

ATTACHMENT-C: Web Instrument (in Word format)

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CPPW Resource Center Feedback Form

Introduction

Thank you for participating in this evaluation of the CPPW Resource Center! This form can be completed within 1520 minutes.

The purpose of this evaluation is to gather feedback from CPPW program managers about their perceptions to date of the quality and effectiveness of technical assistance, peer activities, and other forms of support offered by the CPPW Resource Center. The information collected from this form will be used to improve future training and technical assistance offered by the Division of Community Health at the Centers for Disease Control and Prevention (CDC).

As program manager, you know a lot about the support your community received, even though you may not have participated directly in all of the training and technical assistance provided. Therefore, we encourage you to consult with your staff for additional input when responding to the form. Please note that this evaluation pertains only to implementation support and does not ask about support from the evaluation and media teams.

Sincerely,
CPPW Resource Center

Public reporting burden of this collection of information is estimated to average 20 minutes per response, including the time for reviewing instructions and completing and reviewing the collection of information. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D74, Atlanta, Georgia 30333; ATTN: PRA (09200879).

Technical Assistance

The CPPW Resource Center offers external technical assistance (TA) through three groups of TA providers including: 1) ICF TA Providers, 2) HHS National Organizations, and 3) CPPW Mentoring Communities. On the following pages, you will be asked to respond to questions about each of these groups of TA providers.

TA provided by the evaluation team and media team is not included in this survey.

ICF International TA Providers

CPPW TA from ICF TA Providers

The ICF TA Providers included:

- Americans for Nonsmokers' Rights Foundation
- Berkeley Media Studies Group
- Campaign for Tobacco Free Kids
- Community Initiatives
- Mark Fenton
- National Association of State Boards of Education (NASBE)
- National Association for Sport and Physical Education (NASPE)
- National Complete Streets Coalition
- Prevention Institute
- Public Health Law and Policy
- Safe Routes to School National Partnership
- The Food Trust
- Tobacco Control Legal Consortium

- 1) Did you receive or participate in TA from one or more of the ICF TA providers listed above?
 - a. Yes (if yes, go to next question)
 - b. No (if no, logical skip to Q #6)

2) Please rate your experience with the following ICF TA providers.

	<u>Received TA from this provider:</u>	<u>Responsiveness</u>	<u>Content expertise</u>	<u>Quality of TA</u>	<u>Usefulness towards achieving our CAP objectives</u>	<u>Overall satisfaction with TA</u>
Americans for Nonsmokers' Rights Foundation	<u>Yes (If yes, continue right)</u> <u>No (If no, skip the questions to the right)</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Very satisfied</u> <u>Satisfied</u> <u>Dissatisfied</u> <u>Very dissatisfied</u>
Berkeley Media Studies Group						
Campaign for Tobacco Free Kids						
Community Initiatives						
Mark Fenton						
National Association of State Boards of Education (NASBE)						
National Association for Sport and Physical Education (NASPE)						
National Complete						

	<u>Received TA from this provider:</u>	<u>Responsiveness</u>	<u>Content expertise</u>	<u>Quality of TA</u>	<u>Usefulness towards achieving our CAP objectives</u>	<u>Overall satisfaction with TA</u>
Streets Coalition						
Prevention Institute						
Public Health Law and Policy						
Safe Routes to School National Partnership						
The Food Trust						
Tobacco Control Legal Consortium						

3) Please rate the degree to which you agree or disagree with the following statements about the process of accessing and receiving TA from ICF TA providers:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I know how to request TA from ICF TA providers.					
I am aware of (or know how to learn about) the specialized expertise available from ICF TA providers.					

- 4) Please describe an example of how TA from one or more of the ICF TA providers helped you accomplish your CAP objectives.

- 5) Please describe any challenges you experienced when receiving TA from ICF TA providers and suggestions for improvement.

TA from HHS National Organization

The HHS National Organizations included:

- American Heart Association
- Association of American Indian Physicians
- Blaze Sports America
- Community Food Security Coalition
- National Association of Latino Elected Official
- National Recreation and Parks Association
- Sesame Workshop
- Society for Public Health Education
- American Lung Association
- American Academy of Pediatrics

- 6) Did you receive or participate in TA from one or more of the HHS National Organizations?
 - a. Yes (if yes, go to next question)
 - b. No (if no, logical skip to Q # 11)

- 7) Please rate your experience with the following HHS National Organizations.

	<u>Received TA from this provider:</u>	<u>Responsiveness</u>	<u>Content expertise</u>	<u>Quality of TA</u>	<u>Usefulness towards achieving our CAP objectives</u>	<u>Overall satisfaction with TA</u>
American Heart Association	<u>Yes</u> <u>No (If no, skip the questions to the right)</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Very satisfied</u> <u>Satisfied</u> <u>Dissatisfied</u> <u>Very dissatisfied</u>

Association of American Indian Physicians						
Blaze Sports America						
Community Food Security Coalition						
National Association of Latino Elected Official						
National Recreation and Parks Association						
Sesame Workshop						
Society for Public Health Education						
American Lung Association						
American Academy of Pediatrics						

8) Please rate the degree to which you agree or disagree with the following statements about the process of accessing and receiving TA from HHS organizations:

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
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I know how to request TA from HHS organizations.					
I am aware of (or know how to learn about) the specialized expertise available among HHS organizations.					
My community was appropriately matched with one or more HHS organizations.					

- 9) Please describe an example of how TA from one or more of the HHS National Organizations helped you accomplish your CAP objectives.
- 10) Please describe any challenges you experienced when receiving TA from HHS National Organizations and suggestions for improvement.

TA from CPPW Mentoring Communities/States

The CPPW mentoring communities include:

- The Cherokee Nation
- County of Los Angeles
- Fund for Public Health in New York Inc. (New York City)
- Minnesota Department of Health
- Wisconsin Department of Health Services

- *11. Did your community receive TA from one or more of the CPPW mentoring communities?
- a. Yes (if yes, go to next question)
 - b. No (if no, logical skip to Q #16)

12. Please rate your experience with the following mentoring communities:

	<u>Received TA from this provider:</u>	<u>Responsiveness</u>	<u>Content expertise</u>	<u>Quality of TA</u>	<u>Usefulness towards achieving our CAP objectives</u>	<u>Overall satisfaction with TA</u>
	<u>Yes</u> <u>No (If no, skip the questions to the right)</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Excellent</u> <u>Good</u> <u>Fair</u> <u>Poor</u>	<u>Very satisfied</u> <u>Satisfied</u> <u>Dissatisfied</u> <u>Very dissatisfied</u>
The Cherokee Nation						
County of Los Angeles						
Fund for Public Health in New York Inc. (New York City)						
Minnesota Department of Health						
Wisconsin Department of Health Services						

13. Please rate the degree to which you agree or disagree with the following statements.

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I know how to request TA from mentoring communities.					
I am aware of (or know how to learn about) the specialized expertise available from the					

mentoring communities.					
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14) Please describe an example of how TA from one or more of the CPPW mentoring communities helped you accomplish your CAP objectives.

15) Please describe any challenges you experienced when receiving TA from the CPPW mentoring communities and suggestions for improvement.

Peer Activities

The following questions are about CPPW peer teams and peer topic calls that were offered by the CPPW Resource Center (not including media peer teams).

PEER TEAMS were small groups of 8-10 participants that met monthly by phone

to discuss issues of their choice.

PEER TOPIC CALLS were onetime calls about a particular topic that anyone could join.

16) Were you a member of a CPPW **peer team**?

- a. yes
- b. no - if no, logical skip
- c. If no, why not?

17) If no, why not?

CPPW Peer Teams

Reminder: PEER TEAMS were a small group of 8-10 CPPW awardee representatives that met monthly to discuss issues of their choice.

18) As a member of a peer team, how often did you participate in your **peer team** calls?

- a. Always
- b. Sometimes
- c. Rarely
- d. Never (logical skip to Q #21)

19) How satisfied were you with the following elements of the **peer team** calls?

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very dissatisfied	Not applicable
Frequency of calls						
Selection of agenda items						
Quality of facilitation						
Level of engagement with peers						

20) How important was it for the facilitator to have content expertise in maximizing the quality of the **peer team** calls?

- a. Very important
- b. Somewhat important
- c. Not important

CPPW Peer Topic Calls

21) Did you participate in one or more **peer topic** calls?

- a. Yes
- b. No (if no, logical skip to Q #25)

22) If no, why not?

23) How satisfied were you with the following elements of the **peer topic** calls?

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very dissatisfied	Not applicable
Selected topics						
Quality of facilitation						
Level of engagement with peers						

24) How important was it for the facilitator to have content expertise in maximizing the quality of the **peer topic** calls?

- a. Very important
- b. Somewhat important
- c. Not important
- d. Don't know

Peer Team and Peer Topic Calls

If you did NOT participate in EITHER Peer Teams or Peer Topic Calls, you can skip this page and go directly to item #29.

25) How useful were the **peer team/topic** meeting summaries in supporting your work?

- a. Very useful
- b. Somewhat useful
- c. Not useful
- d. Not applicable / I did not read the notes

26) How would you describe the level of detail in the **peer team/topic** meeting summaries you received?

- a. Too much detail
- b. Level of detail was just right
- c. Not enough detail
- d. Not applicable / I did not read the notes

27) To what extent did your participation in **peer team** and/or **peer topic** calls contribute to the following aspects of your day-to-day work: (very much, somewhat, very little, none, not applicable):

	Very much	Somewhat	Very little	None	Not applicable
Saved time					
Avoided mistakes					
Learned solutions for addressing barriers/challenges					
Made new peer connections					
Other					

28) What are your overall reflections about your experience with the peer team and peer topic calls?

Comparing Support Modalities

The CPPW Resource Center offered support through a variety of modalities (e.g., Action Institutes, individualized TA, peer activities, webinars).

29) To what extent did each mode of support contribute to the following changes into your community?

	<u>Action Institutes</u>	<u>Annual Meetings</u>	<u>Individualized TA</u>	<u>Peer Teams and Peer Topic Calls</u>	<u>Webinars</u>	<u>Online Resource Center</u>
	4-Very much 3-Somewhat 2-Very little 1-None 0-Not applicable/ I don't know	4-Very much 3-Somewhat 2-Very little 1-None 0-Not applicable/ I don't know	4-Very much 3-Somewhat 2-Very little 1-None 0-Not applicable/ I don't know	4-Very much 3-Somewhat 2-Very little 1-None 0-Not applicable/ I don't know	4-Very much 3-Somewhat 2-Very little 1-None 0-Not applicable/ I don't know	4-Very much 3-Somewhat 2-Very little 1-None 0-Not applicable/ I don't know
Building skills to implement population change strategies among public health staff						
Increasing buy-in among leadership team members to accelerate population change						

	<u>Action Institutes</u>	<u>Annual Meetings</u>	<u>Individualized TA</u>	<u>Peer Teams and Peer Topic Calls</u>	<u>Webinars</u>	<u>Online Resource Center</u>
Developing and sustaining relationships with actively engaged partners						
Incorporating a health equity lens into your work						
Achieving your CAP objectives						

30. Please provide the name of your community/State. (Optional)

31. What type of award do you manage?

- Obesity
- Tobacco
- Both Obesity and Tobacco

32. Please offer any additional comments you have about this form or your experience with support from the CPPW Resource Center.

Thank You!

Thank you for participating in this evaluation of the CPPW Resource Center.

CDC values your feedback and will incorporate this information into the planning and implementation of future training and technical assistance efforts.

-End of Instrument-