

# Center to Support Research and Evaluation Capacity of CCDF Lead Agencies (CSRE): Feedback from Grant Participants

The purpose of this voluntary information collection is to solicit feedback from participants of Community of Practice (CoP) meetings run by the Center to Support Research and Evaluation Capacity of CCDF Lead Agencies (CSRE). The participants are ACF grant team members participating in the Community of Practice (CoP) which aims to support cross-project collaborations and advance research evidence. Participant feedback will be collected during or after a CoP meeting with a link to an online survey. This feedback will help the CSRE understand the grant recipients' experiences and preferences and will be used to improve future meetings and other supports for these grant recipients.

NOTE: This document includes a universe or bank of sample questions. We plan to ask for 5 minutes of burden each time feedback is requested. ACF will administer the poll up to 2 times over the next 6 months.

Many questions have brackets with information that will be identified based on Community of Practice discussions, planning needs, and feedback. A question may be asked more than once, using alternate versions of the information in brackets. We also may make additional small tweaks in wording to fit the circumstances. Many of the questions are drawn from previously OMB-approved polls for the individual Communities of Practice over the past 3-4 years (i.e., the CCDBG, CCPRP-2019, PROSPR, or CCPRP-2022 Community of Practice) but approval to use them has lapsed or they are only allowed to be used for one Community of Practice.

## Questions

### **1. What is your role on your grant team?**

- a. Researcher - Principal Investigator (PI)
- b. Researcher - Co-Investigator (Co-PI)
- c. Researcher - Team member
- d. CCDF Lead Agency - PI
- e. CCDF Lead Agency - CoPI
- f. CCDF Lead Agency - Team member
- g. Other Policy/Practice Partner - PI
- h. Other Policy/Practice Partner - Co-PI
- i. Other Policy/Practice Partner - Team member

**Please select a number to indicate whether you agree or disagree with each statement.**

- 1= Strongly Disagree
- 2=Disagree
- 3= Neither Agree Nor Disagree
- 4=Agree
- 5=Strongly Agree

**Strongly-----**  
**Strongly**  
**Disagree**  
**Agree**

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**[Refer to specific meeting or session] \***

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|--|---|---|---|---|---|
| 2. I was interested in the content of the [specific meeting or session].                       | 1 | 2 | 3 | 4 | 5 |
| 3. The [specific meeting or session] was a good use of my time.                                | 1 | 2 | 3 | 4 | 5 |
| 4. This [specific meeting or session] furthered my teams' cross-project collaboration efforts. | 1 | 2 | 3 | 4 | 5 |

\*Note: This question will be repeated for the total number of CoP meetings or sessions conducted during the evaluation period.

**Overall**

- |  |   |   |   |   |   |
|--|---|---|---|---|---|
| 5. As a whole, the meetings were a good use of my time.                | 1 | 2 | 3 | 4 | 5 |
| 6. I was comfortable asking questions & contributing to discussion.    | 1 | 2 | 3 | 4 | 5 |
| 7. I will be able to apply what I learned in these meeting to my work. | 1 | 2 | 3 | 4 | 5 |

**8. If you disagreed (2) or strongly disagreed (1) with any statements, please briefly explain further.**

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**9. Thinking about the [timeframe] of CoP meetings and related activities, please indicate if you would like the [timeframe] to include more time, about the same amount of time, or less time of each of the following.**

Whole group discussions	More time	About the same	Less time
CoP meeting time to meet with own team [refer to specific example]	More time	About the same	Less time

CoP random mix small sessions [refer to specific example]	More time	About the same	Less time
Team-directed small group sessions [refer to specific example]	More time	About the same	Less time
CSRE-directed small sessions [refer to specific example]	More time	About the same	Less time
Presentations by external experts	More time	About the same	Less time
Presentations by peers	More time	About the same	Less time
Peer-support learning activities	More time	About the same	Less time
Use of [specific collaborative platform1]	More time	About the same	Less time
Use of [specific collaborative platform-2]	More time	About the same	Less time
Informal networking and discussion	More time	About the same	Less time
[Insert activity or topic]	More time	About the same	Less time
[Insert activity or topic]	More time	About the same	Less time

**10. [Between X month and X month], what [activity or topic] was most meaningful to you as you reflect on your own professional development or advancing thinking for the grant? And, why was this most helpful to you?**

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**11. [Between X date and X date], what did you find most frustrating or challenging about participating in the [activity or topic]?**

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**12. What specific supports or resources significantly facilitated your cross-project collaboration efforts? [Examples of supports]**

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**13. What challenges have you encountered in cross-project collaboration, if any?**

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**14. What can the CSRE do to better support you in your cross-project collaboration efforts?**

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**15. What can the CSRE do to better support your project efforts in the coming year?**

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**16. [For PIs only] We would like to create more opportunities for grant teams to share their expertise and experiences during CoP meetings about [specific methodological or substantive topics] that other grant teams may want to consider. Would your team be interested in presenting in a CoP meeting about a [specific construct, measure, or method]?**

- a. Yes
- b. No
- c. I don't know

**17. [For PIs only] If yes, tell us a little bit about what you'd like to share.**

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**18. Is there [anything/something/a construct/a measure/a method] that another team is working on that you'd like to learn more about during an upcoming CoP meeting?**

- a. Yes
- b. No

**19. Tell us a little bit about what you'd like to learn about and from who (a team or a person).**

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**20. [For PIs only] We would like to create more opportunities for grant teams to share their findings, expertise, and experiences during CoP meetings. Please describe anything your team may be interested in sharing during an upcoming CoP [date range].**

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**21. Are there any specific topics you'd like to see covered in future CoP meetings?**

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**22. What additional comments would you like to share with the CoP Support Team or OPRE?**

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**To avoid conflicts with other grantee meetings that CoP members may be participating in, we're not currently planning an in-person grantee meeting to coincide with NRCEC.**

**23. Are you planning to attend NRCEC?**

- a. Yes
- b. No
- c. Not sure

**24. Would you be interested in the CSRE hosting a networking or informal event for CoP members at NRCEC?**

- a. Yes
- b. No

**25. Do you have a preference for attending an in-person grantee meeting vs a virtual grantee meeting in the Fall of 2024?** Please note, this would be a delayed Year 2 annual meeting. A separate Year 3 annual meeting is still anticipated for 2025.

- a. Prefer to attend an in-person meeting
- b. Prefer to attend a virtual meeting
- c. No preference

**26. If virtual preference, for how many hours/days?**

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**27. If in-person preference, for how many hours/days?**

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**28. If we hold an in-person grantee meeting, what would be your preference for the meeting location?**

- a. Washington, DC
- b. Chicago, IL
- c. Another location. [Please describe]
- d. No preference

**29. Do you have any thoughts or preferences regarding the agenda for the annual meeting?** *Are there specific topics or sessions you'd like to see included or excluded from the agenda? (For example, small or full group discussions about a topic or method of interest, opportunities to present findings, presentation from OCC, time for networking, etc.)*

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**30. Please provide any additional thoughts or constraints that you'd like us to take into consideration as we determine next steps for annual meeting planning.**

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PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN:  
The purpose of this information collection is to help ACF understand grant recipient preferences for future meetings and other supports. Public reporting burden for this collection of information is estimated to average 5 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. 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 # is 0970-0401 and the expiration date is XX/XX/XXXX. If you have any comments on this collection of information, please contact Teresa Derrick-Mills at [tderrick-mills@urban.org](mailto:tderrick-mills@urban.org).