**Feedback on Family Violence Prevention and Services Act (FVPSA) American Rescue Plan (ARP) Financial Grants Management Training**

Thank you for taking the time to complete this brief feedback form. To assess the effectiveness of the Family Violence Prevention and Services Act (FVPSA) American Rescue Plan (ARP) Financial Grants Management Training, your responses to the following questions are requested. The information provided will be used to inform future training and technical assistance and learning events. Your participation is voluntary, and the information provided is anonymous and will only be reported in aggregate. The survey is estimated to take about 5 minutes.

**MODULE 1: Understanding the Code of Federal Regulations (CFR) and Cost Principles**

**Learning Objectives:**

* Explain Code of Federal Regulations (CFR) cost principles and how to use the CFR as a resource to determine if costs are eligible, allowable, reasonable, and allocable under your FVPSA Grant.
* Determine the difference between indirect and direct costs.
* Identify how costs should be allocated.
* Locate and interpret CFR sections that help clarify common questions about common FVPSA grant allowable costs.

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| **Voluntary Personal Identifying Information** |
| **Question** | **Metric** | **Pre** | **Post** |
| Please provide your region (Participant will be able to select their region from a drop drop-down option.)Region 1- Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont.Region 2- New Jersey, New York, Puerto Rico and the U.S. Virgin Islands.Region 3- Delaware, the District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia.Region 4- Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee.Region 5- Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin.Region 6- Arkansas, Louisiana, New Mexico, Oklahoma, Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin. and Texas.Region 7 - Iowa, Missouri, Kansas, and NebraskaRegion 8 - Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming.Region 9 - Arizona, California, Hawaii, Nevada, American Samoa, Federated States of Micronesia, Guam, Marshall Islands, Republic of Palau, and Commonwealth of the Northern Mariana Islands.Region 10 - Alaska, Idaho, Oregon, and Washington. | Determine, based upon region, what additional training and technical assistance will be needed to close knowledge gaps and increase awareness about resources.  | X | X |
| **Question** | **Metric** | **Pre** | **Post** |
| Please provide your email address (optional) | Determine what additional training and technical assistance will be needed to close knowledge gaps and increase awareness about resources at the individual grantee level based on the email addresses connected to the pre and post surveys. | X | X |
| Please select your role administering/managing FVPSA funding: * Financial Officer/Staff
* FVPSA State Administrator
* Grant Manager
* Executive Director
* Culturally Specific Program
* Program Director
* Sexual Assault Advocate
* Tribal Consortium Manager
* Tribal Program Manager/Specialist
* Tribal Administrator

Other (please provide) | Determine correlation between training needs and FVPSA grant administering role.  | X | X |

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| **Select: Strongly Agree/Agree/Disagree/Strongly Disagree** |
| **Question** | **Metric** | **Pre** | **Post** |
| I have knowledge on how to development of a cost allocation plan for federal grants. | Increase the number of grantees that can develop a cost allocation plan for federal grants. | X | X |
| I have knowledge about the various methods of determining indirect cost rates. | Increase the number of grantees that can determine their indirect costs | X | X |
| I know how to use the 2 CFR to locate needed information about eligible, allowable, reasonable, and allocable costs as they relate to my organization's role and responsibilities in administering the FVPSA grants. | Increase knowledge of the 2 CFR and how to use it as a resource for allowable and allocable costs | X | X |
| I know how to use the 2 CFR to locate needed information on the direct and indirect costs. | Increase knowledge of the CFR and how to use it as a resource for direct and indirect costs | X | X |
| I understand the 2 CFR cost principles.  | Increased knowledge of costs principles and their relationship to grants administration | X | X |
| Qualitative feedback in text box |
| What are your top three questions related to the allowable costs under your FVPSA ARP grants? | Data to inform future TTA and understand level of understanding amongst grantees about ARP grants | X |  |
| What additional financial grants management training and technical assistance would your agency/tribe need to receive to help support the financial management of your FVPSA grant funding? | Data to inform future TTA and current level of ability to manage FVPSA ARP funds |  | X |

**MODULE 2: Roles & Responsibilities for Pass-Through Entities and Subgrantees**

Learning Objectives:

* Understand the financial and performance monitoring requirements for pass through entities and subgrantees.
* Learn the standards and best practice for financial management, managing multiple grant streams, and drawing down funds.
* Identify strategies that pass-through entities can use to build the capacity of subrecipients to effectively manage their FVPSA funds.
* Describe expectations for drawing down FVPSA grant funds and the available training and resources to help grantee navigate the draw down process.

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| Please provide your email address (optional) | Determine what additional training and technical assistance will be needed to close knowledge gaps and increase awareness about resources at the individual grantee level based on the email addresses connected to the pre and post surveys. | X | X |
| Please select your role administering/managing FVPSA funding: * Financial Officer/Staff
* FVPSA State Administrator
* Grant Manager
* Executive Director
* Culturally Specific Program
* Program Director
* Sexual Assault Advocate
* Tribal Consortium Manager
* Tribal Program Manager/Specialist
* Tribal Administrator
* Other (please provide)
 | Determine correlation between training needs and FVPSA grant administering role.  | X | X |

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| Select: Strongly Agree/Agree/Disagree/Strongly Disagree |
| **Question** | **Metric** | **Pre** | **Post** |
| I have knowledge about the roles and requirements of pass-through entities to monitor and evaluate the activities of the subrecipient, including verifying that every subrecipient is audited. | Increase the number of grantees that have knowledge on the roles and responsibilities of pass-through entities and subrecipients.  | X | X |
| I have knowledge on the requirements of subrecipients to prepare, maintain and provide records and financial statements as necessary to the pass-through entity. | Increase the number of grantees that have knowledge on the roles and responsibilities of the subrecipient to provide access to financial statements and records to the pass-through entity and auditors. | x | X |
| **Question** | **Metric** | **Pre** | **Post** |
| I know how to use the 2 CFR to locate needed information about the requirements of pass-through entities and subrecipients. | Increased knowledge of the CFR and how to use it as a resource for pass through and subrecipient requirements | X | X |
| I know how to use the 2 CFR award records to assess retention and access requirements. | Increased knowledge of the CFR and how to use it as a resource for record retention | X | X |
| I know how to use the 2 CFR to assess performance and financial monitoring and reporting requirements. | Increased knowledge of the CFR and how to use it as a resource for monitoring requirements  | X | X |
| Qualitative feedback in text box |
| What are your top three questions related to your roles and responsibilities as a pass-through or a subrecipient? | Data to inform future TTA and understand level of understanding amongst grantees about their role receiving FVPSA funds | X |  |
| What additional financial grants management training and technical assistance would your agency/tribe need to receive to help support the financial management of your FVPSA grants, as a subrecipient or pass-through entity? | Data to inform future TTA and current level of ability to manage FVPSA ARP funds |  | X |

**MODULE 3: Internal Controls**

Learning Objectives:

* Define the purpose and key elements of internal controls as defined by the two federally approved internal control frameworks.
* Define the role management, program and financial staff play in establishing and maintaining effective internal controls.
* Discuss how internal controls are used to achieve operations, reporting and compliance objectives.
* Identify resources to help administering agencies and subgrantees to design, implement and operate an effective internal control system.

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| **Question** | **Metric** | **Pre** | **Post** |
| Please provide your email address (optional) | Determine what additional training and technical assistance will be needed to close knowledge gaps and increase awareness about resources at the individual grantee level based on the email addresses connected to the pre and post surveys. | X | X |
| Please select your role administering/managing FVPSA funding: * Financial Officer/Staff
* FVPSA State Administrator
* Grant Manager
* Executive Director
* Culturally Specific Program
* Program Director
* Sexual Assault Advocate
* Tribal Consortium Manager
* Tribal Program Manager/Specialist
* Tribal Administrator
* Other (please provide)
 | Determine correlation between training needs and FVPSA grant administering role.  | X | X |

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| Select: Strongly Agree/Agree/Disagree/Strongly Disagree |
| **Question** | **Metric** | **Pre** | **Post** |
| I have knowledge on the roles and responsibilities of my organization to implement for effective internal controls. | Increase the number of grantees’ knowledge on internal controls | X |  |
| I have knowledge on the policies, procedures, and standards that create effective financial controls. | Increase the number of grantees’ knowledge on financial controls | X |  |
| **Question** | **Metric** | **Pre** | **Post** |
| I know my organization’s financial controls and financial management system policies and procedures.  | Increase knowledge of organizational financial policies and procedures  | X |  |
| I know how to draw down my organization's FVPSA grant funds and submit the Federal Financial Reporting (FFR) form through the Payment Management System (PMS). | Increase knowledge of how to draw down funds and submit the FFR | X | X |
| I am confident I can draw down my organization's FVPSA grant funds in a timely manner. | Increase confidence in the organization’s ability to draw down funds  | X | X |
| I know where to seek clarification and support if there are barriers preventing me from drawing down FVPSA grant funds in a timely manner. | Increase knowledge of where to seek clarification when encountering barriers |  | X |
| **Qualitative feedback in text box** |
| Do you have any challenges managing multiple FVPSA grants? If so, please share your challenges: | Increase knowledge of grantee challenges to inform TTA | X |  |
| What additional financial grants management training and technical assistance would help your agency/tribe spend FVPSA grant funding and draw down FVPSA grant funds in a timely manner? | Data to support targeted TTA around fund draw downs |  | X |

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to inform training and technical assistance (financial grants management training) and improve future events. Public reporting burden for this collection of information is estimated to average 5 minutes, 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 OMB # for this collection is 0970-0401 and the expiration date is 06/30/2024. If you have any comments on this collection of information, please contact: Shawndell N. Dawson: shawndell.dawson@acf.hhs.gov.