MAP Evaluation: Year After Program

After Program Evaluation

Thank you for participating in the Museum Assessment Program (MAP) last year!

We ask all institutions to complete evaluations one year following their experience to understand the longer-term influence of participation. This check-in helps us understand where the program can improve, what aspects are most valuable, and helps us report back to our funders and stakeholders.

Thank you in advance for sharing your honest feedback with us!

Attend to the common of the common of	
What is the name of your institution or m	iuseum?
Type of MAP Assessment completed las	it year:
Organizational	Education & Interpretation
Board Leadership	Community & Audience Engagement
Collections Stewardship	

MAP Evaluation: Year Aft	ter Program
--------------------------	-------------

MAP Changes: Views

* For the following, please indicate the degree to which MAP helped your team change the way you or your team **views the Museum**:

	Not at all	Somewhat	Greatly	N/A; Not relevant for our MAP
Increase awareness of our institution's identity, role and/or mission				
Increase awareness of challenges facing our institution				
Increase awareness of our institution's strengths				
Increase awareness of the communities our institution serves				
Increase awareness of the communities our institution hopes to serve				
Increase awareness of standards our institution will abide by				
Increase confidence and comfort with change				
Improve our internal diversity, equity, access, and inclusion within board, staff, volunteers and/or the facility				
Give support to staff goals and ideas				
Improve our internal visibility, status, or value within the organization (or within a parent organization)				
Increase our ability to notice and leverage opportunities (e.g., resources, tools, people, situations) for change				
Please share any additional examples of changes that occurred within the way yo Assessment Program.	our team vie	ws the museur	n due to the	e Museum

	Not at all	Somewhat	Greatly
Awareness of its successes			
Awareness of its challenges	\bigcirc	\bigcirc	\bigcirc
Ability to address challenges			
If somewhat or greatly above,	please share any examples of	DEAI growth in your institutional prac	tices.

MAP Evaluation: Year Aft	ter Program
--------------------------	-------------

MAP Changes: Operations

* For the following, please indicate the degree to which MAP helped your team change the way you or your team **conducts daily operations or practices**

	Not at all	Somewhat	Greatly	N/A; Not relevant for our MAP
Improve governance systems and/or engagement				
Improve Policy & Procedures				
Improve internal communication				
Improve collection stewardship (e.g., policy, physical storage, staffing, funding)				
Improve internal efficiency within operations or infrastructure				
Improve our exhibits and/or programs				
Improve our facilities				
Improve our staffing (e.g., change position or job descriptions, change organizational chart, change salaries)		\bigcirc		
Increase our data collection and/or included regular review of our data				
Improve human safety (e.g., reducing physical risks, security systems)				
Please share any additional examples of changes that occurred within the way you to the Museum Assessment Program.	our team cor	iducts daily ope	erations and	l practices due

MAP Evaluation: Year After Pro	uuran
--------------------------------	-------

MAP Changes: External audiences and partners

* For the following, please indicate the degree to which MAP helped your team change the way you or your team thinks about or engages with external audiences and partners:

	Not at all	Somewhat	Greatly	N/A; Not relevant for our MAP
Improve current stakeholder engagement				
Improve outreach to community members, potential partners, and potential stakeholders				
Improve engagement with community members or potential partners and stakeholders				
Increase partnerships with other entities to collaborate or work toward shared goals				
Improve approach to marketing or membership				
Improve online visitor experiences (e.g., website, social media)				
Improve visitor experience (e.g., exhibits, wayfinding, accessibility, gallery engagement)				
Expand diversity, equity, access, and inclusion within our partnerships, stakeholders, and community				
Improve our gift shop				
Please share any additional examples of changes that occurred within the way you due to the Museum Assessment Program.	our team thir	iks about exter	nal audiend	es and partner

MAP Evaluation: Year After Program

MAP Changes: Future plans

* For the following, please indicate the degree to which MAP helped your team change the way you or your team **plans for the future:**

	Not at all	Somewhat	Greatly	N/A; Not relevant to our MAP
Improve our strategic planning and prioritizing				
Improve our funding strategies				
Improve our professional development and training opportunities for staff and/or volunteers				
Work toward accreditation or reaccreditation				
Consider undertaking another Museum Assessment Program				
Consider applying or apply for Core Documents Verification				
Please share any additional examples of changes that occurred within the way sassessment Program.	your team pla	ns for the futur	e due to the	Museum

MAP Evalu	ation: `	Year Afte	r Prograr	n						
AP Overall										
Please rate y	our ove	erall exper	rience with	the MAF	Program					
Poor										
Fair										
Good										
Excellent										
Superior										
How likely is institutions? 0 (Not at all likely)	n mai y	2	3	a de IVIZ	5	nn you par	7	8	gues at o	10 (Very likely)
Please rate t			Not at all valu			omewhat val			Greatly valua	able
Application Pr										
Site Visit with										
Reviewer										
Assessment F	Report									
Please share ar	ny examp	les related t	o your answ	ers above a	and any reco	mmendation	s for future	programs:		

MAP Evaluation: Year Aft	ter Program
--------------------------	-------------

Our current state

* In the year following the program, to what degree has your museum or institution experienced difficulty with the following:

	Great difficulty	Some difficulty	No difficulty
Devoting time to changes suggested by the MAP program			
Working within processes to implement changes			
Involvement from museum staff			
Taking initiative or ownership of changes			
Involvement from museum's governing authority			
Director turnover			
Staff turnover			
Internal communication about MAP recommendations			
Agreement on institutional priorities			
Funding or resource availability			
If you indicated "Great" or "Some" difficulty above, what could be changed or resease challenges in the future?	ources could be o	ffered to help insti	tutions facing the

		disagree	Disagree	Neutral	Agree	Strongly A
helped us critically consider operations and procedures.						
enabled us to identify our s	trengths.					
allowed us to discern challe faces.	enges our institution					
identified ways to address of	challenges we face.					
developed our confidence institutional change.	n our ability to make					
gave us a better understand best practices in the museu						
provided the staff and board of their roles and responsib						
facilitated engagement with	our governing body.					
	-4: 4					
fostered internal communic In just a few words, plea strengthened your instit	ase share the most i ution.					
In just a few words, pleastrengthened your instited the strengthened your instited the program of the program following core documen	ase share the most i ution. n, has your institution					
In just a few words, pleastrengthened your instit	ase share the most i ution. n, has your institution			ans to create	or update) any of the
In just a few words, pleastrengthened your instit	ase share the most i ution. n, has your institution	n created or (updated (or pl	ans to create	or update	
In just a few words, pleastrengthened your instited by the strengthened your instited by the strengthened your instited by the strength of the program of the program of the strength of the s	ase share the most i ution. n, has your institution	n created or (updated (or pl	ans to create	or update) any of the
In just a few words, pleastrengthened your instited by the program of the program following core document that apply the Mission Statement	ase share the most i ution. n, has your institution	n created or (updated (or pl	ans to create	or update) any of the
In just a few words, pleastrengthened your instited by the program of the program following core document that apply that apply the Mission Statement Institutional Plan	ase share the most i ution. n, has your institution	n created or (updated (or pl	ans to create	or update) any of the

MAP Evaluation: \	∕ear After	Program
-------------------	------------	---------

Additional involvement

when funds are available, MAP offers a competitive following	ow-up visit with a peer reviewer.
My institution	
is considering applying for a follow-up.	
applied for a follow-up.	
participated in a follow-up.	
is not considering a follow-up.	
was unaware that a follow-up was an option.	
Please explain the considerations that went into your institution's cho	ice regarding a follow-up visit.
is not considering a follow-up. was unaware that a follow-up was an option.	ice regarding a follow-up visit.

process? Optional	your team is proud of that has come from going through the MAP	What is one accomplishment you or your team is proud of that has come from going through the MAP process? Optional If you have something you'd like to discuss with your program officer, please provide your name and e address. Name			
Optional If you have something you'd like to discuss with your program officer, please provide your name aladdress. Name		Optional If you have something you'd like to discuss with your program officer, please provide your name and e address. Name	last thing we wo	ould love to hear about your achievements from the past year!	
Optional f you have something you'd like to discuss with your program officer, please provide your name a address. Name	iscuss with your program officer, please provide your name and ema	Optional f you have something you'd like to discuss with your program officer, please provide your name and eaddress. Name		shment you or your team is proud of that has come from going through the MAF)
f you have something you'd like to discuss with your program officer, please provide your name anddress. Name	iscuss with your program officer, please provide your name and ema	f you have something you'd like to discuss with your program officer, please provide your name and e address. Name			
address. Name	iscuss with your program officer, please provide your name and ema	Name	onal		
Name		Name		g you'd like to discuss with your program officer, please provide your name and ϵ	ema
			ess.		
Email address		Email address			
			address		
			ı		