Compassion Capital Fund Communities Empowering Youth
Baseline Survey

Note to OMB Examiners:

This information collection instrument contains all questions proposed to be asked of all respondents. Throughout the instrument, any questions that would be uniquely asked of a selected set of respondents are annotated with a superscript:

L – to be asked only of lead organizations;

P – to be asked only of partner organizations (and not of lead organizations); or

06 – to be asked only of organizations in the 2006 grantee cohort.

In some cases for the 2006 grantee cohort, there are two superscripts (e.g., "L 06" indicating the question would be asked only of lead organizations in the 2006 cohort). Questions without a superscript would be asked of all respondents.

When the survey is formatted for web-posting or hard-copy, the non-relevant questions will be excluded from the instrument to be completed by specific groups of respondents.

A legend indicating what superscripts stand for is repeated on each page of the survey for your convenience.

Compassion Capital Fund Communities Empowering Youth

Baseline Survey

The Administration for Children and Families, Office of Community Services (OCS) has sponsored a research study of the Compassion Capital Fund Communities Empowering Youth (CEY) program. As part of this study, a series of surveys will be used to gauge the level of **organizational capacity growth** and **community partnership development** that is stimulated through participation in the CEY program <u>over the entire</u> grant period. Your responses to this survey will provide researchers with information about your organization at or near the <u>beginning</u> of CEY grant activities. Please answer questions as honestly as possible to establish a baseline from which progress may be documented.

Completing this survey is part of the CEY grant requirements. Information obtained through this survey will be used to report about grantees as a group. That is, information about specific organizations and partnerships will not be reported. Federal CEY grant administrators will not view your organization's survey responses. Other members of your partnership, including your designated lead organization, will not view your survey responses. Responses will be accessed only by staff at the research firm that is conducting the evaluation of the CEY program for OCS. All answers will be kept confidential to the best of the research contractor's ability, as allowed by law.

As mentioned above, this survey involves collecting baseline information at or near the outset of your CEY project implementation. Additional surveys will be sent to your organization to obtain updated information in the future. Your cooperation in completing this survey and returning it by the date requested is appreciated.

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 2

Contact Information

1. **Name of your organization**

    _____

2. **Name of your CEY-funded partnership program**

    _____

3. **Address**   Street

    _____

    Apt/Suite #

    _____

    City

    _____

    State

    _____

    Zip

    _____

4. **Name of individual responsible for completing this survey**

    _____

5. **Job title of individual responsible for completing this survey**

    _____

6. **Date of completion**

    _____

7. **Phone**   Main number

    _____

    Extension

    _____

8. **Fax**

    _____

9. **Email address**

    _____

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 3

Instructions

Please answer all questions about your organization. "YOUR ORGANIZATION" refers to the primary beneficiary of the assistance provided through the CEY program. If your organization is hosted by a larger organization (e.g., a church, community development organization, United Way), please answer only for the component that is a part of CEY grant activity. Please do not answer for or about other partners or for contractors (e.g., outside consultants you may have hired to provide training and/or technical assistance on organizational capacity building).

Please mark ONE response per line. Where "Select one" is indicated, please select ONLY ONE response from the list of response options.

For some questions, you may select "Other;" in those instances, please write in a description as requested.

Instructions that pertain to specific questions are imbedded within the survey itself. Instructions are always written in **_bold italicized_** font.

Examples provided as part of instructions are meant to be illustrative. They are not all inclusive. That is, if your organization has engaged or currently engages in activities that could reasonably be included as part of the list of examples but were not specifically mentioned, please respond to the questions following.

For this paper version, please take note that you will be required to manually skip over or select "NA" to questions that do not apply to your organization. Prompts are included to facilitate this process. If you need additional support in responding to these questions, please consult the "How to fill out this survey" section found on the last pages of this document or contact [insert contact information for contractor staff].

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 4

Organizational Profile

This section contains general background questions about your organization's history, the types of services it provides, and the geographic area in which it provides these services.

		Month	Year
10.	**When was your organization formed?**		

11. **Is your organization best described as…**   Select one

Faith-based.. [ ] 01

Secular.. [ ] 02

12. **Is the area your organization serves best described as…**   Select one

A small town (population less than 10,000)... [ ] 01

A large town (population between 10,000 and 50,000)............................ [ ] 02

A city (large, densely populated area that may include several administrative districts).. [ ] 03

An entire state... [ ] 04

Multiple geographically distinct areas... [ ] 05

13. **At present, is your organization…**   Yes   No

A Weed & Seed agency... [ ] 01   [ ] 02

Partnering with any Weed & Seed agencies on the CEY project............... [ ] 01   [ ] 02

14. **In the past 12 months, has your organization addressed…**   Yes   No

Gang Violence.. [ ] 01   [ ] 02

Youth Violence... [ ] 01   [ ] 02

Child Abuse/Neglect.. [ ] 01   [ ] 02

15. **Does your organization provide…**   Yes   No

Direct client services.. [ ] 01   [ ] 02

Capacity building support to other organizations....................................... [ ] 01   [ ] 02

If yes to "Direct client services" and yes to "Capacity building support" in #15:

L survey items to be asked uniquely of lead organizations
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Communities Empowering Youth Baseline Survey - 5

15a. **Of the total amount of resources your organization has at its disposal, what percent of these resources go toward providing…**

Direct client services... _____ %

Capacity building support to other organizations.. _____ %

Other *(please describe)*.. _____ %

TOTAL   100   %

If yes to "Direct client services" in #15:

15b. **Of the total direct client services your organization provides, what percent of these services are geared for…**

Children/Youth.. _____ %

Adults/Elderly... _____ %

Other *(please describe)*.. _____ %

TOTAL   100   %

For question 15c, please use the following definitions:
Training – group-based adult education and skill-building activities (e.g., workshops).
Technical assistance – consultation that is specifically customized or tailored to the needs of each individual faith-based and community organization.

If yes to "Capacity building support" in #15:

15c[L] **Prior to your CEY award, did your organization have experience providing…**	Yes, has itself provided this type of support	Yes, has brokered this type of support by hiring outside consultants	Yes, has both itself provided and brokered this type of support	No, it has not
Training sessions on capacity building...............................[...] 01	[ ] 01	[ ] 01	[ ] 02
Technical assistance on capacity building..........................[...] 01	[ ] 01	[ ] 01	[ ] 02
Financial assistance to other organizations (e.g. sub-granting funds).........[...] 01	[ ] 01	[ ] 01	[ ] 02

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 6

Leadership Development

This section contains questions about your organization's leadership—its governing body and staff—and the roles these various individuals play in the daily functioning of your organization and in the achievement of your organization's goals.

16. **Is your organization governed...**

	Yes	No
By its parent or umbrella organization's Board of Directors.................................	[ ] 02	[ ] 02
By an Advisory Panel...	[ ] 02	[ ] 02
By its own Board of Directors..	[ ] 01	[ ] 02

If no to "By its own Board of Directors" in #16:

16a.

With respect to developing a Board, your organization...   Select one

Is concerned it should work on this area but lacks the time or resources to do so............	[ ] 01
Has developed plans to work on this area but lacks the time or resources to implement them..	[ ] 02
Has implemented steps to address this area..	[ ] 03
Is not giving this area active consideration because it is satisfied with its current status	[ ] 04
Has not given this area active consideration to date..	[ ] 05

Skip to #17.

If yes to "By its own Board of Directors" in #16:

16b. **At present, how many individuals are on your organization's Board?**................#..........................

	An unlimited number of seats	Not specified
16c. **How many total Board seats do your organization's bylaws specify?**	# [ ] 02	[ ] 02

16d. **Do the Board's responsibilities include...**   Yes   No

L survey items to be asked uniquely of lead organizations
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Communities Empowering Youth Baseline Survey - 7

Goal/Strategy development.. [ ] 01   [ ] 02

Community/Stakeholder outreach.. [ ] 01   [ ] 02

Budget development.. [ ] 01   [ ] 02

Financial review.. [ ] 01   [ ] 02

Performance review: program/program outcomes.................................... [ ] 01   [ ] 02

Performance review: executive director.. [ ] 01   [ ] 02

Recruitment of new board members... [ ] 01   [ ] 02

Provision of formal orientation to new board members............................. [ ] 01   [ ] 02

Other *(please describe)*... [ ] 01   [ ] 02

16e. **This table lists a variety of possible focus areas for an organization's Board development. Please select the box that is most representative of your organization's thinking on each of the following.**	Are concerned we should work on this area but lack the time or resources to do so	Have developed plans to work on this area but lack the time or resources to implement them	Have implemented steps to address this area	Are not giving this area active consideration because we are satisfied with our current status	Have not given this area active consideration to date
Increasing Board diversity..	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Improving Board practices (e.g., keeping minutes at meetings, developing bylaws)	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Training Board members to help them learn about their roles and responsibilities........................	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05

For the upcoming section concerning staffing, please use the following distinction between unpaid staff and volunteers.

- *Unpaid staff have a regularly defined set of job functions—often administrative in nature—that are performed on a regular basis.*
- *Volunteers are community members that contribute to the organization often through provision of direct service delivery on an occasional or special purpose basis.*

Please include the executive director in your calculations.

Please do not include interns in your calculations.

Full time employees 30+ hrs/wk	Part time employees 1-29 hrs/wk

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 8

17. **How many paid staff are**   #   #

     How many unpaid staff are   #   #

     How many volunteers are   [███]   #

18. **What is the total number of hours per week contributed by…**

	Hrs/wk	NA, no such staff
All paid staff...#.		[ ] 98
All unpaid staff...#.		[ ] 98
All volunteers...#.		[ ] 98

19. **Compared to this time last year the number of…**

	Increased	Decreased	Stayed about the same	NA, did not exist a year ago	NA, no such staff
Paid staff has	[ ] 01	[ ] 02	[ ] 03	[ ] 98	[ ] 98
Unpaid staff has	[ ] 01	[ ] 02	[ ] 03	[ ] 98	[ ] 98
Volunteers has	[ ] 01	[ ] 02	[ ] 03	[ ] 98	[ ] 98

20. **Is there a job description for…**

	Yes, written	Yes, unwritten	No, none	NA, no such staff
Paid staff...	[...] 01	[...] 02	[ ] 02	[ ] 98
Unpaid staff..	[...] 01	[...] 02	[ ] 02	[ ] 98
Volunteers..	[...] 01	[...] 02	[ ] 02	[ ] 98

21. **In the past 12 months, has your organization conducted performance reviews of…**

	Yes, all	Yes, but not all	No, none	NA, no such staff
Paid staff...	[...] 01	[...] 02	[ ] 02	[ ] 98
Unpaid staff..	[...] 01	[...] 02	[ ] 02	[ ] 98
Volunteers..	[...] 01	[...] 02	[ ] 02	[ ] 98

22. **Excluding the executive director, in the past 12 months, how many…**

	Any training related to management and administration	Any training related to fundraising	Any training related to service and/or technical assistance delivery	NA, no such staff
Paid staff participated in…	#	#	#	[ ] 98

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

| Unpaid staff participated in… | # | # | # | [   ] 98 |
| Volunteer staff participated in… | # | # | # | [   ] 98 |

23. **In the past 12 months, did the executive director participate in…**

Yes No

Any training related to management and administration..[...] 01......[...] 02............

Any training related to fundraising...[...] 01......[...] 02............

Any training related to service and/or technical assistance delivery...............................[...] 01......[...] 02............

24. **Is the executive director…**

Select one

A paid, full time position (30+ hours per week)..   [   ] 01

A paid, part time position (1-29 hours per week)...   [   ] 02

An unpaid, full time position (30+ hours per week)..   [   ] 03

An unpaid, part time position (1-29 hours per week)......................................   [   ] 04

NA, we do not currently have an individual in this position............................   [   ] 98

25. **Over the past 5 years, how many individuals have served as executive director of your organization?**   # _____

(If your organization is less than 5 years old, please indicate how many individuals have served as executive director of your organization to date.)

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 10

26. **This table lists a variety of possible focus areas for an organization's staff development. Please select the box that is most representative of your organization's thinking on each of the following.**

	Are concerned we should work on this area but lack the time or resources to do so	Have developed plans to work on this area but lack the time or resources to implement them	Have implemented steps to address this area	Are not giving this area active consideration because we are satisfied with our current status	Have not given this area active consideration to date
Training the executive director to enhance his/her administrative and managerial skills	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Training the executive director to enhance his/her fundraising skills	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Training the executive director to enhance his/her service delivery skills	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Training staff to enhance their administrative and managerial skills	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Training staff to enhance their fundraising skills	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Training staff to enhance their service delivery skills	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Enhancing your organization's volunteer program	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 11

Organizational Development

This section contains questions about your organization's mission and strategies, legal status, financial management, funding streams, recordkeeping practices, and use of technology.

27. **Is your organization…**

Select one

Unincorporated... [ ] 01

Unincorporated but hosted by a 501(c)(3) organization............................... [ ] 02

In process of obtaining 501(c)(3) status... [ ] 03

A 501(c)(3) organization.. [ ] 04

Other *(please describe)*... [ ] 94

28. **In the past 12 months, has your organization assessed its organizational needs/strengths?**

Select one

Yes, as part of the CEY process.. [ ] 01

Yes, independent of the CEY process... [ ] 02

Yes, both as part of and independent of the CEY process........................... [ ] 03

No, it has not... [ ] 04

29. **Does your organization have…**

	Yes, written	Yes, unwritten	No, none
A mission statement	[ ] 01	[ ] 02	[ ] 02
A strategic plan	[ ] 01	[ ] 02	[ ] 02
A fund-raising/fund-development plan...............................[...] 01...		[ ] 02	[ ] 02
Financial management procedures for ensuring expenditures are properly authorized...[...] 01...		[ ] 02	[ ] 02

30. **Does your organization have an individual, distinct from the executive director, who is responsible for financial management?**
(e.g., paying bills, making deposits, keeping financial records).....................................

Yes	No
[ ] 01	[ ] 02

31. **Does your organization prepare its budget on a regularly scheduled basis**
(e.g., annually, quarterly)...

Yes	No
[ ] 01	[ ] 02

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

32. **In the last completed fiscal year, what was your organization's total…**
(If your organization has been in operation for less than one year, please tell us your totals to date.)

Revenue.. $ _____

Expenditures.. $ _____

33. **Is your operating space…** Select one

Rented.. [ ] 01

Owned by your organization with monthly mortgage payments.................. [ ] 02

Owned by your organization with the mortgage paid off............................ [ ] 03

Donated by another organization or entity.. [ ] 04

Other *(please describe)*... [ ] 94

If "Donated by another organization or entity" in #33:

33a. **About how much would you have to pay for your operating space per month if it were not donated?**...$............................

34. **Excluding CEY, over the past 12 months, has your organization sought or obtained revenue from…**	Yes, sought	Yes, sought and obtained	No, we have not	Select box if this source of revenue was never before sought or accessed
Grants/contracts from federal government agencies......................	[ ] 01	[ ] 01	[ ] 01	[ ] 02
Grants/contracts from state or local government agencies.............	[ ] 01	[ ] 01	[ ] 01	[ ] 02
Institutional funding sources (e.g., corporations, foundations)................	[ ] 01	[ ] 01	[ ] 01	[ ] 02
Individual donors and/or events..	[ ] 01	[ ] 01	[ ] 01	[ ] 02
Fees for service...	[ ] 01	[ ] 01	[ ] 01	[ ] 02
Allocation from another organization (e.g., parent/host organization).....	[ ] 01	[ ] 01	[ ] 01	[ ] 02
Other *(please describe)*...	[ ] 94	[ ] 94	[ ] 94	[ ] 02

	Yes	No
35. **In the past 12 months, has your organization hired a grant/contract writer to prepare or review applications for funding?**	[ ] 01	[ ] 02

L survey items to be asked uniquely of lead organizations
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Communities Empowering Youth Baseline Survey - 13

		Yes	No
36.	**Does your organization regularly use computer software to keep financial records?**	[ ] 01	[ ] 02

37.	**How many functioning computers does your organization have?** *(Please exclude computers that are personal or public property.)*	#	

		Yes	No
38.	**Is this number of computers adequate to meet your organization's needs?**	[ ] 01	[ ] 02

		Yes	No
39.	**Is the software on these computers adequate to meet your organization's needs?**	[ ] 01	[ ] 02

		Yes	No
40.	**Does your organization have access to the Internet?**	[ ] 01	[ ] 02

If yes to #40:

		Yes	No
40a.	**Does your organization use the Internet…**		
	To support an organizational website..	[ ] 01	[ ] 02
	For program email..	[ ] 01	[ ] 02
	For research purposes (e.g., funding opportunities, curricular best practices)	[ ] 01	[ ] 02
	For community outreach purposes (e.g., distributing electronic newsletter)..........	[ ] 01	[ ] 02
	Other *(please describe)*..	[ ] 94	[ ] 02

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 14

41. This table lists a variety of possible focus areas related to organizational development. Please select the box that is most representative of your organization's thinking on each of the following.

	Are concerned we should work on this area but lack the time or resources to do so	Have developed plans to work on this area but lack the time or resources to implement them	Have implemented steps to address this area	Are not giving this area active consideration because we are satisfied with our current status	Have not given this area active consideration to date
Obtaining 501(c)(3) Status	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Creating a mission statement	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Creating a strategic plan	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Improving financial management systems	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Budgeting to ensure effective allocation of resources	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Developing a fund-raising/fund-development plan	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Identifying and pursuing new sources funding	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Improving your organization's use of technology	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 15

Program Development

This section contains questions about your organization's service delivery structure and the number of program participants your organization serves.

Questions #42 – 45 deal with the provision of direct client services. If your organization does not provide direct client services, you may skip these questions and proceed to question #46.

42.   **In an average month of service delivery, what is the total number of program participants your organization serves?.....................................** # _____

   (Please count each individual as 1 and each family unit as 1.)

43.   **Compared to this time last year, has the number of program participants served…**   Select one

   Increased...   [ ] 01

   Decreased..   [ ] 02

   Stayed about the same...   [ ] 03

   NA, did not exist a year ago..   [ ] 98

44.   **Do you keep records on program participants and services?**
   (e.g., enrollment figures, referral sources, services received)   Select one

   Yes, paper records..   [ ] 01

   Yes, electronic records...   [ ] 03

   Yes, both paper and electronic records..   [ ] 04

   No, none..   [ ] 02

   NA, do not yet have program participants..   [ ] 98

45. **In the past 12 months, has your organization…**	Yes	No	NA, do not yet have program participants
Obtained feedback from program participants about their satisfaction with the services provided to them?............................	[...] 01	[ ] 02	[ ] 98
Conducted formal measurements of program participant outcomes?...	[...] 01	[ ] 02	[ ] 98

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 16

Questions #46 – 49 deal with the provision of capacity building support. If your organization does not provide capacity building support to other organizations, you may skip these questions and proceed to question #50.

46.   **In an average month of service delivery, what is the total number of organizations for whom capacity building services are provided?**   # _____

47.   **Compared to this time last year, has number of organizations served…**   Select one

Increased...   [   ] 01

Decreased...   [   ] 02

Stayed about the same...   [   ] 03

NA, did not exist a year ago...   [   ] 98

48.   **Do you keep records on provision of capacity building support?**
(e.g., enrollment figures, format/content of activities provided)   Select one

Yes, paper records...   [   ] 01

Yes, electronic records...   [   ] 03

Yes, both paper and electronic records...   [   ] 04

No, none...   [   ] 02

NA, have not yet provided capacity building support...............................   [   ] 98

49. **In the past 12 months, has your organization…**	Yes	No	NA, have not yet provided capacity building support
Obtained feedback from program participants about their satisfaction with the services provided to them?	[ ] 01	[ ] 02	[ ] 98
Conducted formal measurements of program participant outcomes?	[ ] 01	[ ] 02	[ ] 98

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 17

50. **This table lists a variety of possible focus areas for an organization's program development. Please select the box that is most representative of your organization's thinking on each of the following.**

	Are concerned we should work on this area but lack the time or resources to do so	Have developed plans to work on this area but lack the time or resources to implement them	Have implemented steps to address this area	Are not giving this area active consideration because we are satisfied with our current status	Have not given this area active consideration to date
Increasing the scale of current services	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Increasing the types of services offered	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Increasing the quality of services offered	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Improving the use of technology for programmatic recordkeeping	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Collecting information about participants (e.g., enrollment figures, referral sources, services received)	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Collecting information about participant satisfaction	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Strengthening your organization's ability to evaluate participant outcomes	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 18

Community Engagement

This section contains questions about your organization's community engagement as through partnership arrangements with other organizations, actions taken to improve its understanding of the community it serves, and the marketing of its services.

		Yes	No
51.	**Other than your CEY partnership, is your organization engaged in partnership arrangements with other organizations in its community/service area?**	[ ] 01	[ ] 02

If yes to #51:

51a. Do you have partnership arrangements with organizations in the following sectors…

	Yes	No
Government...	[ ] 01	[ ] 02
Business/Private..	[ ] 01	[ ] 02
Educational institutions...	[ ] 01	[ ] 02
Faith-based non-profit..	[ ] 01	[ ] 02
Secular non-profit..	[ ] 01	[ ] 02

52. In the past 12 months, has your organization…

	Yes	No
Rethought the way in which it gains knowledge about the community it serves	[ ] 01	[ ] 02
Implemented new or improved methods for gaining knowledge about the community it serves...	[ ] 01	[ ] 02
Rethought the way in which it markets its services or expands awareness about its mission to individuals, families, funders, or potential partners........	[ ] 01	[ ] 02
Implemented new or improved methods for marketing its services or expanding awareness about its mission to individuals, families, funders, or potential partners..	[ ] 01	[ ] 02

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 19

53. **This table lists a variety of possible focus areas for an organization's community engagement. Please select the box that is most representative of your organization's thinking on each of the following.**

	Are concerned we should work on this area but lack the time or resources to do so	Have developed plans to work on this area but lack the time or resources to implement them	Have implemented steps to address this area	Are not giving this area active consideration because we are satisfied with our current status	Have not given this area active consideration to date
Engaging in more partnership arrangements	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Strengthening existing partnership arrangements	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Increasing your knowledge about the community your organization serves	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05
Improving marketing and outreach techniques	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 20

CEY Partnership

This section contains background questions about your past relationships with other CEY project partners, your CEY partnership's plans, structures, and processes, and your organization's goals and expectations of what you hope to gain by participating in your CEY partnership.

54.[L]   **Which description best characterizes your CEY partnership?**   Select one

Existing partnership, no new members...   [   ] 03

Existing partnership, added new members..   [   ] 02

New partnership...   [   ] 01

                                                                                                    Month   Year

55.[L]   **Regardless of whether you have recently added new partners, when was your partnership originally formed?**   _____

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 21

56.[L] **Which structure best describes your CEY partnership?**
(Please exclude contractors—organizations you have hired to provide training and/or technical assistance on organizational capacity building—from this description.)
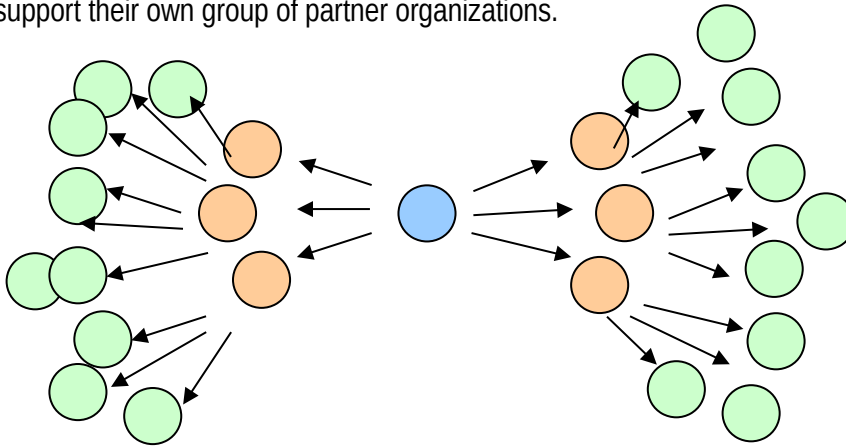
My organization is the lead and has organized a set of partners to achieve CEY capacity building goals.
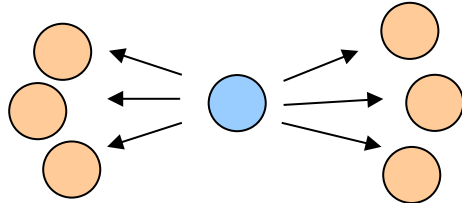
[ ] 01

My organization is the lead and has organized a set of partners who each support their own group of partner organizations.

[ ] 02

A coalition or committee of organizations shares lead organization responsibilities with my organization as the CEY designated lead. The coalition or committee shares the responsibilities for organizing and supporting other partner organizations.
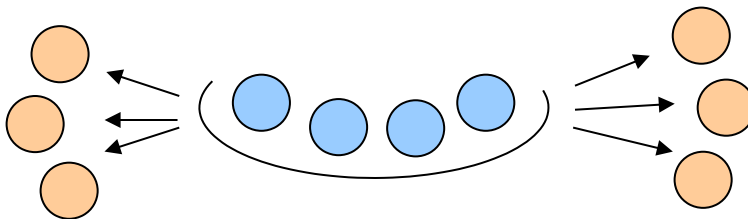
[ ] 03

Other *(please describe)*

[ ] 96

	Yes	No
57.[L] **Does your organization have a designated individual, either an existing staff member or a new hire, whose primary responsibility is**	[ ] 01	[ ] 02

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

to lead your CEY project initiative?..

	Yes	No
58. Did your CEY partnership meet as a whole as part of the development of your CEY application?...	[ ] 01	[ ] 02

	Yes	No
59. Has your CEY partnership met since the grant was awarded?	[ ] 01	[ ] 02

	Yes	No
60.06 Does your partnership have a regular calendar of meetings?	[ ] 01	[ ] 02

If yes to #60:

	Yes	No
60a.06 Does your organization regularly attend these meetings?	[ ] 01	[ ] 02

	Yes	No
61.06 Does your organization communicate as needed with other CEY project partners via email or telephone?...	[ ] 01	[ ] 02

	Yes	No
62.06 Has your CEY partnership engaged in formal or informal teambuilding activities to help partners learn the basics of each other's history, structure, services, staff, language, and/or organizational culture?..	[ ] 01	[ ] 02

	#	Don't know
63. How many total partner organizations belong to your CEY partnership?	#	[ ] 02

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
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Communities Empowering Youth Baseline Survey - 23

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 24

	Yes	No
64.[P] **Prior to the CEY project, did your organization have any experience working with or receiving capacity building support from [Lead]?…..**	[ ] 01	[ ] 02

65.[P] **Prior to the CEY project, did your organization have experience working with…**

	Select one
Most of your CEY project partners...	[ ] 01
Less than half of your CEY project partners...	[ ] 02
None of your CEY project partners..	[ ] 03

66. **Organizations engage in partnerships for a variety of reasons. On a scale of 1-5, please rank the following as high priority reasons or lower priority reasons for your organization in joining the CEY partnership:**

	High priority 1	2	3	4	Low priority 5
Improving your organizational capacity through receipt of training, technical assistance, or financial support	[..] 01	[..] 02	[ ] 03	[ ] 04	[ ] 05
Assessing community needs	[..] 01	[..] 02	[ ] 03	[ ] 04	[ ] 05
Engaging in peer learning (e.g., sharing organizational or programmatic best practices/curricula)	[..] 01	[..] 02	[ ] 03	[ ] 04	[ ] 05
Streamlining service provision in your community (e.g., receiving/making service recipient referrals, coordinating services, or operating joint programming)	[..] 01	[..] 02	[ ] 03	[ ] 04	[ ] 05
Accessing new funding sources (e.g., forming funding alliance)	[..] 01	[..] 02	[ ] 03	[ ] 04	[ ] 05
Enhancing image/visibility (e.g., marketing your organization, your partner organizations, or your collaborative CEY effort)	[..] 01	[..] 02	[ ] 03	[ ] 04	[ ] 05
Influencing policy, institutional change (e.g., educating community members, or engaging in advocacy activities)	[..] 01	[..] 02	[ ] 03	[ ] 04	[ ] 05
Other *(please describe)*	[..] 94	[..] 94	[ ] 94	[ ] 94	[ ] 94

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 25

	Yes, written	Yes, unwritten	No, none	Don't know
67. **Does your CEY partnership have a mission statement?**	[ ] 01	[ ] 02	[ ] 02	[ ] 02

68.[06] **Does your partnership have a plan that outlines…**

	Yes, written	Yes, unwritten	No, none	Don't know
Tasks to be achieved	[ ] 01	[ ] 02	[ ] 02	[ ] 02
Timeline by which these tasks are to be achieved	[ ] 01	[ ] 02	[ ] 02	[ ] 02
Individuals/Organizations responsible for completing each task	[ ] 01	[ ] 02	[ ] 02	[ ] 02

	Yes, written	Yes, unwritten	No, none	Don't know
69.[06] **Does your CEY partnership have a sustainability plan?**	[ ] 01	[ ] 02	[ ] 02	[ ] 02

70. **Are members of the following groups in your organization generally familiar with the mission and/or activities of your CEY partnership…**

	Yes	No
Board of Directors	[ ] 01	[ ] 02
Management team	[ ] 01	[ ] 02
Frontline staff	[ ] 01	[ ] 02

71.[06] **Has the CEY partnership made deliberate attempts to market its work to individuals, families, potential funders, and/or other community members by...**

	Yes	No	Don't know
Posting information on individual partner websites	[ ] 01	[ ] 02	[ ] 02
Creating/Updating a joint partnership website	[ ] 01	[ ] 02	[ ] 02
Distributing written or electronic materials (e.g., brochure, newsletter)	[ ] 01	[ ] 02	[ ] 02
Hosting community meetings/events	[ ] 01	[ ] 02	[ ] 02
Appearing in media (e.g., news articles, radio shows, PSA's, paid advertising)	[ ] 01	[ ] 02	[ ] 02
Other (please describe)	[ ] 01	[ ] 02	[ ] 02

72. **On a scale of 1-5, please describe your opinion as to how strongly you agree or disagree with the following statements.**

Strongly agree 1	2	3	4	Strongly disagree 5	Don't know

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 26

[P] Your organization fully understands the goals of your CEY partnership.	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05	[ ] 05

[P] Your organization fully understands the goals of your CEY partnership.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

[P,06] Your organization was involved in setting the goals of your CEY partnership.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

[06] Your CEY partnership's goals are well aligned with the goals of your organization.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

[06] The governance structure is effective and sensible in light of what your CEY partnership aims to accomplish.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

[P] [Lead]'s mission and/or work is well aligned with your organization's mission.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

[P,06] [Lead] operates with the best interest of your organization in mind.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

[P,06] [Lead] is collegial. It respects your organization.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

[P,06] [Lead] is even-handed and ensures that project efforts are not skewed to a single party's interests.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

[P,06] [Lead] is competent. It is able to do what your organization wants or expects.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

[P,06] [Lead] is dependable. It follows through on commitments in a timely and efficient manner.

[ ] 01   [ ] 02   [ ] 03   [ ] 04   [ ] 05   [ ] 05

	Highly likely 1	2	3	4	Highly unlikely 5	Don't know
73. On a scale of 1-5 please describe your opinion as to how likely or unlikely it is that your CEY partnership will continue past the 3-year grant cycle..	[ ] 01	[ ] 02	[ ] 03	[ ] 04	[ ] 05	[ ] 94

A Retrospective Glance

Although your CEY grant is already in progress, this section contains questions about the status of your organization before any CEY grant activities began. Please think back to September 2006 to answer the following general questions.

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 27

74.[06] **Was your organization governed…**

	Yes	No
By its parent or umbrella organization's Board of Directors.........................	[ ] 02	[ ] 02
By an Advisory Panel..	[ ] 02	[ ] 02
By its own Board of Directors..	[ ] 01	[ ] 02

75.[06]

Was the executive director…

Select one

A paid, full time position (30+ hours per week)	[ ] 01
A paid, part time position (1-29 hours per week)	[ ] 02
An unpaid, full time position (30+ hours per week)	[ ] 03
An unpaid, part time position (1-29 hours per week)	[ ] 04
NA, did not have an individual in this position in September 2006..............	[ ] 98

	Yes	No
76.[06] **Did your organization have an individual, distinct from the executive director, who was responsible for financial management?** (e.g., paying bills, making deposits, keeping financial records)...........................	[ ] 01	[ ] 02

	Full time employees 30+ hrs/wk	Part time employees 1-29 hrs/wk
77.[06] **How many paid staff were**	#	#

	Yes, written	Yes, unwritten	No, none	NA, no such staff at in September 2006
78.[06] **Was there a job description for paid staff?**..............[ ] 01............[ ] 02..		[ ] 02	[ ] 98

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 28

79. [06] **Was your organization…**   Select one

Unincorporated.. [   ] 01

Unincorporated but hosted by a 501(c)(3) organization............................... [   ] 02

In process of obtaining 501(c)(3) status.. [   ] 03

A 501(c)(3) organization.. [   ] 04

Other *(please describe)*.. [   ] 94

80. [06] **Did your organization have…**	Yes, written	Yes, unwritten	No, none
A mission statement	[ ] 01	[ ] 02	[ ] 02
A strategic plan	[ ] 01	[ ] 02	[ ] 02
A fund raising/fund-development plan.........................[...].01...		[ ] 02	[ ] 02
Financial management procedures for ensuring expenditures are properly authorized.........................[...].01...		[ ] 02	[ ] 02

81. [06] **In the fiscal year prior to being awarded your CEY grant, what was your organization's total…**	Don't know	NA, did not yet exist
Revenue..$...........	[ ] 02	[ ] 02
Expenditures..$...........	[ ] 02	[ ] 02

L survey items to be asked uniquely of lead organizations
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06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 29

CEY Activities

We are interested in understanding the types of activities undertaken in getting CEY projects started and the proportional amount of time they require. Since CEY grantees began implementing their project plans at different times, please answer the following questions based on your understanding of when your CEY activities first got started.

Please use the following definitions for the questions in this section that ask about training or TA:

Training – group-based adult education and skill-building activities (e.g., workshops).
Technical Assistance (TA) – consultation that is specifically customized or tailored to the needs of an individual faith-based or community organization.

82.[06] **Of all of the time spent on CEY activities to date, please provide an approximation of the proportion of time your organization has spent participating/being involved in the following major activities…**

Community Needs Assessment.. _____ %

Organizational Assessment... _____ %

CEY-Provided Training... _____ %

CEY-Provided Technical Assistance.. _____ %

Planning/Communication with the CEY lead and/or partners...................... _____ %

Other major activities (*please describe*) .... _____ %

TOTAL 100 %

[L] survey items to be asked uniquely of lead organizations
[P] survey items to be asked uniquely of partner organizations
[06] survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 30

83.[L,06]

Topic Covered	To date, how many <u>TRAINING</u> sessions has your organization provided on…?	To date, how many <u>TA</u> sessions has your organization provided on…?
Board Development...#.............................		#
Staff and Volunteer Development/Management...........#.............................		#
Becoming a 501(c)(3)...#.............................		#
Mission Development & Strategic Planning..................#.............................		#
Financial Management...#.............................		#
Resource Development (e.g., fundraising, grant writing) .....#.............................		#
Use of Technology...#.............................		#
Program Design (e.g., implementing best practices).............#.............................		#
Evaluation and Outcome Measurement.......................#.............................		#
Marketing Program Services.....................................#.............................		#
Networking, Collaboration, and Partnerships	#	#
Other (please describe)...#.............................		#

If total in #83 TRAINING column ≥ 1:

83a. [L,06] **Approximately how many total hours of training have been provided?**…   #   hours

83b. [L,06] **How many partner organizations have received training?**.........................   #   partners

If total in #83 TA column ≥ 1:

83c. [L,06] **Approximately how many total hours of TA have been provided?...........**   #   hours

83d. [L,06] **How many partner organizations have received TA?**...........................   #   partners

84.[L,06]   **How much direct CEY financial assistance has your organization**

disbursed to each partner to date?

(Partner name)..$.................................

(Partner name)..$.................................

(Partner name)..$.................................

(Partner name) $

(Partner name) $

(Partner name) $

(Partner name) $

(Partner name) $

Thank you for your time and candor in completing this survey.

L survey items to be asked uniquely of lead organizations
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06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 32

How-to fill out the survey

For questions where multiple responses are listed, as in the example below, please mark a response for each line as shown here:

Do the Board's responsibilities include...	Yes	No
Goal/Strategy development...	[X] 01	[ ] 02
Community/Stakeholder outreach..	[ ] 01	[X] 02
Budget development..	[ ] 01	[X] 02
Financial review...	[X] 01	[ ] 02
Performance review: program/program outcomes.......................	[ ] 01	[X] 02
Performance review: executive director.....................................	[X] 01	[ ] 02
Recruitment of new board members...	[ ] 01	[X] 02
Provision of formal orientation to new board members...............	[ ] 01	[X] 02
Other *(please describe)*...	[ ] 01	[ ] 02

Where "Select one" is indicated, please select ONLY ONE response from the list of response options. For example:

Is the area your organization serves best described as...	Select one
A small town *(population less than 10,000)*...	[ ] 01
A large town *(population between 10,000 and 50,000)*..	[X] 02
A city *(large, densely populated area that may include several administrative districts)*..	[ ] 03
An entire state...	[ ] 04
Multiple geographically distinct areas...	[ ] 05

Some questions ask you to fill in a number, as in the number of individuals your organization serves, the number of staff members that comprise your organization, or the number of training sessions attended. If the answer is zero, please enter "0"so that we know you answered the question rather than overlooked it. . If the answer is greater than zero, please enter the number. Alternatively, if the question does not apply to your organization, please select "NA". For example:

Excluding the executive director, in the past 12 months, how many...	Any training related to management and administration	Any training related to fundraising	Any training related to service and/or technical assistance delivery	NA, no such staff
Paid staff participated in...	# 1	# 3	# 0	[ ] 98
Unpaid staff participated in…	# 1	# 1	# 0	[ ] 98
Volunteer staff participated in…	#	#	#	[X] 98

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 33

The responses to some questions are conditional on your response to other questions, as illustrated in the example below. Using this example as a model:

> *If you select "yes" to "By its own Board of Directors" in question 16, then you should not answer 16a, but you should answer questions 16b, 16c, and 16d.*

All questions of this type include a prompt that begins with an "If" statement.
All questions of this type are also denoted with a main item number followed by a lowercase letter.
E.g., questions 16a, 16b, 16c, 16d, etc. all follow from the main item, question 18.

16.	Is your organization governed…	Yes	No
	By its parent or umbrella organization's Board of Directors.........................	[ ] 02	[X] 02
	By an Advisory Panel...	[ ] 02	[X] 02
	By its own Board of Directors..	[x] 01	[ ] 02

If no to "By its own Board of Directors" in #16:

16a.

With respect to developing a Board, your organization…	Select one
Is concerned it should work on this area but lacks the time or resources to do so............[...] 01...............	
Has developed plans to work on this area but lacks the time or resources to implement them..	[ ] 02
Has implemented steps to address this area...	[ ] 03
Is not giving this area active consideration because it is satisfied with its current status	[ ] 04
Has not given this area active consideration to date...	[ ] 05

Skip to #17.

If yes to "By its own Board of Directors" in #16:

16b. At present, how many individuals are on your organization's Board?.................# 9.........................

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 34

	Number	An unlimited number of seats	Not specified
16c. **How many total Board seats do your organization's bylaws specify?**	# <mark>11</mark>	[ ] 02	[ ] 02

16d. **Do the Board's responsibilities include…**	Yes	No
Goal/Strategy development..	[<mark>x</mark>] 01	[ ] 02
Community/Stakeholder outreach..	[<mark>x</mark>] 01	[ ] 02
Budget development..	[ ] 01	[<mark>x</mark>] 02
Financial review..	[<mark>x</mark>] 01	[ ] 02
Performance review: program/program outcomes......................................	[x] 01	[ ] 02
Performance review: executive director...	[x] 01	[ ] 02
Recruitment of new board members..	[x] 01	[ ] 02
Provision of formal orientation to new board members...............................	[ ] 01	[x] 02
Other *(please describe)*...	[ ] 01	[ ] 02

L survey items to be asked uniquely of lead organizations
P survey items to be asked uniquely of partner organizations
06 survey items to be asked on the 2006 grantee module

Communities Empowering Youth Baseline Survey - 35