

The purpose of this survey is to better understand the quality and impact of OJJDP's activities and initiatives to support the TTA Provider Network, and to solicit suggestions for improvement. Your participation in this survey is entirely voluntary. The survey should take about 10 minutes to complete. If you have any questions, please contact Christine Leicht, OJJDP NTTAC Evaluation Manager at <a href="mailto:christine.Leicht@icfi.com">Christine.Leicht@icfi.com</a>.

1.	Please select any of the OJJDP TTA Provider Network Workgroups of which you are a member (This question will inform
	which of the follow-up questions they receive using branching in the online survey):

- a. Training and TA Requests Workgroup (we will insert all current workgroups as of survey date)
- b. Research and Evaluation Workgroup
- c. Webinar Workgroup
- d. Online Training/Training Center Workgroup
- e. Marketing/Website Workgroup
- f. I do not participate in any Workgroups

2.	Have you participated in any OJJDF	TTA Provider Network meetings/Webinars in the past 12 mont	hs?
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- a. Yes (If yes, they will receive questions 3 and 4, if no, they will skip to 5)
- b. No

<ol><li>How often have you participated in OJJDP TTA Provider' Network meetings/Webinars since <insert< li=""></insert<></li></ol>	ert date> !	3.
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- a. At least once every month
- b. At least once every few months
- c. At least once in the past 6 months

How useful were the TTA Network meetings/Webinars?

d. At least once in the past year

b. Son	newhat Useful (please explain:)
c. Not	t at all useful (please explain:)

5. Have you used the <insert NTTAC activity/tool; e.g. Online Training Center> since <insert date since latest development on that particular tool has been updated/installed>? (If yes, they will be asked to answer the question 6, if not, they will skip that question)

- a. Yes
- b. No
- 6. Is the *<insert NTTAC activity/tool; e.g. Online Training Center>* helping you to feel more connected/improving your ability to collaborate with other providers?

If you have TTA or resources you'd like to share on the OJJDP Training Center, please submit to: tta@nttac.org

This survey will be offered online; however, in the case of paper surveys please send completed evaluation forms to:

Christine Leicht, OJJDP NTTAC Evaluation Manager, <a href="https://creativecommons.org/leichtwise/">Christine Leicht, OJJDP NTTAC Evaluation Manager, <a href="https://creativecommons.org/">Christine Leicht@icfi.com</a></a>





7. Please rate the following statement on a scale of 1 to 5: As a result of my involvement in the OJJDP TTA Provider Network, I have been able to make meaningful connections with other TTA providers.

1	2	3	4	5
I have made no		I have made		I have made
meaningful		some		many
33		meaningful		meaningful
connections		connections		connections

Please explain your answer to question 7:

- 8. Thinking back to the beginning of your involvement with the OJJDP TTA Provider Network, how would you describe the level of collaboration among TA Providers? (Did TA Providers talk to each other? Did they share information/resources with each other?)
- 9. How would you describe the current level of collaboration among TA Providers? (We will insert appropriate response choices based upon current collaboration levels as of survey date)
- 10. What activities/events hindered collaboration among TA Providers? (optional for future years)
- 11. If the OJJDP TA Providers' Network did not exist, what impact would this have on the TTA community? (optional for future years)
- 12. Are you seeing an increased number of attendees/participants at your trainings/Webinars/activities or an increased use of your resources as a result of your involvement in the OJJDP TTA Provider Network? (optional for future years)
- 13. Looking ahead, what additional activities can the TA Providers' Network undertake to further collaboration and information sharing that would be useful to members?

**Work Group Questions 14-19** (We will have a duplicate set of questions for each active workgroup as of survey date. Each respondent will only complete relevant questions for their role)

#### <insert name> Workgroup

14. Please rate your agreement with the following statements:	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I understand the goals of the <insert name=""> Work Group. (optional)</insert>	SD	D	N	Α	SA
The goals of the <insert name=""> Work Group are being met. (optional – may ask directly about each work group goal individually)</insert>	SD	D	N	Α	SA
Because of my participation with the <insert name=""> Work Group, I collaborate more with other TA Providers than I would have otherwise.  (optional)</insert>	SD	D	N	Α	SA

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		obtain from the <insert (optional)<="" is="" o="" relevant="" th="" useful.=""><th>SE</th><th>) D</th><th>N</th><th>Α</th><th>SA</th></insert>	SE	) D	N	Α	SA
15. C	Overall, do	you feel that the activities of the <i< th=""><th>nsert n</th><th>ame&gt; Work Grou</th><th>o are relevant</th><th>and usefu</th><th>l for your efforts to</th></i<>	nsert n	ame> Work Grou	o are relevant	and usefu	l for your efforts to
	a.	Very useful - Please explain:					
	b.	Useful - Please explain:					
	c.	Somewhat Useful - Please explain	າ:				
	d.	Not Useful - Please explain:					
16. V	Vhat do yo	u think are the most important act	ivities t	he <insert name=""></insert>	Work Group	should be	prioritizing?
17. F	low often s	hould the <insert name="">Work Gro</insert>	up me	et? (optional)			
	a.	Once a week					
	b.	Twice a month					
	C.	Every other month					
	d.	On a quarterly basis					
	Please provi A Project?	ide an example of how your partici optional)	pation	in the <insert nam<="" td=""><td>ne&gt; Work Gro</td><td>up has enh</td><td>anced the work of</td></insert>	ne> Work Gro	up has enh	anced the work of
19. P	lease provi	de any comments or suggestions o	n how	the <insert name:<="" td=""><td>&gt; Work Group</td><td>can be im</td><td>proved. (optional)</td></insert>	> Work Group	can be im	proved. (optional)
V t	Vashington	rent action plan was based on <sug DC&gt;. Please help OJJDP focus thei i items that you would like OJJDP to be in a list:</sug 	r effort	s on the following	remaining ac	tion items	by selecting the top
	a.	Action Item 1	c.	Action Item 3		e.	Action Item 5
	b.	Action Item 2	d.	Action Item 4		f.	Action Item 6, etc
21. F	low often v	vould you like to meet in person w	ith OJJI	OP staff and fellow	v TTA Provide	rs? (option	al)
	a.	OJJDP Staff:	_				
	b.	Fellow TA Providers:		- <del></del>			
Optio	nal Questio	ons that may be utilized as needed	:				

- 22. Please provide information regarding your TA project's capacity and needs around the following issues:
  - a. Issue 1: <please explain>
  - b. Issue 2: <please explain>
  - c. Issue 3: <please explain>
- 23. Please provide your TA Project's experience with the following tools/resources:

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- a. Tool/Resource 1: <please explain>
- b. Tool/Resource 2: <please explain>
- c. Tool/Resource 3: <please explain>

24.							
The following tools are available to <purpose>. For each item, please indicate whether or not you have used it and, if</purpose>							
applicable, how you intend to use the tool to improve your work.*							
Please select which tools you have used.  Tell us how you used this tool to  Provide any comments or							
, , , , , , , , , , , , , , , , , , , ,	<insert interest="" of="" purpose="">.</insert>	suggestions you have about this					
		tool.					
tool/resource (e.g. widgets, etc.)							
tool/resource							
tool/resource							
tool/resource							
tool/resource							
25.							
Did you access any of the following <insert feature<="" td=""><td>es (e.g., information and resources, tr</td><td>ainings)&gt; on &lt; insert tool/resource</td></insert>	es (e.g., information and resources, tr	ainings)> on < insert tool/resource					
(e.g., OJJDP's Online University)>? If so, please in	dicate which resource and, if applicab	le, how you intend to share or use					
the information in your work.							
Please select each training/resource you have	Tell us how you intend to use the	Provide any comments or					
accessed. (Check all that apply.)	training/resource in your work.	suggestions you have about the					
	,	training/resource.					
name name							
name							
26. Please describe collaborative resources that	would be helpful for improving the OJ	JDP TTA Network?					
27. How useful are the <insert resources="">?</insert>							
Very useful (Please explain.)							
Useful (Please explain.)							
Somewhat useful (Please explain.)							
☐ Not at all useful (Please explain.)	<del></del>						
28. Please describe additional <insert features,="" re<="" td=""><td>occurred ate /&gt; that you would like to</td><td>soo offered?</td></insert>	occurred ate /> that you would like to	soo offered?					
20. Fiease describe additional smiseri reduces, 16	esources, etc. /> triat you would like to	SEE OHEIEU!					
Tha	nk you for your participation.						

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