

# Tailored Services Brief Project Survey



Capacity Building  
CENTER FOR STATES

**PURPOSE:** For each tailored service brief project led by the Center for States, a survey will be created in on-line survey software to gather feedback that can inform outcome reporting

OMB #: 0970-0XXXX  
Expiration Date: XX/XX/XXXX

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to gather feedback on capacity building products and services to better meet the needs of child welfare professionals. Public reporting burden for this collection of information is estimated to average 8 minutes per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The control number for this project is 0970-XXX. The control number expires on XX/XX/XXXX. If you have any comments on this collection of information, please contact Beth Claxon, ACF, Administration on Children, Youth and Families by e-mail at [Beth.Claxon@acf.hhs.gov](mailto:Beth.Claxon@acf.hhs.gov).

## Instruction for Survey Development and Administration

For each tailored service brief project led by the Center for States, a survey will be created in on-line survey software to gather feedback that can inform outcome reporting and CQI efforts. Given the tailored nature of each project, it is important to be able to get feedback from recipients without creating undue burden by answering excessive questions that only marginally apply. To address this, the survey will be customized to the unique information needs of each project to ensure low burden while informing high quality service provision. When creating each on-line survey, the evaluation team will use the required questions listed below and select up to 10 context specific optional questions that can be added to the survey, as needed. There are two types of optional questions. The first is a set of questions that will be selected and modified based on the intended outcomes from workplanning. A minimum of two question will be asked with the option of up to 9 questions. The second are additional satisfaction and CQI questions that can be added as needed based on specific project needs.

It is expected that each survey will have no more than 34 questions, including 24 required questions and a maximum of 10 optional questions, with an average burden of 8 minutes.

### Survey Introduction Text

The Capacity Building Collaborative is committed to continuously improving the relevance and utility of services provided. Please take a few minutes to provide your perspective on Center support between [start date] and [end date] for the [insert project title] project. Your comments will be incorporated into future activities planning and will help strengthen Capacity Building Collaborative services to better meet your needs. Your participation in this survey is entirely voluntary, and your responses will be reported in the aggregate. The survey should take about 10 minutes to complete. If you have any questions, please contact Christine Leicht, Capacity Building Center for States Evaluation Lead at [Christine.Leicht@icf.com](mailto:Christine.Leicht@icf.com).

### Outcome Questions

Please indicate the degree to which you agree with the following statements.

As a result of this project, ...	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Agree	Strongly Agree	NA	Don't Know
1. My agency has [insert items from desired change].	SD	2	3	4	5	6	SA	NA	DK
2. I expect my agency's child welfare practice to be positively affected by our work on this tailored service.	SD	2	3	4	5	6	SA	NA	DK

3. Please tell us how the work that you have done through this tailored service project has impacted your agency.

### Satisfaction Questions

Please indicate the degree to which you agree with the following statements.

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Agree	Strongly Agree	NA	Don't Know
4. Center representatives provided the subject-matter expertise needed to support our work.	SD	2	3	4	5	6	SA	NA	DK
5. Our team was satisfied with how Center representatives integrated capacity building and implementation activities into our discussion.	SD	2	3	4	5	6	SA	NA	DK
6. Center representatives had a good understanding of our agency/community needs.	SD	2	3	4	5	6	SA	NA	DK
7. Representatives from the Center communicated with us in a way that respected our values and the context of our agency.	SD	2	3	4	5	6	SA	NA	DK
8. Our ideas and preferences about the service delivery were respected.	SD	2	3	4	5	6	SA	NA	DK
9. This Center's process was flexible enough to meet the needs of our agency.	SD	2	3	4	5	6	SA	NA	DK
10. Center representatives engaged our agency in exploring and/or selecting strategies, activities, and tools that are aligned with our (agency/court) needs.	SD	2	3	4	5	6	SA	NA	DK
11. The knowledge and skills our agency acquired while partnering with the Center are directly applicable to our	SD	2	3	4	5	6	SA	NA	DK

	Strongly Disagree	Disagree	Somewhat Disagree	Neither Agree or Disagree	Somewhat Agree	Agree	Strongly Agree	NA	Don't Know
work in other areas.									
12. My agency is considering using a similar change process/implementation process in other initiatives.	SD	2	3	4	5	6	SA	NA	DK
13. I would recommend working with Center to other jurisdictions.	SD	2	3	4	5	6	SA	NA	DK
14. The Center's services were well aligned with the needs of our agency/tribe/court.	SD	2	3	4	5	6	SA	NA	DK
15. Overall, our team was satisfied with the services we received.	SD	2	3	4	5	6	SA	NA	DK
16. Our jurisdictional team understood the project scope and specific team member roles and responsibilities.	SD	2	3	4	5	6	SA	NA	DK
17. We received an appropriate amount of contact and support during the tailored service process.	SD	2	3	4	5	6	SA	NA	DK
18. Center representatives facilitated discussions in an open environment that encouraged all team members to share their perceptions of initiative progress.	SD	2	3	4	5	6	SA	NA	DK
19. Our agency identified strategies for sustaining and applying what we have achieved through the project, and the commitments needed for that sustainment.	SD	2	3	4	5	6	SA	NA	DK
20. In general, our agency's knowledge and skills about the topic(s) addressed by the tailored service have increased.	SD	2	3	4	5	6	SA	NA	DK

21. Could your experience with the Center have been improved? If yes, please describe how your experience with the Center could have been improved.

22. Please select the various ways you [have already applied the information, plan to apply the information] from the peer exchange in your work. (Check all that apply.)

- Support program improvement
- Support policy development
- Provide information to clients/families
- Share with peers
- Support public awareness/advocacy

- Grant writing/Fundraising
- Train staff/colleagues
- Conduct research & evaluation
- My own professional development (e.g., increased knowledge)
- Other (Please describe)

22a. [If “Provide information clients/families”, “Share with peers”, or “Train staff/colleagues” was selected] Please provide a specific example.

22b. [If ‘train staff/colleagues’ is selected] In what setting will this information be used?

- Formal Training with Co-Workers
- Informal Training with Co-Workers
- Distribute Materials to Co-Workers
- Classroom/University
- Train the Trainer
- Other (Please describe)

## Demographic Questions

23. Which best describes your organization?

- State Child Welfare Agency
- County Child Welfare Agency
- Territorial Child Welfare Agency
- Tribal Child Welfare Agency
- State or County Court/Legal System
- Tribal Court/Legal System
- Private or Community-based Child Welfare Agency
- Local Government/Tribal Council
- Law Enforcement Organization
- Primary Care/Health Care Services Provider
- Behavioral/Mental Health Services Provider
- Substance Abuse Services Provider
- Domestic Violence Services Provider
- Juvenile Justice Organization
- Primary/Secondary Education
- College/University
- Technical Assistance Provider
- Federal Government
- Other (please describe): \_\_\_\_\_

24. What is your primary role?

### CW professional response options

- Agency Director/Deputy Director
- Program/Middle Manager
- Supervisor
- Caseworker/Direct Practice Worker/Frontline Staff

- Parent Partner
- Other (please describe): \_\_\_\_\_

Court professional response options

- CIP or TCIP Director/Coordinator
- CIP or TCIP Staff
- Judge
- Attorney for CW agency
- Attorney for Parent
- Attorney for Child
- Attorney Guardian Ad Litem
- Court Administrative Officer
- Court/Attorney Data Manager/IT Staff
- Court Appointed Special Advocate/Non-attorney GAL/Advocate
- Court Case Worker/Social Worker
- Other (please describe): \_\_\_\_\_

Education professional response options

- Dean/Director/Administrator
- Teaching Faculty
- Training Academy Leadership/Staff
- Research Faculty/Staff (non-teaching role)
- Student
- Other (please describe): \_\_\_\_\_

25. Which of the following best describes your primary work responsibilities? (Select 3)

- Administration
- Workforce Development/Training
- Continuous Quality Improvement/Evaluation
- Information Technology/SACWIS/Data Systems
- Indian Child Welfare Act
- Primary or Secondary Prevention
- Child Protective Services
- In-home Services/Promoting Safe and Stable Families
- Foster Care/Placement/Licensing/Reunification
- Adoption/Guardianship
- Youth in Transition/Chafee/Independent Living Programs
- Other (please describe): \_\_\_\_\_

## Optional Questions

Outcome Questions [6pt scale plus NA]

- OPTIONAL My agency has new or improved resources.
- OPTIONAL My agency has new or improved our infrastructure
- OPTIONAL My agency has increased our knowledge and skills in [inserts sub dimension].
- OPTIONAL My agency has improved engagement and partnership
- OPTIONAL My agency has improved culture and climate.
- OPTIONAL My agency has [insert items from desired change].
- OPTIONAL My agency has [insert items from desired change].

## Satisfaction

- Open Ended Questions
  - What additional assistance do you or your organization need with this topic? (optional)
  - What additional information or resources can you recommend on this topic? (optional)
  - Do you have any additional comments? (optional)
  - Was [Title of Activity 1] helpful? If so, why, and if not, how can they be improved? (optional)
- 6pt scale plus NA
  - Our agency leadership was kept informed or remained involved throughout service delivery.
  - Our agency had a strong working relationship with the Center team.
  - Our project team was able to make decisions to keep the project moving forward.
  - The Center team was a good fit with our agency.
  - [Specific Innovation] helped me stay engaged during this <service/event>.
  - [Specific Innovation] helped the <service/event> achieve its goals
  - [Specific Innovation] encouraged me to interact with others.
  - [Specific Innovation] improved my ability to learn what was shared.
  - I am more likely to participate in a future [service/event] if I knew [Specific Innovation] was going to be utilized.
  - [Specific Innovation] enhanced the overall quality of the <service/event>.
  - I would participate in [service type] using [Specific Innovation] again.
  - The Center helped us to identify and set milestones and measurable outcomes to track progress and success.
  - The Center helped us to gather, identify and/or use information/data to document progress, and make decisions and improvements as needed.

## PM Questions [6pt scale plus NA]

- Center representatives conducted outreach to our agency in a variety of ways that capitalized on previous engagements and efforts.
- Center representatives provided appropriate, timely responses to our agency communications.
- Center representatives brought clarity to conversations about capacities, processes, and services.
- The Center helped create a team of representatives from all partner agencies that actively participated and collaborated to promote successful engagement.
- The team operated in a way that maximized effectiveness of individual and collective efforts.
- The team operated cohesively in setting and accomplishing tasks, providing constructive feedback, and decision-making.
- Team members engaged in communications and supported the team's continuous learning by sharing their own knowledge and experiences.
- The partnership fostered mutual exploration of expectations through open dialogue and creation of a realistic scope of work for achieving shared goals.
- Center representatives encouraged an atmosphere of individual and organizational self-reflection and pursued opportunities for continuous quality improvement.
- Center representatives engaged our agency in exploring and selecting evidence-based strategies, activities, and tools that are relevant to our state's contexts.
- Center representatives integrated CAPACITY BUILDING AND EFFECTIVE IMPLEMENTATION into our discussions in an appropriate manner.
- Center representatives helped our agency increase our ability to monitor progress and make data-driven decisions.

- Center representatives worked with the team to ensure reflective conversations about the project occurred regularly, including discussion of data about progress.
- Center representatives worked with the team to ensure our agency was focused on planning the transition from the beginning of the process.
- Center representatives helped our agency to reach a consensus on transitioning and closing services, while being respectful of individual opinions.
- The transition process included a reflective discussion about lessons learned, strengths and challenges, and suggestions for improvement.
- If services ended prematurely, or inconsistently with the proposed plan, Center representatives discussed the possibility of reengagement and supported an amicable closure.