

## TTA Services Feedback

**OMB #:**

**Date of Expiration:**

### Post-TTA Services Evaluation

The purpose of this survey is to gather feedback about TTA services. The survey will be administered immediately following the technical assistance/training event.

*Thank you for requesting technical assistance services through the Office of Juvenile Justice and Delinquency Prevention's (OJJDP's) National Training and Technical Assistance Center (NTTAC). To better serve you and the juvenile justice field, we would like to know how satisfied you are with the support offered to you by OJJDP's NTTAC for this technical assistance.*

Satisfaction					
<i>Please indicate the extent to which you agree or disagree with the following statements about the technical assistance you received from OJJDP's NTTAC.</i>					
1. I am satisfied with the overall quality of the technical assistance received.	<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neither Agree Nor Disagree	<b>4</b> Agree	<b>5</b> Strongly Agree
2. As a result of this technical assistance, our organization has increased knowledge and/or skills about the topic(s) addressed by the technical assistance.	<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neither Agree Nor Disagree	<b>4</b> Agree	<b>5</b> Strongly Agree
3. As a result of this technical assistance, our organization intends to change, improve, or rescind programmatic policies or procedures.	<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neither Agree Nor Disagree	<b>4</b> Agree	<b>5</b> Strongly Agree
4. As a result of this technical assistance, our organization intends to improve organization or program operations.	<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neither Agree Nor Disagree	<b>4</b> Agree	<b>5</b> Strongly Agree
5. Overall, the technical assistance services provided through OJJDP's NTTAC staff/consultants met our expectations.	<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neither Agree Nor Disagree	<b>4</b> Agree	<b>5</b> Strongly Agree

6. The identified OJJDP's NTTAC staff/consultant(s) had the right level of subject-matter knowledge and expertise.	<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neither Agree Nor Disagree	<b>4</b> Agree	<b>5</b> Strongly Agree
7. The identified OJJDP's NTTAC staff/consultant had a good understanding of our organization/community needs.	<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neither Agree Nor Disagree	<b>4</b> Agree	<b>5</b> Strongly Agree
8. The materials and information were appropriate for our organization's level of experience and knowledge.	<b>1</b> Strongly Disagree	<b>2</b> Disagree	<b>3</b> Neither Agree Nor Disagree	<b>4</b> Agree	<b>5</b> Strongly Agree

## Demographics

9. Which of the following best describes the field or profession in which you work? Select all that apply.
- Faith-Based
  - Law Enforcement
  - Prosecutors
  - Courts
  - Defenders
  - Mentoring
  - Child Welfare/Safety
  - Victims of Crime
  - Probation/Parole
  - Detention/Corrections
  - Tribal Community
  - State Advisory Groups (SAG members, juvenile justice specialists)
  - JJDPA Compliance (compliance monitor, DMC coordinator)
  - Substance Abuse
  - Mental/Behavioral Health
  - Military
  - Education
  - Training/Technical Assistance
  - Advocacy
  - Research
  - Youth Services
  - Families
  - Youth
  - Other (please specify): \_\_\_\_\_

10. How long have you worked in the field?

- Less than 1 year  
 1 to 5 years  
 6 to 10 years  
 More than 10 years

11. Please indicate the state in which you work: \_\_\_\_\_

### TTA Services Followup Feedback

The purpose of this followup survey is to gather feedback about TTA services. The survey will be administered separately three months after the technical assistance/training event.

*Thank you for requesting technical assistance services through the Office of Juvenile Justice and Delinquency Prevention's (OJJDP's) National Training and Technical Assistance Center (NTTAC). To better serve you and the juvenile justice field, we would like to know how satisfied you are with the support received by OJJDP's NTTAC for this technical assistance.*

## Satisfaction

**Please indicate the extent to which you agree or disagree with the following statements about the technical assistance you received from OJJDP's NTTAC.**

	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>
1. As a result of this technical assistance, our organization has applied knowledge and/or skills about the topic(s) learned to our work/programming.	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
2. As a result of this technical assistance, our organization has made modifications to programmatic policies or procedures.	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
3. As a result of this technical assistance, our organization has improved organizational or programmatic operations.	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree
4. I am satisfied with the technical assistance OJJDP's NTTAC staff/consultant provided.	Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

## Behaviors

5. How have you applied the information from this online training in your work? Please select all that apply.

- Share material with colleagues
- Refer colleagues to other OJJDP NTTAC events/resources
- Train/educate others in content/skills learned
- Enact policy changes at my organization
- Begin a new project or initiative
- Strengthen public awareness/advocacy activities
- Change my management, leadership, or interpersonal communication style
- Pursue additional professional development
- Develop/strengthen use of technology or infrastructure
- Develop/strengthen collaborative or strategic relationships
- Expand services to new populations
- Expand types of services offered
- Strengthen administrative capacity or operations to better serve the field
- Strengthen research, evaluation, or needs assessment activities
- Network with other participants
- Identify/pursue new funding resources (e.g., grant writing, fundraising)
- Implement/change financial procedures
- Modify outreach/marketing activities
- Develop/enhance vision, mission, or strategic plan
- Other(s): \_\_\_\_\_
- I will not be able to apply the information to my work

Please explain how you have applied the information: \_\_\_\_\_

6. Have you implemented any evidence-based practices learned during the training and technical assistance to your work?

- No
- Yes

If yes, please explain: \_\_\_\_\_

## Demographics

7. Which of the following best describes the field or profession in which you work? Please choose only one from the drop-down list.

Other: \_\_\_\_\_

8. How long have you worked in the field?

- Less than 1 year
- 1 to 5 years
- 6 to 10 years
- More than 10 years

9. Please indicate the state in which you work: \_\_\_\_\_