Needs Sensing Form

OMB #:

**Date of Expiration:**

**This form lists several questions that might be selected for a typical focus group. It is not intended that a focus group would include all of these questions. Instead, this serves as a menu of potential questions from which to choose. Focus group sessions will not last longer than 90 minutes.**

**Introduction**

*To help OJJDP’s NTTAC better serve the field, we would like to learn more about [XX]. The purpose of this focus group is to [XX]. (Briefly introduce OJJDP and OJJDP’s NTTAC.) Can everyone introduce themselves? Please give us your name and tell us what you do. (May include poll questions for virtual focus groups that include demographic questions such as: field/profession in which you work, years worked in the field/profession, state in which you work.)*

*This focus group involves having you answer a few questions to learn about your experiences with [XX], what you thought was particularly useful/helpful, what are some best practices in this area, and how OJJDP’s NTTAC can help the field deliver [XX]. There are no wrong answers—we want your honesty, and we expect differences of opinion. There are also no wrong questions, so please feel free to speak up. The only limitation is to help us stay on time so we can cover all our questions. We will use your input, along with input from other groups like this around the country, to make decisions about [XX], including [XX].*

*Participation in this focus group is voluntary. We will protect the privacy of your information in accordance with the Federal Privacy Act, and we will protect the confidentiality of your responses using procedures we have in place. We will de-identify people’s answers in anything we report. We are recording the session to be sure our notes are accurate, but again, we will not connect any names to any comments. Please let me know if there are any concerns about this process.*

*If you have any questions about this focus group, please contact [XX]. Any questions before we begin?*

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| **Needs Sensing Question Bank** |
| **Utilization of OJJDP’s NTTAC Services** |
| 1. Have you utilized OJJDP’s NTTAC to host any trainings/meetings?
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| 1. If you have not used OJJDP’s NTTAC to host trainings/meetings, what are your barriers to using this resource?
 |
| 1. How many OJJDP’s NTTAC-hosted webinars/trainings have you attended in the last year?
 |
| 1. Have you contacted the OJJDP TTA Help Desk in the past year?
 |
| 1. Have you used TTA360 to submit your training and technical assistance needs in the past year?
 |
| 1. Are you subscribed to receive OJJDP’s NTTAC listserv messages?
 |
| 1. How many OJJDP TTA Provider Collaboration Meetings have you attended in the past year?
 |
| 1. If you have not attended an OJJDP TTA Provider Collaboration Meeting, what are your barriers to attending?
 |
| 1. How many individuals from your organization generally attend the TTA Provider Collaboration meetings?
 |
| 1. What topics would be useful to you to highlight in a TTA Provider Collaboration meeting?
 |
| 1. What suggestions do you have for improving TTA Provider Collaboration meetings?
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| **Partnerships/Collaboration** |
| 1. Which agency or organization serves as the lead agency and coordinator [for XX purpose]?
 |
| 1. Is there a [current/pre-event] MOU in place? Who are the members of the [response team/coalition/group], and how often do they meet? Is there documentation that supports the outcome of each meeting?
 |
| 1. Which partnerships are most critical in the planning process?
 |
| 1. What role does/did local government and community-based organizations such as [mental health, interfaith councils, victim services agencies, XX] play in [XX]?
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| **Successes, Challenges, Barriers, and Lessons Learned** |
| 1. When you think of a “successful” [XX], what comes to mind?
 |
| 1. How would you define success for the [XX]? Any promising strategies you would like to share?
 |
| 1. What would you do to make your [task force, group, organization] more “successful” at its work?
 |
| 1. What are the most difficult challenges for [XX]?
 |
| 1. Were there any gaps in services that impacted [XX]? What were they, and how were they addressed?
 |
| 1. Were there any legal, statutory, legislative, or policy issues that impacted [XX]?
 |
| 1. What were the challenges to establishing [XX] (e.g., timelines, identifying a location, participating agencies and organizations, communication)?
 |
| 1. Overall, based on your experience with [XX], what were the greatest lessons learned?
 |
| 1. What would you consider as best practices with [XX]?
 |
| 1. What is the most important thing for other communities to know in [XX]?
 |
| **Satisfaction** |
| 1. How satisfied were you with your overall experience with OJJDP’s NTTAC?
 |
| 1. How satisfied were you with the overall quality of support you received from OJJDP’S NTTAC staff?
 |
| 1. How has working with OJJDP’S NTTAC improved your [insert type of skill(s) related to training/event/tool objectives]?
 |
| 1. What were your expectations prior to [insert TTA]?
 |
| 1. How well were these expectations met?
 |
| 1. Identify three things you [plan to do or change] [did] as a result of the [insert TTA] you received. Please be as specific as you can (e.g., actions or changes in policy, practice, procedures, or programming).
 |
| 1. What barriers [do you anticipate facing] [have you experienced] in [insert response from previous question]?
 |
| 1. Was there anything not provided by [insert TTA] that would have been helpful in [insert outcome]?
 |
| 1. What aspect(s) of the training or technical assistance were most helpful to you and why?
 |
| 1. What aspect(s) of the training or technical assistance were least helpful to you and why?
 |
| 1. How could [reference answers from previous question] be improved?
 |
| 1. At the completion of [insert TTA], did you have specific action steps or a strategic plan?
 |
| 1. How well did these action steps align with the needs you identified prior to the training?
 |
| 1. How confident did you feel in your ability to implement these action steps?
 |
| 1. How supported did you feel by OJJDP’S NTTAC staff in implementing these action steps?
 |
| 1. [Three, six, etc.] months later, in what ways have you implemented your action steps/strategic plan?
 |
| 1. Looking back, what would have changed about your action steps/strategic plan?
 |
| 1. How do you think you will continue to apply what you have learned through this [insert TTA]?
 |
| 1. Have you attended any additional trainings or events related to the [TTA] you attended previously?
 |
| 1. Would you recommend OJJDP’s NTTAC trainings to others?
 |
| 1. Has your organization proposed or changed policies pertaining to [topic of TTA] since [insert TTA]?
 |
| 1. How has your professional networking or peer support changed since [insert TTA]?
 |
| 1. How has your access to resources on [topic of TTA] changed since [insert TTA]?
 |
| 1. Do you have any additional comments or suggestions that you would like to share about [insert TTA]?
 |
| 1. Do you have any comments or suggestions for future OJJDP’S NTTAC-related trainings?
 |
| **Training** |
| 1. What are your immediate and potentially future training needs?
 |
| 1. What are your challenges to obtaining training?
 |
| 1. Which formats are better for you to receive training (e.g., in-person trainings, virtual trainings, blended learning experiences)?
 |
| 1. How do you generally hear about trainings?
 |
| 1. What topics are most important for you for training?
 |
| 1. If you have not attended any trainings (including webinars) hosted by OJJDP’s NTTAC, what are your barriers to attending?
 |
| 1. What are your challenges to obtaining training?
 |
| 1. What issues are important to you in the delivery of trainings?
 |
| **Technical Assistance** |
| 1. What are your immediate technical assistance needs? What technical assistance do you think you might need in the future?
 |
| 1. What are your challenges to obtaining technical assistance?
 |
| 1. Do you know where to go for technical assistance? If you answered yes, where do you currently go for technical assistance?
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| **Communications** |
| 1. How do you prefer to receive communications about upcoming events and resources?
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| 1. Are you a member of OJJDP’s JUVJUST or OJJDP’s NTTAC listservs?
 |
| 1. Do you follow any organizations in the juvenile justice and child victimization prevention fields on social media? If so, which organizations? What do you like or not like?
 |
| 1. How do you generally market your trainings/technical assistance to the field?
 |
| 1. Do you have any ideas for ways to support more information sharing between [organizations/groups/task forces/XX]?
 |
| 1. Do you have a way to reach out to other [organizations/groups/task forces/XX] when you have questions or need resources?
 |
| 1. How can communication be improved?
 |
| **Resources/Tools\*****\*If feedback is needed on specific aspects of a tool, visit and ask these questions for each aspect.** |
| 1. Where did you learn about this tool (e.g., trainings, conferences, newsletters, website)? [*If they mention anything specific, ask which one (e.g., which training, which conference).*]
 |
| 1. Where would you usually go to find this type of information, tool, or topic?
 |
| 1. Once you heard about it, was this tool easy to find? Is it accessible to everyone who might need it? If not, what should be changed?
 |
| 1. Is there a better place to put this tool that users would find easier to locate?
 |
| 1. Are there other places that you already go to get this information? What do you like and dislike about these places?
 |
| 1. Was this the type of information that you expected to see or were looking for? What was missing?
 |
| 1. Was the information too advanced/detailed or too basic?
 |
| 1. How is the information applicable to your work?
 |
| 1. Are there other topics that need tools similar to this one?
 |
| 1. Regarding each module—do you have experience with it; is it appropriate, what you expected, or were looking for; can you provide specific information about how it meets needs or can be improved to do so?
 |
| 1. If it was difficult to use, how so?
 |
| 1. What would make it easier to use and understand?
 |
| 1. How do you feel about the way the information is displayed on the website or page? What do you like about it? What do you dislike?
 |
| 1. What feedback do you have about the webpage layout, length, format, and readability?
 |
| 1. Is the level of interactivity of the tool appropriate?
 |
| 1. Is the length of information about right?
 |
| 1. What do you think of the content layout (e.g., bullets vs. paragraphs)?
 |
| 1. If this tool is designed to be used to train others, are there instructions? Are they clear? Are they needed?
 |
| 1. Was the information/tool easy to understand and user-friendly? How so?
 |
| 1. How is the tool helpful? How is the tool not helpful?
 |
| 1. How did you or would you use the information/tool?
 |
| 1. If you won’t need to use it, why? What do you need that is not already contained within the resource?
 |
| **Use of Technology** |
| 1. What protocols are in place, and what role does technology play in [XX]?
 |
| 1. Is a centralized database or case management system used?
 |
| 1. What other technology tools and strategies are used (e.g., websites, blogs, tweets, mobile apps)?
 |
| **Sustainability** |
| 1. What kind of support or systems and structures exist to help [XX] sustain its efforts going into the future?
 |
| 1. Do you think that [XX] has planned for long-term [cooperation/survival/XX], even after funding ends?
 |

**We’re done! Thank you very much for your time. Your input and comments are very helpful. Do you have any questions for us?**

**Closing (2 minutes)**