

## Appendix B

OMB Control No. 0970-0401  
Expiration Date: 05/31/2021

### PATH Technical Assistance Evaluation Feedback Form

**Public Burden Statement:** 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 control number for this project is 0970-0401. Public reporting burden for this collection of information is estimated to an average of 30 minutes per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to Anne Bergan, Office of Child Care, Administration for Children and Families, HHS, Mary E. Switzer Building 330 C Street SW, Suite 3014F, Washington, DC 20024.

**Use of Data:** Thank you for providing feedback about the effectiveness of the TA you received. This form should take approximately 30 minutes to complete. Your feedback provides valuable information about the effectiveness of the TA provided by PATH. We analyze and review the results with rigor and incorporate your suggestions to continuously improve the quality of TA.

Tribal Home Visiting Team Role				
<b>Please indicate if the Evaluation Feedback Form was completed as a group/team shared process or by one lead person.</b>	<input type="checkbox"/> Individual <input type="checkbox"/> Team			
<b>For those who participated in completing this form, please select the number of individuals in each home visiting role category.</b>				Grantee Director/Manager/Coordinator Grantee Data/ Evaluation Staff Grantee Consultant Grantee Grants Management/Fiscal Staff Home Visitor Other (please specify) _____
<b>How long have you been in this role?</b> (skip logic if one "lead person" completed the form)	<input type="checkbox"/> Less than 1 year <input type="checkbox"/> 3-5 years <input type="checkbox"/> 1-3 years <input type="checkbox"/> More than 5 years			
Provision of TA				
<b>In the last 12 months, did your program participate in any TA related to these topics (select all that apply)?</b>	<input type="checkbox"/> Tribal/Organizational Leadership Support <input type="checkbox"/> Quality Workforce & Quality Workforce Management <input type="checkbox"/> Fidelity Monitoring/Model Fidelity <input type="checkbox"/> Community & Partner Engagement <input type="checkbox"/> Recruitment, Enrollment & Engagement of Families <input type="checkbox"/> Dissemination <input type="checkbox"/> Early Childhood Systems Building <input type="checkbox"/> Policies and Procedures <input type="checkbox"/> Sustainability <input type="checkbox"/> Adaptation, Enhancements and Supplements <input type="checkbox"/> Other (e.g., breastfeeding support for new mothers, depression, substance abuse) (please specify) ____			
<b>If you did not utilize TA, please explain why (e.g., your program did not have needs).</b>				
TA Outcomes				
<b>To what extent has your team improved their knowledge related to this topic due to PATH TA?</b>				Tribal/Organizational Leadership Support
				Quality Workforce & Quality Workforce Management
				Fidelity Monitoring/Model Fidelity
				Community & Partner Engagement

	Recruitment, Enrollment & Engagement of Families							
	Dissemination							
	Early Childhood Systems Building							
	Policies and Procedures							
	Sustainability							
	Adaptation, Enhancements and Supplements							
	Other (please specify) _____							
<b>To what extent has your program implemented new strategies or made changes related to this topic due to PATH TA?</b>	Tribal/Organizational Leadership Support							
	Quality Workforce & Quality Workforce Management							
	Fidelity Monitoring/Model Fidelity							
	Community & Partner Engagement							
	Recruitment, Enrollment & Engagement of Families							
	Dissemination							
	Early Childhood Systems Building							
	Policies and Procedures							
	Sustainability							
	Adaptation, Enhancements and Supplements							
	Other (please specify) _____							
<b>To what extent has PATH TA assisted you in achieving your implementation plan goals related to this topic?</b>	Tribal/Organizational Leadership Support							
	Quality Workforce & Quality Workforce Management							
	Fidelity Monitoring/Model Fidelity							
	Community & Partner Engagement							
	Recruitment, Enrollment & Engagement of Families							
	Dissemination							
	Early Childhood Systems Building							
	Policies and Procedures							
	Sustainability							
	Adaptation, Enhancements and Supplements							
	Other (please specify) _____							
<b>Meeting TA Needs</b>								
<b>How helpful are these TA method(s)?</b>	<b>Peer Calls</b>	<b>On-site or In-Person TA</b>	<b>PATH Resources &amp; Tools</b>	<b>Individual TA by your TA Specialist Over the Phone or Video</b>	<b>Working Sessions</b> (insert working session offered)	<b>Virtual Site Visit TA</b>	<b>All Grantee Meeting (AGM) and Regional Meetings</b>	<b>Virtual Learning Opportunities</b> (insert opportunities offered)
<b>If you received TA in these topic areas, to what extent did PATH meet your TA needs?</b>	Tribal/Organizational Leadership Support							
	Quality Workforce							
	Fidelity Monitoring/Model Fidelity							
	Community & Partner Engagement							

	Recruitment, Enrollment & Engagement of Families			
	Dissemination			
	Early Childhood Systems Building			
	Policies and Procedures			
	Sustainability			
	Adaptation, Enhancement and Supplement			
	Other (please specify) _____			
<b>What TA experiences with PATH would you say have been the most successful in helping your program meet the grant requirements? Why?</b>				
<b>Briefly describe unmet TA needs.</b>				
<b>Please provide additional information to help explain your responses.</b>				
<b>Understanding of Tribes/Tribal Communities and Quality Relationships</b>				
<b>PATH demonstrates a strong understanding of:</b>				
Tribal Home Visiting implementation.				
how to effectively connect us with peers through various TA methods.				
how to support us in achieving our home visiting program goals.				
how to respect the unique positions of tribes.				
the strength of our tribal community/organization.				
how evidence-based home visiting models are best implemented in tribal communities.				
the unique positions of home visiting within tribes and tribal communities.				
Please provide additional information to help explain your responses.				
<b>My Path Specialist:</b>				
engages in inquiry to better understand our needs before engaging in TA.				
is responsive to our unique needs.				
is knowledgeable about our program.				
engages in joint problem-solving.				
demonstrates feelings of care and empathy.				
has built a trusting and satisfactory relationship with our team.				
is approachable, and we feel comfortable asking for support.				
Overall, we are satisfied with our TA Specialist.				
Is there more you would like to share about your TA Specialist?				
<b>Satisfaction with TA and Timeliness of TA</b>				
Overall, I am satisfied with PATH TA.				
In the past 12 months, TA was delivered when it was relevant for your program.				
How can PATH improve TA to better support your successful home visiting implementation?				
Please provide additional information to help explain your responses.				