Office of Community Services (OCS)

LOW-INCOME HOME ENERGY ASSISTANCE PROGRAM (LIHEAP)

## Grantee Satisfaction Survey 2019

### Introduction

The Office of Community Services’ (OCS) Low Income Home Energy Assistance Program (LIHEAP) is seeking feedback from our grantees about the training and technical assistance we provide. Your participation, while voluntary, is critical for us to understand how well we are delivering service to you and how we can improve our training and technical assistance.

This survey is being administered by CFI Group, an independent third-party research group. Your answers will remain anonymous and will be combined with those from other respondents for research and evaluation purposes only.

This survey is authorized by the U.S. Office of Management and Budget Control No. 1090-0007, which expires September 30, 2021, and will take approximately 12 minutes.

### Technical Assistance Provided by Federal LIHEAP Staff

Please think about the technical assistance provided by the federal LIHEAP staff as it relates to the following areas. Using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate the following.

1. Ease of reaching LIHEAP staff
2. Ability of LIHEAP staff to direct you to useful resources/information that address your concerns
3. Ability of LIHEAP staff to answer your questions about grant policies, procedures, regulations and legislation
4. Ability of LIHEAP staff to provide you with options that aid you in decision-making
5. Timeliness of receiving requested information
6. Clarity of assistance/guidance provided
7. Consistency of assistance/guidance provided
8. Have you participated in any of the Regional Grantee Conference Calls over the past year?
	1. Yes
	2. No

**[PN: If Q8 is “YES” go to Q9; if “NO” skip to (Q16)**

Please think about the Regional Grantee Conference Calls you have participated in over the past year and using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate the following.

1. Appropriateness of the discussion topics, i.e. regionally focused
2. Usefulness of the updates provided
3. Opportunity to learn from your peers through open discussion
4. Timeliness of information provided
5. Skill of the facilitators on the calls
6. Materials provided related to each call
7. How, if at all, did the regionally focused discussion format impact your willingness to participate? Did it…. [CHOOSE ONE]:
	1. Greatly increase your willingness to participate
	2. Somewhat increase
	3. Neither increase nor decrease
	4. Somewhat decrease
	5. Greatly decrease your willingness to participate

### On-Site Technical Assistance Provided by Contractors

16. Did you receive on-site technical assistance provided by contractors in the past three calendar years?

a. Yes

b. No

**[PN: IF “YES”, go to Q17; if “NO”, skip to section LIHEAP Webinars Q27]**

Please think about the on-site technical assistance provided by LIHEAP contractors in the past three calendar years as it relates to the following areas. *Please note, these questions do not refer to the technical assistance provided directly by LIHEAP staff*. Using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate the following.

1. Ease of scheduling on-site technical assistance
2. Ability of technical assistance providers to answer your questions
3. Ability of technical assistance providers to direct you to resources (i.e. publications, training, subject matter experts, relevant laws, policies, guidance, etc.) that address your concerns/challenges
4. The extent to which the technical assistance provided is well-tailored to assist you in better implementing your program
5. Clarity of assistance/guidance provided
6. Consistency of the assistance provided with federal guidance/direction
7. Usefulness of work products developed during on-site visit
8. Was the amount of time the technical assistance provider spent on-site adequate to meet your needs?
	1. Yes
	2. No
9. Did you request the on-site assistance visit?
	1. Yes
	2. No

**[PN: If “YES”, go to Q26; if “NO”, skip to section LIHEAP Webinars Q27]**

1. Timeliness of response to your request for assistance

### LIHEAP Webinars

Please think about the webinars provided by LIHEAP in the past year. Using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate the following.

1. Timeliness of notification of dates and times of the webinars
2. Optimally timed to support your work (timeliness of topic)
3. Relevance of topics
4. Do you feel the number of webinars provided are too few, too many or just right to meet your need for information?

a. Too few

b. Too many

c. Just right

1. Have you listened to a webinar in the past year?
	1. Yes
	2. No

**[PN: If “YES”, go to Q32; if “NO”, skip to Q37]**

1. What was the subject matter of the most recent webinar you attended?
	1. Performance Management
	2. Fiscal
	3. Tribal Focus
	4. Other

Now, thinking about that webinar, using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate the following:

1. Usefulness of webinar content
2. Clarity of speakers
3. Knowledge of speakers
4. Ease of use of content
5. Are you aware that all webinars are recorded and available for you to reference as needed?
	1. Yes
	2. No

**[PN: If “YES, go to Q38; if “NO” skip to LIHEAP Conferences Q40]**

1. Have you ever used any of the recorded webinars?
	1. Yes
	2. No

**[PN: If “YES, go to Q39; if “NO” skip to LIHEAP Conferences Q40]**

1. Please think about the recorded webinars you have viewed. Using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate *the ease of use* of the recorded webinars.

### LIHEAP Conferences

Please think about the conferences sponsored by LIHEAP over the last three calendar years. Using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate the following.

1. Timeliness of notification of dates and times

[**PN: If Q40 answer 5 or lower, ask Q41; otherwise skip to Q42]**

1. How much time is typically required for you to secure the necessary travel approval?
	1. One month
	2. Two months
	3. Three months
	4. 6 months or longer
	5. Not applicable/not allowed to travel out-of-state
2. Did you participate in the ACF LIHEAP conference within the past three calendar years?
	1. Yes
	2. No

**[PN: If “YES”, go to Q43; if “NO” skip to section LIHEAP Clearinghouse Q50]**

1. Relevance of topics covered
2. Workshops tailored to enhance skills/knowledge
3. Opportunities to network with peers
4. Knowledge of speakers
5. Effectiveness of the break-out sessions
6. How important is the in-person time afforded conference participants?
	1. Very important
	2. Somewhat important
	3. Not at all important
7. What, if any, advantages do you feel the break-out sessions provide? [OPTIONAL]

### LIHEAP Clearinghouse

1. Are you aware of the LIHEAP Clearinghouse?
	1. Yes
	2. No

**[PN: If “YES” go to Q51, if “NO” skip to LIHEAP Related Websites Q64 WEBMATRIX]**

Please think about the LIHEAP Clearinghouse Issue Briefs. Using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate the following:

1. Relevance of LIHEAP Clearinghouse Issue Briefs
2. Usefulness of the information available

Please think about the LIHEAP Clearinghouse published Reports. Using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate the following:

1. Relevance of LIHEAP Clearinghouse published Reports
2. Usefulness of the information available

Please think about the LIHEAP Clearinghouse E-Bulletins/Alerts. Using a scale from 1 to 10, where 1 is poor and 10 is excellent, please rate the following:

1. Relevance of LIHEAP Clearinghouse E-Bulletins/Alerts
2. Usefulness of the information available
3. Do you feel the frequency of alerts are too few, too many, or just right to meet your need for information?

a. Too few

b. Too many

c. Just right

1. Are you aware of the LIHEAP Peer-To-Peer Network facilitated by the Clearinghouse?
	1. Yes
	2. No

**[PN: If “YES” go to Q59, if “NO” skip to Q61]**

1. Have you participated in the LIHEAP Peer-To-Peer Network?
	1. Yes
	2. No

**[PN: If “YES” go to Q60, if “NO” skip to Q61]**

1. How useful has the network been to you?
	1. Very useful
	2. Somewhat useful
	3. Not at all useful
2. Are you aware of the LIHEAP Virtual Library?
	1. Yes
	2. No

**[PN: If “YES” go to Q62, if “NO” skip to section LIHEAP Related Websites Q64 WEBMATRIX]**

1. Have you used the LIHEAP Virtual Library?
	1. Yes
	2. No

**[PN: If “YES” go to Q63, if “NO” skip to section LIHEAP Related Websites Q64 WEBMATRIX]**

1. How useful has the virtual library been to you?
	1. Very useful
	2. Somewhat useful
	3. Not at all useful

### LIHEAP Related Websites

Please indicate which of the following LIHEAP related websites you are familiar with and which of them you use.

1. **WEBMATRIX.** Which of the following websites are you familiar with and use?

**[PN: Present the following websites within a grid allowing respondent to choose from “FAMILIAR” and “USE” for each]**

1. ACF LIHEAP Website ([www.acf.hhs.gov/ocs/programs/liheap](http://www.acf.hhs.gov/ocs/programs/liheap))
2. LIHEAP Clearinghouse Website (<https://liheapch.acf.hhs.gov/>)
3. LIHEAP Performance Management Web Tool (<https://liheappm.acf.hhs.gov/>)
4. LIHEAP Virtual Library (<https://liheappm.acf.hhs.gov/assessment/index.php#nbb>)
5. LIHEAP Navigator (https://liheappm.acf.hhs.gov/navigator)

**[PN: FOR THE WEBSITES SELECTED “USED”, ASK Q65, INSERTING WEBSITE NAME AS NOTED. IF NONE SELECTED “USED”, SKIP TO ACSI Q66]**

1. Please rate how useful **[INSERT WEBSITE]** is using a scale from 1 to 10, where 1 is *not at all useful* and 10 is *very useful*?

### ACSI

1. Overall, how satisfied are you with LIHEAP training and technical assistance? Please use a scale from 1 to 10, where 1 is *very dissatisfied* and 10 is *very satisfied*?
2. How well does LIHEAP training and technical assistance meet your expectations? Please use a scale from 1 to 10, where 1 means *falls short of expectations* and 10 means *exceeds expectations*.
3. How does LIHEAP training and technical assistance compare to your ideal training and technical assistance? Please use a scale from 1 to 10, where 1 means *not very close to the ideal* and 10 means *very close to the ideal*.

### Future Behaviors

1. How confident are you that LIHEAP training and technical assistance enhances your organization’s ability to help low-income individuals with their home energy needs? Please use a scale from 1 to 10, where 1 means *not very confident* and 10 means *very confident*.
2. To what extent has your experience with LIHEAP training and technical assistance increased your knowledge about LIHEAP regulations, policies, procedures and best practices for serving low-income individuals and families? Please use a scale from 1 to 10, where 1 means not at all and 10 means a great deal.

### Open-ended question

1. What suggestions do you have for LIHEAP to improve your satisfaction with the training and technical assistance provided? [OPTIONAL]

Those are all of the questions that we have. Thank you for taking the time to complete this survey. Please click “finish” to submit your responses and exit the survey.