Paperwork Reduction Act Burden: According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. This collection of information is optional and will assist HUD to improve the quality, relevance, and delivery of technical assistance resources. The total time required to complete this survey is estimated to average 15 minutes including the time to review instructions, gather the data needed, and complete and review the survey. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Housing and Urban Development, Office of Economic Development, 451 7th Street SW, Room 7136, Washington, D.C. 20410.

Privacy Act Statement: The Privacy Act of 1974 (P.L. 93-579) requires that you be given certain information in connection with the request for information solicited on this form. Accordingly, pursuant to the requirements of the Act, please be advised:

Authorization: This collection of information is authorized under Sec. 501 of Title V of the Housing and Urban Development Act of 1970, Public Law 91-609, which authorizes the Secretary "to undertake such programs of research, studies, testing, and demonstration relating to the mission and programs of the Department as he determines to be necessary and appropriate."

Purpose: This collection of information is necessary in order to systematically gather user feedback and outcomes data to evaluate and improve HUD's deployment and management of its technical assistance resources. This type of information on outcomes has been consistently requested by both OMB and Congressional Appropriations Committee staff.

Uses: This information collection is entirely voluntary. Any information collected may be seen and used by HUD staff that are responsible for analysis of the Community Compass Technical Assistance and Capacity Building program. Results of individual surveys will not be shared with TA providers, other TA recipients, or HUD program office staff that have assisted in coordination of the technical assistance engagement. Survey results may be shared in aggregated form with TA providers or HUD program office staff that coordinate technical assistance. Survey results may also be shared in aggregated form with other HUD stakeholders and Congress.

Disclosure: *Voluntary*. Any information collected in this information collection may be made accessible to the public and shared widely. **Please do NOT submit any personally identifiable information as part of this information collection form**, defined as any information which can be used to distinguish or trace an individual's identity, such as name, social security number, biometric records, etc. alone, or when combined with other personal or identifying information which is linked or linkable to a specific individual, such as date and place of birth, mother's maiden name, etc.

HUD DIRECT TA SURVEY: TA PROVIDER VERSION

Your organization, [TA PROVIDER], recently provided HUD-funded technical assistance to [TA RECIPIENT NAME AND ORGANIZATION] under Work Plan [WORK PLAN NUMBER].

[The following description will be pre-filled for the respondent when they receive the survey.]

TECHNICAL ASSISTANCE ENGAGEMENT DETAILS

TA RECIPIENT NAME: _____

TA RECIPIENT ORGANIZATION: _____

PERIOD OF PERFORMANCE: _XX/XX/XXXX – XX/XX/XXXX_

WORK PLAN #: _____

TA DESCRIPTION:

_____

_____

_____

We would like to ask you a few questions regarding your experience with this specific engagement and your impression of the effectiveness of the TA. Before proceeding, please confirm that you were directly involved in this TA program and feel qualified to provide general feedback on the Direct TA engagement, including questions about how well it met intended outcomes.

⊙ Yes, I was directly involved in this TA program and feel qualified to answer this survey.

⊙ No, I am not the right person to participate in this survey.

IF RESPONSE = NO, I am not the right person to participate in this survey; Please enter the name and email for an individual who had direct experience with the technical assistance provided and whom would be qualified to answer questions regarding achievement of intended outcomes and general feedback.

The correct respondent is:

_____[NAME]_____

_____[EMAIL]_____

Please complete this survey by [DATE].

If you have any questions while taking this survey, please contact [EMAIL ADDRESS].

Note: Please do not use the "Back" or "Forward" buttons on the top of your browser while in the survey. By doing so, the survey will not work properly, and your responses will not be saved.

SURVEY QUESTION 1: SATISFACTION WITH TA PROVIDED

How satisfied were you with the following TA elements:

Direct TA Elements	Very Dissatisfied	Dissatisfied	Satisfied	Very Satisfied	I don't know
Length of TA Engagement	☐	☐	☐	☐	☐
Level of TA Support Provided	☐	☐	☐	☐	☐
Focus of the TA Engagement	☐	☐	☐	☐	☐
Coordination among parties, including the TA recipient, TA provider(s), and HUD/Field Office staff	☐	☐	☐	☐	☐
Other, please specify: _____ _____ _____	☐	☐	☐	☐	☐

Please provide any additional comments related to your ratings:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

ANTICIPATED OUTCOMES FOR THIS TA ENGAGEMENT

[This section comes pre-filled for the survey respondent; Questions 2-5 will be asked for each Outcome]

At the start of this engagement, your organization and the TA recipient agreed to work toward improving the TA recipient organization's capacity in the following areas:

[List HUD Outcomes and TA provider-supplied outcome descriptions in table format]

SURVEY QUESTION 2: PROGRESS TOWARD ACHIEVING SELECTED OUTCOME(S)

To what extent has the TA recipient organization [insert outcome]? See attachment at end for a sample of how this would look for a respondent.

○ **100%-**Outcome fully achieved ○ **80%** ○ **60%** ○ **40%** ○ **20%** ○ **0%-**Outcome was not achieved ○ I don't know

SURVEY QUESTION 3: FOLLOW-UP ON FACTORS RELATED TO SUCCESS

[Note: This is a skip pattern question (dependent on score of 20-100% on Question 2)]

3A. What factors contributed to the improvement in the identified area? (select all that apply)

☐ Guidance or support provided directly by HUD
☐ Increase in funding or revenue dedicated to the area
☐ Increase in number of staff assigned to work in that area
☐ New organizational structure or new/increased leadership support for the area
☐ New political leadership
☐ Improvement in local economy or other external factors
☐ Other, please specify: _____
☐ I don't know

3B. How likely do you think it is that the TA recipient organization will sustain improvement in the identified area over the next year?

☐ Very Likely
☐ Likely
☐ Unlikely
☐ Very Unlikely
☐ I don't know/ Not applicable, because there was no improvement in the identified area

SURVEY QUESTION 4: FOLLOW-UP ON FACTORS RELATED TO BARRIERS TO SUCCESS

[Note: This is a skip pattern question (dependent on score of 0-80% on Question 2)]

In your opinion, which of the following prevented you from fully achieving this outcome? [Select all that apply]

☐ Engagement Scope was not adequate (e.g. period of support, level of support, focus of the engagement)
☐ Guidance provided directly by HUD was not adequate (please explain specific concern in the comments section)
☐ HUD response to the TA request was not adequate (e.g., delays in approving TA assignment, workplan or amendments)
☐ Level of engagement of recipient staff was not adequate
☐ Turnover in recipient staff or leadership
☐ Insufficient number of recipient staff available
☐ Inadequate support from recipient leadership/ management
☐ Decrease in or insufficient political support
☐ Decrease in funding or revenue dedicated to this area
☐ Decline in economy or other external factors
☐ Other, please specify: _____
☐ I don't know

Please provide any additional comments related to factors affecting progress toward outcomes:

_____
_____
_____
_____
_____
_____

SURVEY QUESTION 5: STATUS OF THE TECHNICAL ASSISTANCE

Are you continuing to provide support on this issue to this TA recipient organization as part of a follow-up TA engagement?

- ☐ Yes
- ☐ No
- ☐ I don't know

Please explain your response:

_____
_____
_____

SURVEY QUESTION 6: RECOMMENDATIONS FOR IMPROVING HUD'S TA PROGRAM

Please provide any recommendations for ways to improve HUD's technical assistance program:

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

EXAMPLE SURVEY QUESTION 2 – TA PROVIDER RESPONDENT VIEW

SURVEY QUESTION 2: PROGRESS TOWARD ACHIEVING SELECTED OUTCOME(S)

Outcome	Outcome Description
Improved capacity to design system-wide strategies that address community needs (e.g., designed innovative multi-disciplinary strategies, designed coordinated place-based development to leverage neighborhood impacts)	Provide Technical Assistance and Capacity Building to the Puerto Rico Public Housing Administration and the Puerto Rico Department of Housing to include: preparation of a redevelopment/Repositioning Plan for the 9 priority sites identified by PRPHA and HUD and to provide recommendations for prioritizing modernization and development projects.

To what extent has the TA recipient organization [improved capacity to design system-wide strategies that address community needs]?

☐ 100% -Outcome was fully achieved

☐ 80%

☐ 60 %

☐ 40%

☐ 20%

☐ 0%-Outcome was not achieved

☐ I don't know

Outcome	Outcome Description
Improved coordination and alignment with other community or regional plans (e.g., HUD plans aligned with plans of other HUD or federal programs, local and regional government agencies, service providers, or nonprofit organizations)	Provide Technical Assistance and Capacity Building to the Puerto Rico Public Housing Administration and the Puerto Rico Department of Housing to include: recommendations regarding PRPHA's Five (5) Year Plan, including alignment with the strategic plan from regional advisory board and the city's Five (5) Year Plan.

To what extent has the TA recipient organization [improved coordination and alignment with other community or regional plans]?

☐ 100%-Outcome was fully achieved

☐ 80%

☐ 60%

☐ 40%

☐ 20%

☐ 0%-Outcome was not achieved

☐ I don't know