**TITLE OF INFORMATION COLLECTION:** Infant Toddler Specialist Network Task 3 Feedback Form: Training for Trainers (TFT)

**OMB Control No: 0970-0401**

**Expiration date: 05/31/2021**

# Step One: At the TFT participants will fill out the form below.

**Instructions**

The State Capacity Building Center is collecting feedback regarding its Training for Trainers (TFT) technical assistance (TA) services provided by the Infant Toddler Specialist Network. We would greatly appreciate your voluntary, anonymous input. We will use your feedback to inform and improve the work of the State Capacity Building Center.

To provide feedback, please respond using this form. The survey will only take a few minutes and all responses are anonymous.

**NOTE: THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13).** Public reporting burden for this collection of information is estimated to average 8 minutes for this step of the response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. 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.

**Technical Assistance Training for Trainers Activity: [NAME OF EVENT]  
Event Date: [DATE OF EVENT]**

Please select your role:

* Direct child-serving practitioner (e.g., child care, preschool, home visiting, teacher, family child care)
* State-level professional
* Training and technical assistance professional
* Consultants (mental health, health, etc.)
* Other. Please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

| Please indicate the extent to which you agree with the statements below. | | Strongly Agree | Agree | Disagree | Strongly Disagree | Not Applicable |
| --- | --- | --- | --- | --- | --- | --- |
| Content | The event purpose and learning objectives were clear. | 1 | 2 | 3 | 4 | N/A |
| The content provided was clear. | 1 | 2 | 3 | 4 | N/A |
| The content provided was useful (i.e. provided you with practical information or a practical perspective to inform your work). | 1 | 2 | 3 | 4 | N/A |
| The content provided was relevant to my current work (i.e., pertinent to your current work). | 1 | 2 | 3 | 4 | N/A |
| The content provided was influential (i.e., influenced your thinking; gave you “a-ha” moments; enabled you to think in a different way about your system(s), your partnerships, or other critical aspects of your work; and/or helped you analyze, synthesize, or integrate information in a new way.) | 1 | 2 | 3 | 4 | N/A |
| Presenters | The presenter was well-prepared. | 1 | 2 | 3 | 4 | N/A |
| The presenter(s) had robust knowledge and experience with the content. | 1 | 2 | 3 | 4 | N/A |
| The presenter(s) was able to respond appropriately to my questions. | 1 | 2 | 3 | 4 | N/A |
| Participant | I increased my awareness and knowledge of the content provided. | 1 | 2 | 3 | 4 | N/A |
| I feel ready to apply the new content to my work. | 1 | 2 | 3 | 4 | N/A |
| Overall, the event was relevant and fit my needs. | 1 | 2 | 3 | 4 | N/A |

**If you marked disagree or strongly disagree above or if you have any comments, please take a moment to give us a little more information.   
  
  
  
Which aspect(s) was most useful for you and why?   
  
  
  
How could we improve this work to better meet your needs?   
  
  
  
What other topics for technical assistance would be useful to you?**  
Thank you for participating and we hope the content provided met your expectations.

Paperwork Reduction Act Statement: This collection of information is voluntary and will be used to collect participant feedback to shape future OCC technical assistance services. Public reporting burden for this collection of information is estimated to average 8 minutes per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. 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 and expiration date for this collection are OMB #0970-0401; Exp 5/31/2021. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to J.R. Sayoc, j.r.sayoc@icf.com

# Step Two: Three to Six Months after the Training: Feedback Form to TFT Participants

**Instructions**

The State Capacity Building Center is collecting feedback regarding its Training for Trainers (TFT) technical assistance (TA) services provided by the Infant Toddler Specialist Network. We would greatly appreciate your voluntary, anonymous input. We will use your feedback to inform and improve the work of the State Capacity Building Center.

To provide feedback, please respond using this form. The survey will only take a few minutes and all responses are anonymous.

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**Technical Assistance Training for Trainers Activity: [NAME OF EVENT]  
Event Date: [DATE OF EVENT]**

**Please select your role:**

* Direct child-serving practitioner (e.g., child care, preschool, home visiting, teacher, family child care)
* State-level professional
* Training and technical assistance professional
* Consultants (mental health, health, etc.)
* Other. Please describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Since the training, about how many people in each of the groups have you used this content with? (If someone is in more than one group, please only count them once.)**

| **Group** | **Number of People** |
| --- | --- |
| Teachers in centers |  |
| Center directors |  |
| Other center staff (directors, supervisors, coaches) |  |
| Family child care providers |  |
| Trainers |  |
| TA providers (e.g., coaches, IT specialists) |  |
| Families |  |
| Others (please explain) |  |

1. **Since the training, we would like to hear about how you’ve used this content. How many times have you used the Training for Trainers content to inform:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | 0 times | 1 - 5 times | 6- 10 times | Over 10 times |
| TA resource | 1 | 2 | 3 | 4 |
| Coaching resource | 1 | 2 | 3 | 4 |
| Curriculum development | 1 | 2 | 3 | 4 |
| PowerPoint in a training | 1 | 2 | 3 | 4 |
| Training new coaches using the PowerPoint | 1 | 2 | 3 | 4 |
| Other | 1 | 2 | 3 | 4 |

If you selected other, please describe:

1. **What is working well for you following your participation in the Training for Trainers?**
2. **Is there other technical assistance that would be helpful in implementing relationship based infant toddler child care in your state/territory?**

Thank you for participating and we hope the content provided met your expectations.

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# Step Three: After the TAT Entry is Closed: Key Respondent Interviews

This interview will be conducted with the stakeholder the ITS worked with to plan the TFT.

The RA will check in with the ITS Evaluation lead and the ITS to confirm the selection of the stakeholder to participate. Next, an email will go to the stakeholder to request participation. That email will say:

The State Capacity Building Center is collecting feedback regarding its Training for Trainers (TFT) technical assistance (TA) services provided by the Infant Toddler Specialist Network. We would greatly appreciate your voluntary, anonymous input. We will use your feedback to inform and improve the work of the State Capacity Building Center.

To provide feedback, we are requesting time for a short telephone interview with you. Please let us know if we may call upon you by contact us at …[insert name of interviewer and contact information].

Sincerely,

The State Capacity Building Center

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**Protocol: Hello, my name is \_\_\_\_\_ and I am from the State Capacity Building Center. Thank you for agreeing to answer a few questions about your experience with the Training for Trainers conducted on\_\_\_\_\_\_**

## Questions

1. **What worked well with the Training for Trainers?**
2. **What would you have done differently with the Training for Trainers?**

1. **How was the TFT used by others in your state?**
   1. As a resource?
   2. Was the PowerPoint used by others for training?
2. **Have you or participants received any other follow-up TA from the Infant Toddler Specialists of the State Capacity Building Center after the Training for Trainers?**
3. **Is there other technical assistance that would be helpful in implementing relationship based infant toddler child care in your state/territory?**

**Thank you for participating!**

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