

## Appendix C – Revised 11/16/17

### ACF COUNTY Human Services Commissioner Customer Feedback Survey

The Administration for Children and Families (ACF) is a division of the U.S. Department of Health & Human Services (HHS). We promote the economic and social well-being of children, families, individuals and communities with leadership and resources for compassionate, effective delivery of human services. ACF administers more than 60 programs with a **budget of more than \$53 billion**, making it the second-largest agency in HHS. ACF is comprised of **19 offices** including the **Office of Regional Operations**, which represents 10 regional offices around the country. ACF is very interested in using feedback from local human services agency leadership to help inform and improve the provision of services for children and families served by our programs.

This survey is intended for **COUNTY human services commissioners** (a.k.a. Secretary, Chief Executive Officer, or Director). Although the majority of ACF funding is provided to a designated state agency, we recognize that the implementation and innovative practices are also generated at the local level. ACF federal funding provides support for TANF, child welfare/foster care, child care, Head Start, child support, and other human services programs. We know that counties operating in state-administered versus state-supervised, county-administered states may have different challenges and opportunities with implementing federally-funded programs. We are very interested in receiving feedback from local jurisdictions to inform our work with the states.

Your participation in this survey is completely voluntary and all answers will be used for internal planning purposes and to further the proper performance of the functions of the agency. Your responses will be kept private to the extent permitted by law. Please take a few moments to answer a few questions about your priorities and challenges, experiences working with ACF and share your suggestions for improvement. This survey should take approximately 15-30 minutes to complete.

*NOTE: 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 number for this information collection is 0970-0356 and the expiration date is 03/31/2018.*

## COUNTY PRIORITIES AND CHALLENGES

(1) For each of the following items, move the slider to indicate the strength of your agency's priorities in the next 12 months. *When assessing whether an item is a "priority," please focus on where you intend to devote notable organizational and/or financial resources.*

### Organizational Efforts

- Advancing intergenerational/whole family approaches to human services
- Engaging families/consumers in redesign of services
- Focusing organizational culture on outcomes and results
- Improving families' social and economic well-being

- Improving agency performance management systems
- Improving well-being by shifting from crisis response to prevention
- Improving data systems' interoperability
- Fostering inter-/ or intra-agency collaborations with other public agencies
- **Redesigning service delivery systems to integrate programs**
  - Systems integration of human services, behavioral health, and health care
  - Systems integration of human services with housing
  - Systems integration of *aging services* with human services, behavioral health and health, or housing

### Programmatic Topics

- Child welfare/foster care systems/preventing child abuse and neglect
- Child care/early care and education
- Welfare/TANF cash assistance/self-sufficiency
- Workforce development/education and training/employing hard-to-employ populations
- Child support
- Substance abuse prevention and treatment, including opioids
- Homelessness and housing

### (b) Spotlight: Overall Priority

Without addressing the need for more funding, we are interested in better understanding your most important overall priority for the coming year, regardless of whether it is covered by the list above. Please use this space to share further details.

- (2) Based on your experience implementing ACF programs at the local level, and the recognition that no new resources may be available, please share information about the **challenges you face** in effectively serving children and families.

- Federal regulations and policy guidance
- State regulations and policy guidance
- Variation in federal eligibility requirements across programs
- Limits on existing program waiver authority
- Meeting federal, state or local match and Maintenance of Effort requirements for federal funding
- Federal reporting, auditing, or monitoring requirements
- Insufficient collaboration across federal agencies serving similar populations
- Sufficient technical resources to use data to meet program objectives
- Guidance on privacy and confidentiality requirements for sharing administrative data
- Other barriers or challenges

- (3) From your experience implementing ACF programs at the local level, are you able to **braid or align existing funding streams** and resources to support innovation and effectiveness?

- a. Not at all
- b. With some difficulty
- c. To some extent
- d. A great deal
- e. We have not undertaken this effort.

(4) From your experience implementing ACF programs at the local level, are you able to **align data and/or data systems** to support innovation and effectiveness?

- a. Not at all
- b. With some difficulty
- c. To some extent
- d. A great deal
- e. We have not undertaken this effort.

(5) Please rate the overall strength of your state agency’s interagency collaborations across several health and human services programs.

- Workforce/Employment/Labor
- Early childhood
- Food Assistance
- Health/Maternal and child health
- Housing/homelessness
- Child welfare
- Other (specify)

Respondent will provide rating for each program listed with the following response options:

- a. Poor
- b. Fair
- c. Good
- d. Very Good
- e. Excellent

(6) We know that it can be challenging to interact with multiple federal agencies at the state or local level. Which agencies should ACF prioritize for interagency partnerships in the next twelve months?

*Please rank the partnerships that would best address the challenges you face and support your priorities.*

Agency	Rank
USDA-FNS (SNAP)	
HHS-CMS (Medicaid)	
HHS-SAMHSA (Substance abuse and mental health)	
HHS-MCHB (maternal and child	

health)	
Department of Labor (WIOA)	
HUD (Housing)	
HHS-Administration for Community Living (Area agency on aging)	
Other agency (specify _____)	

## RECOMMENDATIONS FOR ACF

- (7) What **potential role(s) for ACF** would most help you achieve your agency priorities in the coming year? *Please rate the level of importance for each role specified.*
- Relationship broker between state and local agencies with other federal agencies on cross-systems integration
  - Convener of state and local key partners and stakeholders
  - Informal executive-level thought partner and problem solver
  - Advisor providing federal policy guidance, interpretation, and analysis
  - Developer of public-private partnerships, convening philanthropy and other funders
  - Messenger/presenter at regional, state, or local meetings
  - Disseminator of state and local model approaches
  - Facilitator of peer-to-peer learning with state/local counterparts
  - Advisor providing individualized technical assistance and consultation
- (8) We would like information about the **topics of interest for technical assistance** to local executive leaders (as opposed to direct service staff, supervisors, or other middle managers). *Please rate your level of interest in receiving technical assistance for each topic.*
- Best practices/model approaches for service delivery
  - Incorporating the latest research into programs (i.e., child development in child care)
  - Preventing child abuse and neglect
  - Putting hard-to-employ populations to work
  - Blending/braiding multiple funding streams
  - Data privacy and confidentiality requirements
  - Data interoperability
  - Using data to improve outcomes
  - Organizational development and structures
  - Other (specify)

(9) What is your preferred form of communication with ACF? *Please select your first and second choice*

- a. Ad-hoc, one-on-one in-person meetings
- b. Regularly scheduled in-person one-on-one meetings
- c. Regional peer-to-peer meetings
- d. Virtual meetings/ conference calls
- e. Grantee meetings and/or national conferences
- f. Newsletters and emails
- g. Blogs
- h. Short videos
- i. Other (specify)

(10) What tools or resources would you find helpful from ACF? *Please select the top 3 most useful from the list below*

- a. Data and reports to compare your ACF programs to other states
- b. One-page summaries of ACF programs and priorities
- c. 3- to 5-page research, policy, or issue briefs
- d. Best practices/case studies or program summaries regarding other state's initiatives
- e. Resources on federal funding opportunities and navigating federal grants
- f. Evidence-based practices reviews
- g. Customer satisfaction survey templates

(11) We welcome other suggestions for how ACF can foster more efficient and effective services and reduce barriers for state and local human services agencies. Please use the space below.

## Working with ACF and Regional Offices

Now we would like to hear from you about your experiences seeking assistance with ACF programs.

(12) When an issue regarding ACF-funded programs requires you to seek assistance, where do you turn as your primary source of assistance? *Please choose one.*

- State human services/social services agency
- ACF Central Office
- ACF Regional Office
- ACF-funded technical assistance provider
- State or local-contracted technical assistance provider
- Professional association (National Association of Counties, National Council of Local Human Services Administrators, etc)
- Informal professional contacts
- Other (specify)

(13) Did you seek assistance from the **ACF Regional Office** in the last year?

- Yes

- No
- Not sure/Do not know

(a) How often did you seek assistance from the **ACF Regional Office** last year?

- 1-2 times
- 3-5 times
- 6-11 times
- Monthly or more
- Not sure/ Don't know

(b) How satisfied were you with the timeliness of assistance you received from the **ACF Regional Office**?

- Very Satisfied
- Satisfied
- Dissatisfied
- Very dissatisfied

(c) Please rate your overall satisfaction with the assistance you received from the **ACF Regional Office**?

- Very Satisfied
- Satisfied
- Dissatisfied
- Very dissatisfied

(c\_explain):

Please provide more information about what was most helpful?

Please provide more information about your concerns and suggestions for improvement

(14) Did you seek assistance from the **ACF Central Office** in the last year?

- Yes
- No
- Not Sure/Do not know

(a) How often did you seek assistance from the **ACF Central Office** last year?

- 1-2 times
- 3-5 times
- 6-11 times
- Monthly or more
- Not sure/ Don't know

(b) How satisfied were you with the timeliness of assistance you received from the **ACF Central Office**?

- Very Satisfied
- Satisfied
- Dissatisfied

- Very dissatisfied

(c) Please rate your overall satisfaction with the assistance you received from the **ACF Central Office**?

- Very Satisfied
- Satisfied
- Dissatisfied
- Very dissatisfied

(c\_explain):

Please provide more information about what was most helpful?

Please provide more information about your concerns and suggestions for improvement

(15) Did you meet with your region's ACF Regional Administrator or their staff in the past year?

- Yes
- No
- Not sure/ Don't know

(a) Please rate your overall satisfaction with your meeting(s) with the ACF Regional Administrator's office.

- Very Dissatisfied
- Dissatisfied
- Satisfied
- Very Satisfied

(a\_explain):

Please provide more information about what was most helpful

Please provide more information about your concerns and suggestions for improvement

## Respondent Background

In order to target our follow-up activities, please share some background about you and your agency.

(16) What is your title?

- County CEO (Commissioner, Secretary, Executive Director, Director)
- County Deputy Director, Chief of Staff or direct report to state CEO
- County Senior Director or Program Administrator
- Other (specify\_\_\_\_\_)

(17) My agency's total annual budget is:

- Less than \$500 million
- \$500 million to \$1 billion
- \$1 billion to \$5 billion
- \$5 billion to \$10 billion

- \$10 billion or over
- (18) Please estimate how much of your program budget is allocated to contracts with private non-governmental providers or community agencies:
- 0-25%
  - 26-50%
  - 51-75%
  - 75% or more
- (19) How many FTEs does your agency employ?
- 1-100
  - 101-500
  - 501-1000
  - 1001-5000
  - 5001+
- (20) What state do you currently work in? \_\_\_\_\_
- (21) What programs does your agency oversee? *(select all that apply)*
- Public assistance, Temporary Assistance for Needy Families (TANF)
  - Supplemental Nutrition Assistance Programs (SNAP)
  - Workforce development and employment training
  - Child welfare, foster care, child protective services, child abuse prevention
  - Child Care and Development Fund (CCDF) Subsidy and child care
  - Head Start, Early Head Start or other early childhood programs
  - Home visiting
  - Public health, maternal, and child health
  - Mental health
  - Substance abuse
  - Child support
  - Domestic violence
  - Refugee assistance
  - Housing and homelessness
  - Developmental disabilities
  - Aging
  - Adult and Juvenile justice
  - Community Services Block Grant programming
  - Homeless services
  - Other (specify)