications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TCWF annual reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interaction with Foundation staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Any additional comments? _____

13. How useful were the following in helping you understand core operating support?
(Check one for each communications channel.)

	Very useful	Moderately useful	A little useful	Not useful	Not Applicable
www.tcwf.org website	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Information for Grantseekers</i> brochure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Portfolio</i> newsletters	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<i>Reflections</i> publications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TCWF annual reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interaction with Foundation staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any additional comments?	_____				

We would like to know how satisfied you were with your interactions with TCWF staff. The next series of questions addresses this goal.

14. In 2005, approximately how many contacts did you have with TCWF staff including through the mail or by telephone, e-mail, or face-to-face contact?

- 0-2
- 3-5
- 6-10
- More than 10

15. Which staff did you interact with MOST? (Check one only.)

- Communications
- Executive
- Finance
- Grants Management
- Grants Program
- Reception/Administration

16. The persons you interacted with most were: (Check one for each of the following.)

	Strongly agree	Agree	Disagree	Strongly disagree
Courteous	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responsive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Knowledgeable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Helpful	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Accessible	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Any comments?	_____			

Information from the next three questions will help to assess TCWF's grantmaking process.

17. After you submitted a Letter of Interest, were you encouraged to submit a full proposal?

- Yes No Don't know or can't remember

18. Based on your involvement with TCWF, how would you rate the following aspects of TCWF's grantmaking process? (Check all that apply.)

	Very difficult	Difficult	Easy	Very easy	Don't know
Letter of Interest	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grant Proposal	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Progress Narrative Reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Final Narrative Report	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Financial Reports	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other _____					

19. Are there any ways we can improve these processes?

D. WORKING WITH THE FOUNDATION

Please complete the following series of questions ONLY if you were NOT encouraged to submit a proposal. If you were asked to submit a proposal, please skip to question #27.

20. Did you receive a denial letter in a timely fashion? Yes No Don't know or can't remember

21. Did you ask for feedback on your denial? Yes No Don't know or can't remember

22. Were you able to get feedback? Yes No Don't know or can't remember

23. Was the feedback useful? Yes No Don't know or can't remember

24. Are there ways in which TCWF or its staff have added value to your work above and beyond the grant dollars you received? Yes No

If yes, how?

25. Are there ways in which TCWF has been difficult to work with or made things difficult for you?

26. Overall, how would you characterize your working relationship with TCWF?

- Excellent Good Okay Somewhat difficult Very difficult

E. ADDITIONAL QUESTIONS

27. How does your experience working with TCWF compare to working with other foundations?

- Better Worse About the same

Please give examples: _____

28. Do you have comments about areas of potential improvement that were not covered by this survey?

F. ABOUT YOUR ORGANIZATION

29. What is the job/role of the person completing this survey?

30. Is your organization: (Check all that apply.)

- A current grantee of the Foundation? A former grantee?
 An unfunded applicant that submitted a Letter of Interest? A current applicant awaiting a Foundation decision?
 Other _____

31. Please indicate which range best characterizes the total operating budget of your organization for its most recent fiscal year.

- | | |
|---|---|
| <input type="checkbox"/> Up to \$199,999 | <input type="checkbox"/> \$2 million to \$4,999,999 |
| <input type="checkbox"/> \$200,000 to \$349,000 | <input type="checkbox"/> \$5 million to \$9,999,999 |
| <input type="checkbox"/> \$350,000 to \$499,999 | <input type="checkbox"/> \$10 million to \$24,999,999 |
| <input type="checkbox"/> \$500,000 to \$999,999 | <input type="checkbox"/> \$25 million and over |
| <input type="checkbox"/> \$1 million to \$1,999,999 | |

32. Please name the California county in which your organization is headquartered.

**THANK YOU FOR TAKING THE TIME TO COMPLETE THIS SURVEY.
PLEASE RETURN BY OCTOBER 2, 2006 TO:**

TCWF Grants Program Survey
c/o National Health Foundation
Attn: Jennifer Ricards
515 S. Figueroa Street, Suite 1300
Los Angeles, CA 90071