

ATTACHMENT - D: Web Instrument (Online-Screen Shots)

CPPW Resource Center Feedback Form

CPPW Resource Center Feedback Form Exit this survey

Introduction

Form approved:
OMB No. 0920-0879
Expiration date: 03/31/2014

Thank you for participating in this evaluation of the CPPW Resource Center! This form can be completed within 15-20 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 D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).

[Next](#)

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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.

[Prev](#) [Next](#)

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ICF International TA Providers

The ICF (formerly ICF Macro) TA providers include:

- 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 your community receive TA from one or more of the ICF TA providers listed above?**

Yes

No

[Prev](#) [Next](#)

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ICF International TA Providers

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

	Received TA from this provider	Responsiveness	Content expertise	Quality of TA	Usefulness towards achieving your CAP objectives	Overall satisfaction with TA
Americans for Nonsmokers' Rights Foundation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Berkeley Media Studies Group	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Campaign for Tobacco Free Kids	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Community Initiatives	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mark Fenton	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
National Association of State Boards of Education (NASBE)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
National Association for Sport and Physical Education (NASPE)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
National Complete Streets Coalition	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Prevention Institute	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Public Health Law and Policy	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Safe Routes to School National Partnership	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
The Food Trust	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Tobacco Control Legal Consortium	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

3. 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 ICF TA providers.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am aware of the specialized expertise available from ICF TA providers or know how to learn about this resource.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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.

Prev Next

TA from HHS National Organizations

The HHS National Organizations include:

- American Academy of Pediatrics
- American Heart Association
- American Lung 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

* 6.

- Yes
- No

Prev Next

TA from HHS National Organizations

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

	Received TA from this provider	Responsiveness	Content expertise	Quality of TA	Usefulness towards achieving your CAP objectives	Overall satisfaction with TA
American Academy of Pediatrics	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
American Heart Association	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
American Lung Association	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Association of American Indian Physicians	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Blaze Sports America	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Community Food Security Coalition	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
National Association of Latino Elected Official	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
National Recreation and Parks Association	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Sesame Workshop	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Society for Public Health Education	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

8. 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 HHS organizations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am aware of (or know how to learn about) the specialized expertise available among HHS organizations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My community was appropriately matched with one or more HHS organizations.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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.

Prev Next

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TA from CPPW Mentoring Communities/States

The CPPW Mentoring Communities include:

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

*11. Did your community receive TA from one or more of the CPPW mentoring communities?

- Yes
- No

Prev Next

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TA from CPPW Mentoring Communities/States

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

	Received TA from this provider	Responsiveness	Content expertise	Quality of TA	Usefulness towards achieving your CAP objectives	Overall satisfaction with TA
County of Los Angeles	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Fund for Public Health in New York Inc. (New York City)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Minnesota Department of Health	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
The Cherokee Nation	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Wisconsin Department of Health Services	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I am aware of (or know how to learn about) the specialized expertise available from the mentoring communities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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.

Prev Next

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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 one-time calls about a particular topic that anyone could join.

* 16. Were you a member of a CPPW PEER TEAM?

- Yes
- No

17. If no, why not?

Prev Next

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CPPW Peer Teams

Reminder: PEER TEAMS were small groups of 8-10 participants 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?

- Always
- Sometimes
- Rarely
- Never

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	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Selection of agenda items	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of facilitation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Level of engagement with peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

20. How important was it for the facilitator to have content expertise in maximizing the quality of the PEER TEAM calls?

- Very important
- Somewhat important
- Not important

Prev Next

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Peer Topic Calls

Reminder: PEER TOPIC CALLS were one-time calls about a particular topic that anyone could join.

*21. Did you participate in one or more PEER TOPIC calls?

- Yes
- No

22. If no, why not?

Prev Next

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CPPW Peer Topic Calls

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	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Quality of facilitation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Level of engagement with peers	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

24. How important was it for the facilitator to have content expertise in maximizing the quality of the PEER TOPIC calls?

- Very important
- Somewhat important
- Not important
- Don't know

Prev Next

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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?

- Very useful
- Somewhat useful
- Not useful
- Not applicable / I did not read the summaries

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

- Too much detail
- Level of detail was just right
- Not enough detail
- Not applicable / I did not read the summaries

27. To what extent did your participation in peer team and/or peer topic calls contribute to the following benefits in your day-to-day work:

	Very much	Somewhat	Very little	None	Not applicable
Discovered new ideas to apply to my work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Saved time	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Learned solutions for addressing barriers/challenges	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Made new peer connections	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Other	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

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

Prev Next

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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 achievements in your community?

	Action Institutes	Annual Meetings	Individualized TA	Peer Teams and Peer Topic Calls	Webinars	Online Resource Center
Building skills to implement population-wide strategies among public health staff	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Increasing buy-in among leadership team members to accelerate population-wide changes	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Developing and sustaining relationships with actively engaged partners	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Incorporating a health equity lens into your work	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Achieving your CAP objectives	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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 survey or your experience with support from the CPPW Resource Center.

Prev Next

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-End of Survey-