# Feedback Form: State Capacity Building Center Individualized Technical Assistance

# TITLE OF INFORMATION COLLECTION: State Capacity Building Center Feedback Collection for Individualized Technical Assistance

**OMB Control No: 0970-0401**

**Expiration date: XX/XX/XXXX**

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 15 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. Date: XX/XX/XXXX. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to Caroline Faux, caroline.faux@icf.com.

# Email Invitation/Script

Subject Line: Your Feedback on [Event Name]

Good Morning/Afternoon,

The State Capacity Building Center is collecting feedback regarding its technical assistance (TA) services. According to our records, you recently participated in the State Capacity Building Center [NAME OF EVENT]. We would greatly appreciate your input and will use your feedback to inform future technical assistance efforts. To provide feedback, please respond using this form: [link to survey monkey]. The brief voluntary survey will only take a few minutes and all responses are anonymous.

If you would like to provide feedback, please respond to the form above by [date].

Thank you!

The State Capacity Building Center

**Feedback form**

**Technical Assistance Activity: State Capacity Building Center [FILL IN PROJECT]  
State: [PROVIDE DROP DOWN]  
Activity Date: [DATE(S) OF EVENT]**

**Responsiveness**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please indicate the extent to which you agree with the statements below. | | Strongly Agree | | Agree | Disagree | Strongly Disagree | | Not Applicable |
| The TA Specialist responds to our needs. | 1 | | 2 | | 3 | 4 | N/A | |
| The TA Specialist helps us solve problems. | 1 | | 2 | | 3 | 4 | N/A | |
| The TA Specialist provides timely services. | 1 | | 2 | | 3 | 4 | N/A | |

**Quality of Products and Services**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please indicate the extent to which you agree with the statements below. | | Strongly Agree | | Agree | Disagree | Strongly Disagree | | Not Applicable |
| The TA Specialist provides the services and/or products we requested. | 1 | | 2 | | 3 | 4 | N/A | |
| The products and/or services are of high quality. | 1 | | 2 | | 3 | 4 | N/A | |

**Quality of TA Specialists**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please indicate the extent to which you agree with the statements below. | | Strongly Agree | | Agree | Disagree | Strongly Disagree | | Not Applicable |
| We are satisfied with the TA Specialist’s approach to working with us. | 1 | | 2 | | 3 | 4 | N/A | |
| The TA Specialist has the experience, knowledge, and ability to support this work. | 1 | | 2 | | 3 | 4 | N/A | |
| The TA Specialist understands our state context and culture. | 1 | | 2 | | 3 | 4 | N/A | |

**Work with the TA Specialist Related to Project Planning, Coordination, and Implementation**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please indicate the extent to which you agree with the statements below. | | Strongly Agree | | Agree | Disagree | Strongly Disagree | | Not Applicable |
| The TA Specialist is helping us identify priorities and clear action steps for our work. | 1 | | 2 | | 3 | 4 | N/A | |
| The TA Specialist is suggesting strategic next steps and/or helping us begin to implement improved strategies. | 1 | | 2 | | 3 | 4 | N/A | |
| The TA Specialist is connecting us to resources (internal or external) that will help us more easily access answers/ solutions in the future. | 1 | | 2 | | 3 | 4 | N/A | |
| The TA Specialist has influenced our overall approach to our work. | 1 | | 2 | | 3 | 4 | N/A | |

**Technical Assistance Coordination**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Please indicate the extent to which you agree with the statements below. | | Strongly Agree | | Agree | Disagree | Strongly Disagree | | Not Applicable |
| The TA Specialist has coordinated TA with our State Systems Specialist to support our project. | 1 | | 2 | | 3 | 4 | N/A | |
| The TA Specialist has coordinated TA with additional TA Centers (e.g., the ACF National | 1 | | 2 | | 3 | 4 | N/A | |

**How likely are you to use the [insert ANY OF THE SCBC PRIORITY RESOURCES HERE resource(s) that were shared here] shared in the TA?**

* Very unlikely
* Unlikely
* Somewhat likely
* Very likely
* Already using this resource
* *[If already using this resource]* Please give 1-2 examples of how you used the resource
* *[If unlikely or very unlikely]* Why are you unlikely to use the resource(s) shared in the TA?

[THIS QUESTION IS ONLY PROVIDED TO SELECTED TA THAT INVOLVES SYSTEMS BUILDING AN CAPACITY BUILDING SERVICES.]

**This work involves support for your systems and capacity building efforts. Thinking about your capacity and systems building work in the context of this technical assistance work, do you need more attention to any of the capacity factors? Select all that apply.**

* **Culture & Climate** (The Management Team has the culture and climate capacity necessary for developing and implementing their identified project goals and strategies)
* **Engagement and Partnerships** (The Management Team has the partnerships and engagement capacity necessary for implementing the project, and achieving success. Decisions are informed by and responsive to the needs and interests of a broad array of stakeholders)
* **Financial Resources** (The Management Team has the capacity to leverage and maximize all available resources necessary for implementing their identified project. The Management Team considers how financing decisions support and incentivize system building goals connected with the project)
* **Infrastructure** (The Management Team has the infrastructure capacity necessary for implementing their identified project, including leadership, vision and cohesion. The management team is working together according to shared understanding of common goals and what their roles and functions are within the project and system. The management team has established processes for ongoing communication, coordination, and decision-making as they relate to achieving their shared goals)
* **Knowledge & Skills** (The Management Team has the systems leadership capacity necessary for implementing their identified project)
* Other (please specify)

[THESE QUESTIONS ARE ONLY PROVIDED TO SELECTED TA THAT INVOLVES LEADERSHIP DEVELOPMENT]

LEAD Individual Professional Development Plan

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Please indicate the extent to which you agree with the statements below. | Strongly Agree | Agree | Disagree | Strongly Disagree | Not Applicable |
| I am satisfied with the priorities identified for my work with the Lead Specialist through the Individual Professional Development Plan. | 1 | 2 | 3 | 4 | N/A | |
| The LEAD Specialist has helped me implement priorities and action steps related to the Individual Professional Development Plan. | 1 | 2 | 3 | 4 | N/A | |
| The services I am getting from the LEAD Specialist are assisting me in developing my knowledge as a CCDF leader. | 1 | 2 | 3 | 4 | N/A | |
| The services I am getting from the LEAD Specialist are assisting me in developing my effectiveness as a CCDF leader. | 1 | 2 | 3 | 4 | N/A | |
| The services I am getting from the LEAD Specialist are helping me feel supported in my role as a CCDF leader. | 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. We also welcome any general comments you have.**

**What factors, if any, are preventing you from using what you are learning as part of this technical assistance support? (Please select all that apply)**

* Competing priorities
* COVID-19
* Lack of authority or influence to gain support for this effort
* Lack of legislative or regulatory authority needed to address issues
* Lack of state policies or processes to support this effort
* Lack of support/guidance from state leadership
* Lack of time
* Limited funds or other resources to support this effort
* Need for more TA and/or professional development
* Need more time to build buy-in from other stakeholders
* Need more time to build readiness among state leaders to support this effort
* Not enough staff
* What I've learned is not applicable to my work
* Other (Please describe): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* I have not faced any barriers

**What supports or resources would you need to overcome these barriers?**

**Which aspect(s) was most useful for you and why?**

**How could we improve this work to better meet your needs?**

**What other topics or resources would you like to see the State Capacity Building Center address?**  
**Thank you for participating!**