# Attachment 1: System of Care Expansion Grants, Mid-Course Technical Assistance Feedback Form

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| **Public Burden Statement**: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.  The OMB control number for this project is 0930-0197.  Public reporting burden for this collection of information is estimated to average 2 minutes per respondent, per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.  Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 8-1099, Rockville, Maryland, 20857. |

**PURPOSE:** The technical assistance (TA) feedback form elicits opinions on the following: 1) the use of the TA Enterprise TA activities by the System of Care Expansion Planning grantees, 2) the effectiveness of the TA for the grantees’ strategic planning processes; and 3) the impact of the TA on the development of the grantees’ strategic plans.

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| **Instructions**: Please use the following scale to answer questions:1= Poor 2= Fair 3= Good 4=Excellent 5=N/A |
|  | Webinars | Topical Discussion Calls | TA from Coaches (e.g., Coaching Calls, E-mails) | TA from EnterpriseContent Specialists | On- Site Visits | Materials(Resources/Tool Kits/Notebook) |
| 1. How would you rate each of the following tools/ activities as a useful method of providing support for expansion planning? |  |  |  |  |  |  |
| 2. How would you rate the quality of the following tools/activities? |  |  |  |  |  |  |
| 3. How would you rate the communication about our TA activities (i.e., electronic announcements)? **🔾** Poor **🔾** Fair **🔾** Good **🔾** Excellent  |
| 4. How would you rate the manner by which your feedback informs the topics of our TA activities (including webinars, topical calls, coaching calls and on-site visits)?  **🔾** Poor **🔾** Fair **🔾** Good **🔾** Excellent |
| 5. What suggestions do you have for further improving our TA services / activities? |  |
| 6. What additional TA resources would be helpful to you in developing your strategic plan? |  |