

## National Evaluation of the Comprehensive Technical Assistance Centers Client Survey

Dear Colleague,

This survey is designed to gather your feedback on a set of technical assistance activities and resources offered by **[Name of Comprehensive Center(s)]** and referred to as:

### **[Name of Project]**

Your name was included in a list of participants in one or more of the following activities:

- **List of key activities (include date, location, and key presenters)**

(Additional detail about this set of activities and resources can be found on the first page of the survey.)

We need your feedback to inform the national evaluation of the Comprehensive Centers being conducted for the Institute of Education Sciences at the U.S. Department of Education by Policy Studies Associates (PSA).

Per the Education Sciences Reform Act of 2002, Title I, Part E, Section 183, responses to this data collection will be used only for statistical purposes. The reports prepared for this study will summarize findings across the sample and will not associate responses with a specific district or individual. We will not provide information that identifies you or your organization to anyone outside the study team, except as required by law.

**[On paper version of the survey, insert instructions for returning surveys here.]**

Thank you in advance for your feedback!

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this survey is **xxxx-xxxx**. The time required to complete this survey is estimated to average **20 minutes** per response, including the time to review instructions, search existing data sources, gather the data needed, and respond to the survey questions. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the U.S. Department of Education, Washington, DC 20202-4651.

### Glossary of Terms

**[Name of project].** Please answer the following survey questions in regard to your experience with one or more of the following set of activities and resources. This set of activities **[began in/occurred on] [month/year]** and continued through **[month/year]**, and included:

- **List of activities (include date, location, and key presenters)**
- **Continue list**

Participants *may* also have used the following materials and resources:

- **List of publications and other resources**
- **Continue list**

Participants *may* also have interacted with Comprehensive Center staff on:

- **Advance planning**
- **Follow-up and action plans**
- **Ongoing consultation on this topic**

Please answer the following survey questions based on *your experience*, whether you participated in all of the activities or received all of the resources listed above, or just a few. Reviewing the materials you received from this set of technical assistance activities and resources may help you answer these questions.

**“State-level staff.”** The term “state-level staff,” where it appears on this survey, refers to staff in state education agencies (SEAs), staff of other state offices (for example, governor’s offices), staff of intermediate education agencies, members of state task forces, and members of school support teams assigned to low-performing schools.

**[Note: For the web-based version of the survey, this box will appear as a header at the top of several screens throughout the survey.]**

### Participation

1. Did you participate in *any* of the activities described in the box above? **(Select one.)**
  - a. Yes
  - b. No (STOP HERE)
  - c. Unsure/Don’t remember (STOP HERE)

2. Of the activities and resources available to you through **[Name of project]**, how much time did you spend participating in each of the following types of activities or making use of each of the following types of resources? **(Select one response in each row.)**

Type of activity or resource	More than 5 days	3-5 days	1-2 days	Less than 1 day	<i>Not applicable; not part of [Name of project]</i>
a. Conferences	4	3	2	1	<input type="checkbox"/> <sub>98</sub>
b. Training	4	3	2	1	<input type="checkbox"/> <sub>98</sub>
c. Task force meetings	4	3	2	1	<input type="checkbox"/> <sub>98</sub>
d. Reviewing general or background information provided by the Content Center	4	3	2	1	<input type="checkbox"/> <sub>98</sub>
e. Using tools and other resources provided by the Content Center	4	3	2	1	<input type="checkbox"/> <sub>98</sub>
f. Advance planning	4	3	2	1	<input type="checkbox"/> <sub>98</sub>
g. Ongoing consultation on this topic	4	3	2	1	<input type="checkbox"/> <sub>98</sub>
h. Follow-up and action plans	4	3	2	1	<input type="checkbox"/> <sub>98</sub>

3. Were you **personally** involved at all in determining the goals or designing the content or format of these activities and resources? In what ways? **(Select all that apply.)**

- a. Identifying the problem or need to be addressed
- b. Selecting or framing the content
- c. Providing data or other background information during the planning phase
- d. Identifying or recruiting project participants
- e. Identifying or recruiting presenters or resources
- f. Designing activities
- g. Planning for or leading dissemination of new ideas and information
- h. Coordinating this set of activities with other work that my organization does
- i. Planning logistics
- j. Other (Specify: \_\_\_\_\_)
- k. ***I did not contribute at all to the design of this set of activities and resources***

## Relevance and Usefulness

4. Based on *your experience*, to what degree was this set of activities and resources **relevant** to your work, in each of the following respects? **(Select one response in each row.)**

The activities and resources:	To a very high degree	To a high degree	To a moderate degree	To a low degree	To a very low degree	Not able to judge
a. Addressed a need or problem that my organization faces	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
b. Addressed an important priority of my organization	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
c. Addressed a challenge that my organization faces related to the implementation of NCLB	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
d. Provided information, advice, and/or resources that could be applied to my organization's work	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
e. Addressed our particular state context	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
f. Addressed my organization's specific challenges (e.g., policy environment, leadership capacity, budget pressures, local politics)	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
g. Provided information, advice, and/or resources that could be used to guide decisions about policies, programs, and practices	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
h. Highlighted the implications of research findings (or information about best practice) for policies, programs, or practices	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>

5. Based on *your experience*, to what degree was this set of activities and resources *useful* to you, in each of the following respects? **(Select one response in each row.)**

<b>The activities and resources:</b>	<b>To a very high degree</b>	<b>To a high degree</b>	<b>To a moderate degree</b>	<b>To a low degree</b>	<b>To a very low degree</b>	<b>Not able to judge</b>
a. Provided resources that were easy to understand and easy to use	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
b. Employed an appropriate format (e.g., a work group, a conference, individual consultation, written products)	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
c. Provided adequate opportunity to learn from colleagues in other states	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
d. Included adequate follow-up to support the use of new information and resources	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
e. Were timely	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
f. Helped my organization to solve a problem	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
g. Helped my organization to maintain or change a policy or practice	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
h. Helped my organization take the next step in a longer-term improvement effort	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
i. Provided my organization with information or resources that we will use again	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
j. Helped my organization to develop a shared expertise or knowledge-base	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>
k. Helped individuals in my organization to develop skills that they will use again	5	4	3	2	1	<input type="checkbox"/> <sub>95</sub>

6. How could this set of activities and resources (described in the box on the first page) have been made more relevant or more useful for your organization?

---

---

---

---

### Priorities for Technical Assistance

7. Please consider ***your organization's priorities*** for the technical assistance that it receives from outside sources. With which of the following tasks related to NCLB implementation does your organization have the greatest need for technical assistance?

**(Rank your organization's top three priorities for technical assistance, where "1" is your highest priority, "2" is your second highest, and "3" is your third highest. Please do not use duplicate numbers—for example, two rows ranked "1".)**

	Top 3 priorities for assistance
a. Formulating or refining state policies to respond to NCLB requirements	_____
b. Building or managing a statewide system of support for districts and schools identified for improvement under NCLB	_____
c. Training or managing the state-level staff or school support teams who provide support to districts and schools identified for improvement under NCLB	_____
d. Working directly with low-performing schools or districts on school improvement activities	_____
e. Designing or implementing state assessment and accountability systems	_____
f. Aligning state accountability systems with NCLB accountability system	_____
g. Supporting use of assessment data by schools and districts	_____
h. Disseminating information on scientifically-based research to districts and schools	_____
i. Identifying and/or developing programs or models that address district and/or school needs	_____
j. Providing training and other professional development to local educators in academic subjects (reading language arts, mathematics, science)	_____
k. Monitoring compliance with NCLB requirements in districts and schools	_____
l. Communicating with the public about NCLB requirements or report cards	_____
m. Other priorities (Specify: _____)	_____
n. Other priorities (Specify: _____)	_____

8. Did the set of activities and resources described in the box on page 1 of this survey address any of the following tasks related to NCLB implementation? **(Select “yes” or “no” for all rows.)**

Tasks Related to NCLB Implementation	Did the set of activities and resources described on page 1 address this task?	
	Yes	No
a. Formulating or refining state policies to respond to NCLB requirements	1	0
b. Building or managing a statewide system of support for districts and schools identified for improvement under NCLB	1	0
c. Training or managing the state-level staff or school support teams who provide support to districts and schools identified for improvement under NCLB	1	0
d. Working directly with low-performing schools or districts on school improvement activities	1	0
e. Designing or implementing state assessment and accountability systems	1	0
f. Aligning state accountability systems with NCLB accountability systems	1	0
g. Supporting use of assessment data by schools and districts	1	0
h. Disseminating information on scientifically-based research to districts and schools	1	0
i. Identifying and/or developing programs or models that address district and/or school needs	1	0
j. Providing training and other professional development to local educators in academic subjects (reading language arts, mathematics, science)	1	0
k. Monitoring compliance with NCLB requirements in districts and schools	1	0
l. Communicating with the public about NCLB requirements or report cards	1	0
m. Other priorities (Specify: _____)	1	0
n. Other priorities (Specify: _____)	1	0

**Capacity to Carry out Responsibilities Related to NCLB**

9. To what extent has the set of activities and resources described in the box on the first page expanded the capacity of ***your office, division, or unit*** to carry out its responsibilities related to NCLB? (Select one response in each row.)

<b>Expansion of organizational capacity:</b>	<b>To a great extent</b>	<b>To a moderate extent</b>	<b>To a small extent</b>	<b>Not at all</b>	<b><i>Too early to tell</i></b>	<b><i>Does not apply or unable to judge</i></b>
a. Confirmed what we were already doing	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
b. Raised awareness of new developments in fields important to my organization	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
c. Helped my organization define or understand a problem in new ways	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
d. Helped my organization take steps toward accomplishing a goal or solving a problem	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
e. Helped my organization maintain or improve an ongoing program, policy, or practice	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
f. Helped my organization plan or initiate a new program, policy, or practice	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
g. Enhanced my organization's ability to address NCLB requirements	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
h. Improved my organization's ability to work with districts	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
i. Improved my organization's ability to work with schools identified for improvement under NCLB	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
j. Put my organization in touch with other organizations engaged in similar tasks	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>

<b>Expansion of organizational capacity:</b>	<b>To a great extent</b>	<b>To a moderate extent</b>	<b>To a small extent</b>	<b>Not at all</b>	<b>Too early to tell</b>	<b>Does not apply or unable to judge</b>
k. Enabled my organization to carry out its work more effectively	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
l. Helped my organization complete NCLB-related applications, plans, and reports	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
m. Helped my organization make a tangible change to a policy or practice	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>
n. Other (Specify below)	4	3	2	1	<input type="checkbox"/> <sub>95</sub>	<input type="checkbox"/> <sub>98</sub>

10. How could this set of activities and resources have better helped to expand your organization's capacity to carry out responsibilities related to NCLB?

---



---



---



---

### Your Job Responsibilities

Please consider **all** of your job responsibilities when responding to the questions in this section, not just those most closely related to the set of activities and resources described on the first page of this survey.

11. Please indicate the type of agency for which you worked during the period from July 2007 through June 2006: **(Select one.)**
- State education agency (SEA)
  - Governor's office or other state agency (Specify: \_\_\_\_\_)
  - Intermediate education agency (a regional resource center or area education agency serving a region within the state)
  - Institution of higher education

- e. Regional Comprehensive Center
- f. Local education agency
- g. School
- h. Other (Specify: \_\_\_\_\_)

12. Please select the response that most closely resembles the title of your office, division, or unit during the period from July 2006 through June 2007: **(Select one.)**
- a. School Improvement
  - b. Curriculum and Instruction
  - c. Accountability
  - d. Assessment
  - e. Federal Programs (Specify: \_\_\_\_\_)
  - f. Special Education or Exceptional Students
  - g. School Support Team
  - h. Teacher Certification
  - i. Teacher Professional Development
  - j. Other (Specify: \_\_\_\_\_)
13. Which of the following statements best describes your job responsibilities related to NCLB implementation, during the period from July 2006 through June 2007? **(Select all that apply.)**
- a. Formulating or refining state policies to respond to NCLB requirements
  - b. Building or managing a statewide system of support for districts and schools identified for improvement under NCLB
  - c. Training or managing the state-level staff or school support teams who provide support to districts and schools identified for improvement under NCLB
  - d. Working directly with low-performing schools or districts on school improvement activities
  - e. Designing or implementing state assessment and accountability systems
  - f. Aligning state accountability systems with NCLB accountability systems
  - g. Supporting use of assessment data by schools and districts
  - h. Disseminating information on scientifically-based research to districts and schools
  - i. Identifying and/or developing programs or models that address district and/or school needs
  - j. Providing training and other professional development to local educators in academic subjects (reading language arts, mathematics, science)
  - k. Monitoring compliance with NCLB requirements in districts and schools
  - l. Communicating with the public about NCLB requirements or report cards
  - m. Other (Specify: \_\_\_\_\_)
  - n. Other (Specify: \_\_\_\_\_)
14. During the period from July 2006 through June 2007, what percent of your time was spent on all the tasks you selected in Question 13 above, combined? **(Select one.)**
- a. 0-25 percent
  - b. 26-50 percent
  - c. 51-75 percent
  - d. 76-100 percent

15. Have you participated in any other technical assistance provided by a Comprehensive Center, **other than** the set of activities and resources described at the beginning of the survey? **(Select one.)**
- a. Yes
  - b. No
  - c. Unsure/Don't remember

**Thank you!**

**[On paper surveys, include instructions for returning.]**