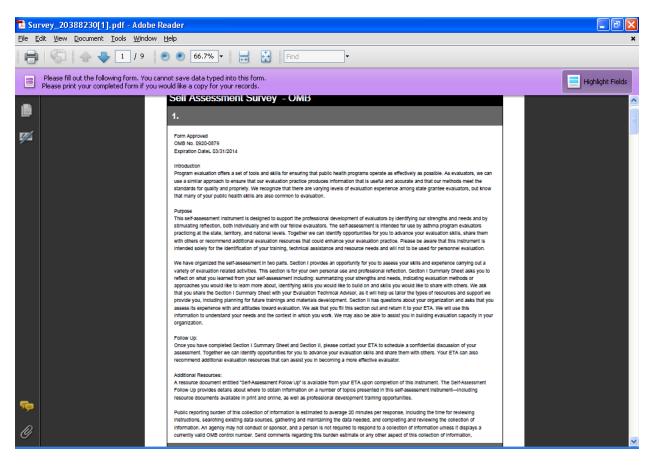
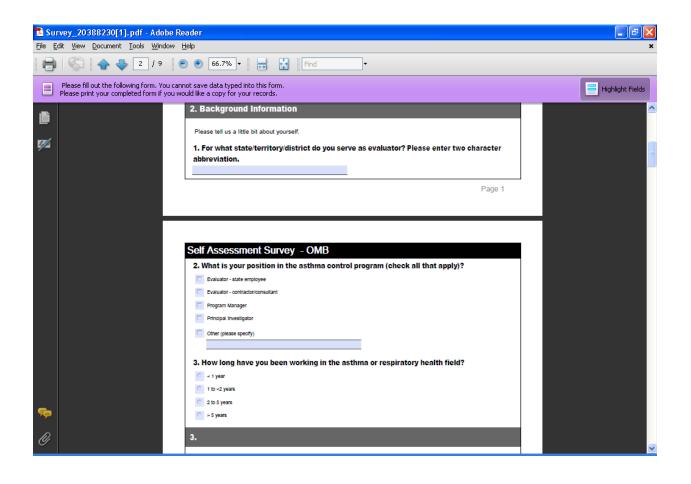
ATTACHMENT – B: Data Collection Instrument - Web version Part 1

SURVEYS OF STATE and TERRITORIAL ASTHMA PROGRAM EVALUATORS





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	Please fill out the following Please print your completed	form. You cannot save data typed into this form. form if you would like a copy for your records.	Highlight Fields
ľ		3.	
1		Which of the following best describes your level of experience in program evaluation? Relatively no experience, need comprehensive training	
		C Little experience or background, need training on most topics	
		C Moderate experience, need refresher courses and more advanced skill training	
		Advanced experience, need training or information on emerging topics	
		4. Evaluator Competencies	
		For each of the items below, mark the box that best represents your personal opinion. Please note, this list represents a fairly comprehensive set of evaluation skills and knowledge. It is not expected that you will be experienced or skilled in all of them. At the end of this survey, you will be asked to identify the areas in which you have the greatest need.	
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ß			Self Assessment Survey - OM	В				<u> </u>
			1. Knowledge:					
1			I have a working knowledge of					
			Thave a working knowledge of	Not at all	l have only a general knowledge	I have used or could use these	I have taught or could teach these	
			American Evaluation Association Guiding Principles for Evaluators	С	C	C	C	
			Joint Committee Program Standards (developed by the Joint Committee on Standards for Educational Evaluation)	C	C	C	C	
			CDC Framework for Program Evaluation in Public Health	С	С	C	С	
			Multiple approaches to evaluation (e.g., participatory, theory-driven, empowerment)	C	C	C	C	
			2. Please indicate your experience wi	ith the follow	ing evaluation	activity:		
				Would like technical	Have general knowledge about this	-	Have taught or could teach this	
			a. involving stakeholders in the evaluation planning process	C	C	C	C	
			5.					
			1. Please indicate your experience fa including:	Would like technical	Have general	Have done or used	Have taught or could	
			a. establishing and maintaining teamwork	assistance on this	knowledge about this	this	teach this	
_			b. facilitating groups	0	0	0	C	
۶Þ			 c. demonstrating groups c. demonstrating cross-cultural competence 	C	C	C	C	
n			d. resolving conflict	0	0	C	0	
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	Please fill out the following form. Please print your completed form i	You cannot save data typed into this form. f you would like a copy for your records.					Highlight Fields	
ľ		d. resolving conflict	0	0	С	0		^
1		2. Please indicate your experienc		lave general Ha		tivities: lave taught or could teach this		
		a. writing evaluation plans	C	C	C	C		
		b. designing data collection protocols	0	0	C	0		
		c. budgeting for evaluation	C	C	C	C		
		d. contracting for evaluations	C	0	C	C		
		e. staffing evaluations	C	С	C	С		
		f. establishing and maintaining databases	C	0	C	C		
		6.						
						Page 3		
		Self Assessment Survey - 0	OMB					
		1. Please indicate your experience	ce with managing eva	luations, esp	ecially:			
			Would like technical H assistance on this know		ve done or used H this	lave taught or could teach this		
		a. ethical issues that arise	C	C	C	C		
sp		b. political issues that arise	C	0	C	C		
		c. general management of evaluations	C	C	C	C		
Ø		2. Please indicate your experienc	e with carrying out the	he followina e	valuation a	ctivities:		
~				-		lave taught or could		/

	/indow Help						
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	2. Please indicate your experience w	Would like tech	-	eral Have	/aluation act e done or used Hav this		
	a. preparing IRB packages	C	C		0	C	
	b. creating a program logic model	C	C		C	0	
	c. using logic models to guide the development of evaluation questions	С	C		C	C	
	7.						
	1. Please indicate to what extent you program, unit, or department within	-		-			
	program, unit, or department within	your organ	ization. Somewhat Disagree	Neutral	Somewhat Agree		
	-	your organ Strongly	ization. Somewhat	-			
	program, unit, or department within a. Currently available information tells us what we need	your organ Strongly	ization. Somewhat Disagree	Neutral			
	program, unit, or department within a. Currently available information tells us what we need to know about the effectiveness of our program. b. Currently available information tells us what we need	Strongly Disagree	ization. Somewhat Disagree	Neutral	Somewhat Agree		
	a. Currently available information tells us what we need to know about the effectiveness of our program. b. Currently available information tells us what we need to know about the efficiency of our processes. c. Existing systems manage and disseminate information	your organ Strongly Disagree	ization. Somewhat Disagree	Neutral	Somewhat Agree		
	program, unit, or department within a. Currently available information tells us what we need to know about the effectiveness of our program. b. Currently available information tells us what we need to know about the efficiency of our processes. c. Existing systems manage and disseminate information for those who need and can use it. d. Employees have access to the information they need	your organ Strongly Disagree	ization. Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree	
	program, unit, or department within a. Currently available information tells us what we need to know about the effectiveness of our program. b. Currently available information tells us what we need to know about the efficiency of our processes. c. Existing systems manage and disseminate information for those who need and can use it. d. Employees have access to the information they need to make decisions regarding their work.	your organ Strongly Disagree	ization. Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree	
	program, unit, or department within a. Currently available information tells us what we need to know about the effectiveness of our program. b. Currently available information tells us what we need to know about the efficiency of our processes. c. Existing systems manage and disseminate information for those who need and can use it. d. Employees have access to the information they need to make decisions regarding their work. e. My organization welcomes new information. f. There would be support among employees if we tried	your organ Strongly Disagree	ization. Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree	
	program, unit, or department within a. Currently available information tells us what we need to know about the effectiveness of our program. b. Currently available information tells us what we need to know about the efficiency of our processes. c. Existing systems manage and disseminate information for those who need and can use it. d. Employees have access to the information they need to make decisions regarding their work. e. My organization velocmes new information. f. There would be support among employees if we tried to do more (some) evaluation work g. Doing (more) evaluation would make it easier to	your organ Strongly Disagree	ization. Somewhat Disagree	Neutral	Somewhat Agree	Strongly Agree	

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1		1. Please indicate your experience implementing various evaluation designs, specifically:	
ĺ		Would like technical Have general Have done or used Have taught or could	
		assistance on this knowledge about this this teach this	
		b. quasi-experimental	
		c. non-experimental	
		Self Assessment Survey - OMB 2. Please indicate your experience carrying out the following evaluation activities: Would like technical Have general Have done or used Have taught or could	-
		assistance on this knowledge about this this teach this	
		a. designing evaluations using mixed methods	
		b. developing data collection instruments C C C C	
		c. adapting existing data collection instruments for C C C	
%		9.	
		1. Please indicate your experience analyzing qualitative data, including:	
Ø		Would like technical Have general Have done or used Have taught or could	
~		assistance on this knowledge about this this teach this	

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1		1. Please indicate your experience analyzing qualitative data, including: Would like technical Have general Have done or used Have taught or could	
		assistance on this knowledge about this this teach this	
		a. developing coding systems (e.g., inter- and intra-rater C C C C	
		b. applying appropriate analysis approaches to C C C C C analysis approaches to analysis)	
		c. coding for themes and patterns C C C C	
		2. Please indicate your experience using data from a variety of sources for evaluation purposes: Would like technical Have general Have done or used Have taught or could assistance on this knowledge about this this teach this teac	
		b. program documents (policies, meeting minutes, C C C	
		c. surveillance systems C C C C	
		3. Please indicate your experience with the following:	
		Would like technical Have general Have done or used Have taught or could	
		assistance on this knowledge about this this teach this a. synthesizing evaluation findings with stakeholders C C C C	
		b. writing user-friendly evaluation reports	
		10.	
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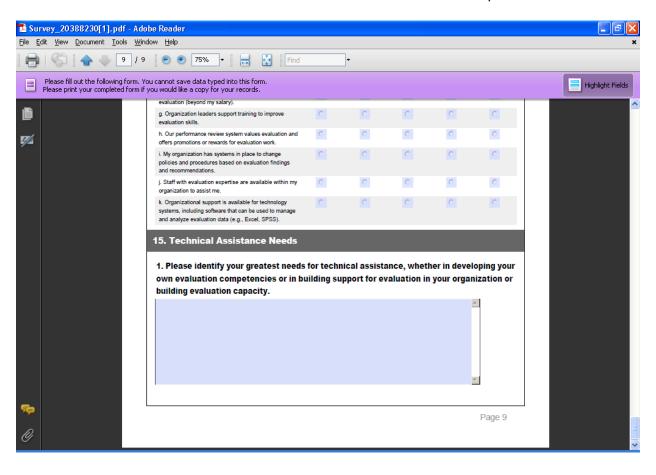
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B		g form. You cannot save data typed into this form. d form if you would like a copy for your records.					Highlight Fields
Ð		Self Assessment Survey -	ОМВ				
		1. Please indicate your experience	e tailoring evalua	tion findings to	o the followin	q audiences:	
1			Would like technical	-		Have taught or could	
				knowledge about this	this	teach this	
		a. media	C	C	C	C	
		b. state partners	0	C	C	C	
		c. program staff	0	0	0	0	
		d. community groups	0	C	C	0	
		e. legislators/advocacy groups/policy makers	C	C	C		
		2. Please indicate your experience	e using the follow	ing technique/	s to communi	icate	
		evaluation findings:					
			Would like technical			Have taught or could	
		a. posters	assistance on this	knowledge about this	this	teach this	
		b. presentations	C	C	0	C	
		c. reports	C	C	C	C	
		d. newsletters	C	C	C	C	
		d. Hensicaels		~	~	~	
		11.					
		1. Please indicate your experience					
			Would like technical assistance on this	Have general knowledge about this	Have done or used this	Have taught or could teach this	
		a. developing action plans based on evaluation recommendations	С	С	С	С	
sp		2. In addition to the skills listed	previously, do you	possess any o	ther skills th	at you find	
~		useful in evaluating programs? If	so please list the	se below:			
Ø						*	

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				Self Assessment 1. Please indicate y	-		quantitative da	ata using:		
				1. Flease mulcate y	our experience v	Would like technical	•	-	Have taught or could	
							knowledge about this	this	teach this	
				a. observations		C	C	C	C	
				b. record abstractions		C	0	0	C	
				c. surveys/questionnaires		C	C	C	С	
				2. Please indicate y	our experience :	analyzing guan	titative data u	sina:		
						Would like technical		-	Have taught or could	
						assistance on this	knowledge about this	this	teach this	
				a. inferential statistics		С	C	C	C	
				b. descriptive statistics		C	0	C	C	≡
				3. Please indicate y	our experience o	collecting qual	itative data usi	ng:		
					Would like technical	Have general know	ledge Have done o	Have Have	taught or could teach	
				a.observations	assistance on this	about this	C		this	
					C	0	0		C	
_				b. interviews		C	0		C	
S.				c. focus groups	С					
~				d. case studies	C	C	C		C	
Ø				e. documents	C	C	C		C	

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		b. interviews	0	C	2	C	<u>^</u>
		c. focus groups	С	0	5	C	
		d. case studies	C	C	5	C	
1		e. documents	С	C	2	C	
		13. Professional Practice and E 1. Please indicate your experience	with the follow Would like technical		al developmer Have done or used this		
		a. building relationships or networks to enhance evaluation practices	С	C	С	С	
		b. participating in evaluation trainings	С	C	C	C	
		c. accessing professional development opportunities in evaluation in my community		C	C	C	
		d. identifying appropriate evaluation tools and material	s C	C	C	0	
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		Would like technical asistance on this		Have done or used H this	ave taught or could teach this		
	a. using evaluation findings to plan new programs	C	C	C	С		
	b. using evaluation findings to modify programs	C	C	0	C		
	c. using evaluation findings to demonstrate program impacts	С	C	С	С		
	d. using evaluation findings to						
		A. T					
	14. Organizational Practices and	d Readiness f	or Learning				
	think about how open the program is to suppo evaluation findings in making decisions. Pleas	rting evaluation in g e answer the follow	eneral, to conducting questions in ter	ng evaluations, and rms of the program	d to using		
	iit <u>View D</u> ocument <u>I</u> ools <u>Wi</u> r	Please fill out the following form. You cannot save data typed into this form. Please print your completed form if you would like a copy for your records. Self Assessment Survey - ON 2. Please indicate your level of eval a. using evaluation findings to plan new programs b. using evaluation findings to demonstrate program impacts d. using evaluation findings to 14. Organizational Practices an In the following section please reflect on the a think about how open the program is to suppo evaluation findings in making decisions. Please	it View Document Tools Window Help	it yew <u>Document</u> <u>Tools</u> <u>Window</u> <u>Help</u> Window <u>New</u> <u>B</u> <u>1</u> <u>9</u> <u>0</u> <u>75%</u> <u>1</u> <u>10</u> <u>10</u> <u>10</u> <u>10</u> Please fill out the following form. You cannot save data typed into this form. Please print your completed form if you would like a copy for your records. Self Assessment Survey - OMB 2. Please indicate your level of evaluation experience: Would like technical Have general asistance on this knowledge about this a. using evaluation findings to plan new programs b. using evaluation findings to modify programs c. using evaluation findings to demonstrate program d. using evaluation findings to 14. Organizational Practices and Readiness for Learning In the following section please reflect on the asthma program with which you work. V think about how open the program is to supporting evaluation in general, to conduct	it yiew Document Tools Window Help Image: Section Provided Help	it view pocument Tools Window Help	it yiew <u>Document</u> <u>Tools</u> <u>Window</u> <u>Help</u>

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Please fill out the following f Please print your completed	orm. You cannot save data typed into this form. orm if you would like a copy for your records.						📒 Highlight
	Self Assessment Survey - OM						
	1. Please indicate to what extent you program, unit, or department within	-		ing state	ments about y	our	
	program, unit, or department within	Strongly	Somewhat	Neutral	Somewhat Agree	Strongly Agree	
	a. My organization has evaluator positions or position	Disagree	Disagree	C	0	C	
	descriptions that include evaluation as an essential job function.						
	 b. Organization leaders support and value program evaluation. 	C	0	C	C	0	
	 Organization leaders integrate evaluation findings into the strategic planning process. 	С	C	С	C	0	
	d. Organization leaders motivate staff to integrate evaluation into their work.	C	C	C	C	0	
	e. Program evaluation routinely drives continuous improvement of programs.	С	0	C	0	C	
	 f. Organizational funds are routinely dedicated to evaluation (beyond my salary). 	C	0	C	0	C	
	g. Organization leaders support training to improve evaluation skills.	С	0	C	C	C	
	 Our performance review system values evaluation and offers promotions or rewards for evaluation work. 	C	0	С	C	C	
	 My organization has systems in place to change policies and procedures based on evaluation findings and recommendations. 	С	C	С	C	C	
		C	C	C	C	C	
	 Staff with evaluation expertise are available within my organization to assist me. 						



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Self Assessment Survey - OMB Exit this sur	vey
14. Technical Assistance Needs	
1. Please identify your greatest needs for technical assistance, whether in developing your own evaluation competencies or in building support for evaluation in your organization or building evaluation capacity.	
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ATTACHMENT - B: Data Collection Instrument - Web version Part 2

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Assessment of NACP Evaluation TA - OMB				
1. Assessment of NACP Evaluation Technical Assistance				
This portion of the survey assesses the evaluation technical assistance provided by the National Asthma Control Program (NACP) to evaluators working with state asthma programs. Questions cover both the one-on-one technical services offered by your ETA as well as other evaluation resources provided by the NACP.				
The information that you provide will be used to improve evaluation technical assistance and to make internal decisions about the extent to which various services are needed. We ask that you provide honest feedback about the individualized support you have received to date and the type of assistance you think is most helpful to the work you do.				
For this section, we have taken every effort to create a survey that will not allow us to identify you or the state asthma program for which you provide evaluation services.				
1. Over the past year, check the level of interaction you have typically had with your ETA.				
J Daily				
J Weekly				
J Biweekly				
J Monthly				
Quarterly				
No interaction in past year				
Uther (please specify)				
Next				
· · · · · · · · · · · · · · · · · · ·				
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Assessment of NACP Evaluation TA - OMB					Exit this survey
2.					
1. Which of the following statements best represents your	views regarding the leve	el of interaction you hav	e typically had with you	ETA?	
This is too much interaction					
This is just the right amount of interaction					
This is not enough interaction					
Other (please specify)					
2. Please describe the ideal level of interaction with your ET					
	A.				
3. Has there been anything that prevented you from interact	ting with your ETA as fre	quently as you would li	ke?		
No					
Yes (describe below)					
	~				
	~				
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. For the following topics, please indicat	Adequate Advice/ Resources Provided	equate advice and resources, or if topic not discuss Inadequate Advice/ Resources Provided	ed, mark "N/A". Not Applicable (N/A)
a. Evaluation Planning	J	J	3
b. Evaluation Implementation	5	Ū	Ĵ
c. General Problem Solving	0	U U	0
d. Applying Evaluation Standards	J	ل	J
e. Engaging Stakeholders	0	U	U I
f. Describing the Program	5	ن	J
g. Focusing the Design	0	U I	0
h. Gathering Credible Evidence	5	U I	0
i. Interpreting Findings/Justifying Conclusions	J	U	0
j. Ensuring Use/Disseminating Findings)	0)
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Assessment of NACP Evaluation TA - OMB			Exit this survey
4.			
1. Please rate the general quality of the intera	ctions you have had with yo	our assigned ETA.	
J Poor			
🌙 Fair			
J Good			
J Excellent			
Explain rating below (optional)			
	< ×		
2. In general, my ETA has been able to:			
	Yes	No	Not Applicable
a. Help me better understand program evaluation	Ú	0	
b. Direct me towards helpful resources)	<u> </u>	U.S.
c. Help me solve difficult technical problems	0	0	ن ا
d. Provide helpful insights about how to address evaluation issues as they have emerged in my practice	U.	C C	J
e. Other (please specify)			
Done			😜 Internet 🛛 🖓 👻 🍕 100% 👻 🏢

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5.				
1. Which of the following general resou	rces have you used? Please r	ate their utility.		
	Very Helpful	Somewhat Helpful	Not Helpful	N/A
a. Asthma Evaluation Listserv	\bigcirc	0	0	0
 b. Using Evaluation to Reduce the Burden of Asthma Webinars 	0))	5
c. Quarterly Evaluation Conference Calls	0	0	0	0
d. Learning and Growing through Evaluation Manual	5)))
Any additional comments?				
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1. Please provide any additional details about how we can improve our provision of evaluation technical assistance.	
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