**Survey about the Use of Technical Assistance by the State and Local Workforce Systems (Technical Assistance Survey)**

**Introduction**

The U.S. Department of Labor, Employment and Training Administration (DOL-ETA) seeks to learn more about how training and technical assistance (TA) are being used in the public workforce system, and the value that grant recipients like you place on that TA. Technical assistance includes a wide array of activities aimed at enhancing administrative, organizational, or management capacity; improving programs and systems; enhancing individuals’ skills; or solving specific situational problems. TA is often delivered in one or more ways, such as one-on-one coaching, group meetings/workshops or individual training, webinars, Communities of Practice, and through the use of reports, guides, and other resources like Workforce3One.

Your feedback about TA, combined with the responses from other workforce system grantees across the country, will be analyzed to help the DOL-ETA understand more about the research that is needed to evaluate TA; and ultimately, used to inform and improve the application of TA to the public workforce system. ***All information you provide will be kept private to the extent permitted by law. You will not be asked to provide personal identifiers such as your name or address, and you will not be identified in any report***.

This survey asks about your organization and its functions; the types of TA in which your organization typically participates (topic areas and delivery method); how your organization makes use of this TA; and your opinion about effective and not so effective TA. It is being distributed to DOL-ETA formula and discretionary grantees. **We are particularly interested in hearing about your perspective on the TA you have received as a {INSERT GRANTEE TYPE FROM SAMPLE FILE}.** *Your cooperation is appreciated and thank you, in advance, for completing this survey.*

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According to the Paperwork Reduction Act of 1995, persons are not required to respond to this collection of information unless it displays a currently valid OMB control number and expiration date. Responding to this survey is voluntary. Public reporting burden for this collection of information is estimated to average 15 minutes per response, including time for reviewing instructions and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information to Gloria Salas-Kos, at Salas-Kos.Gloria@dol.gov.

**Instructions**

You are about to enter the survey. To go back a page, please use the survey’s “Previous” button, *not* your browser’s back button.

Your answers will be saved each time you click “Next” and will be saved until the next time you log in. The survey takes about 15 minutes to complete. You may leave and return multiple times. If you do return, after entering your login code, you will be placed in the screen you last visited.

***First, we have a few questions about your position in your organization.***

**Q1. Identify and select the state where you work.** *[This will be a drop down box.]*

**Q2. Which of the following best describes your organization?**

(Check all that apply)

* State workforce agency
* State Workforce Investment Board
* Local Workforce Investment Board
* One Stop Career Center / American Job Center
* Indian Tribal government / Other Tribal organization
* Community college / Other education or training institution
* Local non-profit organization
* National non-profit organization
* Other (Please Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q3. Please check the box that describes your main activity/function within your organization.** *[One response only will be accepted.]*

* Executive Leadership
* Service Delivery (i.e., work directly with individual job-seekers or employers)
* Finance/Budgeting/Accounting
* Program/Grant Administration
* Performance Management / Data Collection / Management Information Systems
* Other (Please Specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

***Next we would like to ask you about the technical assistance (TA) from any provider or resources that your organization receives or uses.*** *TA includes activities aimed at enhancing administrative, organizational, or management capacity; improving programs and systems; improving skills or solving specific problems. TA might be delivered through one-on-one coaching, training sessions, webinars, or through written guidance and other training materials, etc.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Q4. In the last year, how many times have you received TA delivered through…** | **Have Not Received TA Using This Method** | **Received TA Using This Method** ***One Time*** | **Received TA Using This Method *More than Once*** |
| Webinars conducted in real time | ❑ | ❑ | ❑ |
| Archived webinars (accessed at any time) | ❑ | ❑ | ❑ |
| Workshops / group training | ❑ | ❑ | ❑ |
| Online, self-paced training | ❑ | ❑ | ❑ |
| Grantee meetings – in person | ❑ | ❑ | ❑ |
| Grantee meetings – online or over the phone | ❑ | ❑ | ❑ |
| Support visit – onsite at your facility | ❑ | ❑ | ❑ |
| Telephone – one-on-one | ❑ | ❑ | ❑ |
| Telephone – group conference calls | ❑ | ❑ | ❑ |
| Peer-to-peer exchanges – in person | ❑ | ❑ | ❑ |
| Peer-to-peer exchanges – online or over the phone | ❑ | ❑ | ❑ |
| Web-based libraries of information | ❑ | ❑ | ❑ |
| Online Communities of Practice (COPs) | ❑ | ❑ | ❑ |
| How-To Guides | ❑ | ❑ | ❑ |
| Letters/announcements/written policy guidance | ❑ | ❑ | ❑ |

**Q5. What provider does your organization most rely upon to provide TA?**

|  |
| --- |
| **Now, we would like you to think about an example of effective TA you’ve received in the last year.** “Effective,” means that TA created a change within your organization. This change could be big or small. It could be a change that occurred through any number of actions, functions or activities related to how your organization performs or how individuals who work or receive services within your organization work or interact.  |

**Q6. What primary functions, activities or topic area(s) did this TA event address?**

**(Check all that apply)**

* Systems and policy alignment
* Individual customer services
* Case management
* Employer customer services
* Financial management
* Program management
* Performance management
* Career Pathways
* Trade Adjustment Assistance Community College and Career Training (TAACCCT)
* Workforce Innovation Fund (WIF)
* Other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q7. Why did your organization participate in this TA? (Check all that apply)**

* We requested it based on a need we identified
* We volunteered to participate because we thought the TA would be helpful
* We were required or strongly encouraged to participate

**Q8. How was this TA delivered?**

**(Check all that apply)**

* Webinars conducted in real time
* Archived webinars (accessed any time)
* Workshops / group training
* Online, self-paced training
* Grantee meetings – in person
* Grantee meetings – online or over the phone
* Support visit – onsite at your facility
* Telephone – one-on-one
* Telephone – group conference calls
* Peer-to-peer exchanges – in person
* Peer-to-peer exchanges – online or over the phone
* Web-based libraries of information
* Online Commmunities of Practice (COPs)
* How-To Guides
* Letters/announcements/written policy guidance
* Other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Q9. Who prepared/delivered the TA? (Check all that apply)**

* Contractor / consultant
* State staff
* Federal staff
* Academic or subject matter expert
* Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Do not know

**Q10. What made this TA event *effective*?**

**(Please be as descriptive as possible.)** [*Open ended question*]

**Q11. How did you use or apply the TA received within the context of your organization?**

[*Open ended question*]

**Q12. Please tell us how much the TA contributed to each of the following possible outcomes:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Did Not Contribute at All** | **Contributed Somewhat** | **Contributed a Great Deal** | **Not Applicable** |
| Improved outreach to individual customers | ❑ | ❑ | ❑ | ❑ |
| More effective interaction with individual customers | ❑ | ❑ | ❑ | ❑ |
| More efficient case management | ❑ | ❑ | ❑ | ❑ |
| More appropriate assessment tools and/or more effective usage of those tools | ❑ | ❑ | ❑ | ❑ |
| Improved outreach to business customers | ❑ | ❑ | ❑ | ❑ |
| More effective interaction with business customers | ❑ | ❑ | ❑ | ❑ |
| Enhanced referrals to partner services | ❑ | ❑ | ❑ | ❑ |
| Better supportive services | ❑ | ❑ | ❑ | ❑ |
| Increased access to benefits and services | ❑ | ❑ | ❑ | ❑ |
| Increased quality of training | ❑ | ❑ | ❑ | ❑ |
| Expanded services to specific populations | ❑ | ❑ | ❑ | ❑ |
| More accurate record-keeping (including financial) | ❑ | ❑ | ❑ | ❑ |
| Increased employee morale | ❑ | ❑ | ❑ | ❑ |

**Q12a. Did this TA contribute to any other important outcomes?**

* Yes (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* No

**Finally, we’d like to ask you to think about a time during the last year when your organization received TA that was not-so-effective.**

**Q13. What primary functions, activities, or topic area(s) did the TA address? (Check all that apply)**

* Systems and policy alignment
* Individual customer services
* Case management
* Employer customer services
* Financial management
* Program management
* Performance management
* Career Pathways
* Trade Adjustment Assistance Community College and Career Training (TAACCCT)
* Workforce Innovation Fund (WIF)
* Other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q14. Why did your organization participate in this TA? (Check all that apply)**

* We requested it based on a need we identified
* We volunteered to participate because we thought the TA would be helpful
* We were required or strongly encouraged to participate

**Q15. How was this TA delivered? (Check all that apply)**

* Webinars conducted in real time
* Archived webinars (accessed any time)
* Workshops / group training
* Online, self-paced training
* Grantee meetings – in person
* Grantee meetings – online or over the phone
* Support visit – onsite at your facility
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* How-To Guides
* Letters/announcements/written policy guidance
* Other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Q16. Who prepared/delivered the TA? (Check all that apply)**

* Contractor / consultant
* State staff
* Federal staff
* Academic or subject matter expert
* Other (Please specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Do not know

**Q17. What made this TA *ineffective*?**

**(Please be as descriptive as possible.)** [*Open ended question*]

**Q18. What changes to this TA, if any, were needed to better meet your organization’s needs?** [*Open ended question*]

**Finally, we’d like to give you an opportunity to provide any additional information you think may be useful.**

**Q19. Is there anything else that you would like to share about your TA experiences?** [*Open ended question*]

**Thank you for taking the time to complete this survey. We will use your answers to provide feedback to improve or enhance the TA provided by the DOL-ETA.**