Attachment A: CNPP Data Collection Materials

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Attachment A-1: CNPP Hub Data Collection Materials

*Hub Survey: SBA Introduction Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Hub Administrator’s Name*],

I hope this message finds you well. I’m the U.S. Small Business Administration’s Program Manager for the Community Navigator Pilot Program (CNPP). I am contacting you regarding a study about small business owners’ and entrepreneurs’ experiences with Community Navigators. The SBA’s Office of Program Performance, Analysis, and Evaluation is working with Optimal Solutions, a small business research firm, to understand the CNPP. More specifically, the evaluation aims to understand which factors facilitate or hinder CNPP implementation, understand the extent to which the activities are changing clients’ awareness of and participation in SBA programs, and identify best practices for the program design and delivery. This is not an evaluation of [*Hub name*].

I would like to invite you and your staff to take part in a survey. I encourage [*Hub name*]’s participation as your responses will provide important insights and will help SBA inform Community Navigator design and delivery. We will share the results of the evaluation with you in January 2024.

Within a week, Optimal Solutions will send an online survey about [*Hub name*]’s experiences with the program. It will take about 15 minutes to complete. Your participation in this survey is voluntary and your responses will be kept strictly confidential. Your or [*Hub name*]’s name will never be used in any reports produced from this study.

The SBA values your perspective and experiences with the program. Your opinion and feedback are important in helping the SBA improve its services to America’s small businesses.

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

Thank you for your time and participation in this project.

Sincerely,

*<signature>*

Benjamin Selden, CNPP Officer at SBA

CC: Sana Ahmed Wilder, SBA

*Hub Survey: Survey Invitation Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Hub Administrator’s Name*],

Last week, you received an e-mail from the SBA inviting you to participate in a survey about your organization’s experience with the Community Navigator Program. Your feedback is essential in assisting the SBA to make improvements so that the program can better support our nation’s small businesses.

The survey should take no more than 15 minutes to complete. Your participation is voluntary, and your responses will be kept strictly confidential. To complete the survey, please follow the link below:

<**INDIVIDUALIZED** **SURVEY LINK**>

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Hub Survey: Survey Invitation Reminder Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Hub Administrator’s Name*],

As you may recall, you recently received an e-mail inviting you to participate in a survey about your organization’s experience with the Community Navigator Program. Your feedback is essential in assisting the SBA to make improvements so that the program can better support our nation’s small businesses.

This is just a friendly reminder to ask you to participate in the survey, which should take no more than 15 minutes to complete. Your participation is voluntary, and your responses will be kept strictly confidential. To complete the survey, please follow the link below:

<**INDIVIDUALIZED** **SURVEY LINK**>

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Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Hub Survey: Telephone Reminder Script*

Hello, my name is [*name*], and I am a [*title*] with a small business called Optimal Solutions Group. Optimal specializes in evaluation research, and we have been hired by the Small Business Administration to conduct an evaluation of the Community Navigator Program. As part of this evaluation, we are asking for feedback from Hub administrators and staff.

I’m calling to check in and see if you’ve had a chance to review our recent email inviting you and your staff to take part in a survey about Community Navigators. The survey should take no more than 15 minutes to complete. Your participation is voluntary, and your responses will be kept strictly confidential.

***If leaving a voicemail:***

If you are interested in participating, please refer back to the email you received from SBASurveys@optimalsolutionsgroup.com to access the survey link. If you did not receive this email, please give us a call back at (301) 306-1170, ext. 731 to let us know the best way to re-send the information and survey link. Thank you in advance for your cooperation!

***If respondent is on the line:***

Did you receive this email? It was sent from SBASurveys@optimalsolutionsgroup.com.

* ***[If yes]*** Great. If you are interested in participating, please refer back to that email to access the survey link. If you have any questions in the meantime, please feel free to give us a call back at (301) 306-1170, ext. 731.
* ***[If no/unsure]*** What’s the best way for us to re-send the information and survey link?
* ***[If updated contact information provided]*** Great, thank you so much. We will follow-up shortly with a [*text/email*] that includes a link to access the survey. If you have any questions in the meantime, please feel free to give us a call at (301) 306-1170, ext. 731.
* ***[If refusal to provide updated contact information]*** Thank you for your consideration. If you have any further questions about this evaluation, please feel free to give us a call at (301) 306-1170, ext. 731.

*Hub Survey: Consent Form*

The U.S. Small Business Administration (SBA) is conducting an evaluation of the Community Navigator Pilot Program (CNPP). This program funds local organizations to assist underserved small businesses to enroll in various business assistance, training, or financing programs or services.

The survey has been designed to learn about your organization’s experience with the program, best practices, barriers and facilitators to the program implementation and outcomes. The objective of this evaluation is to determine if the program is meeting its intended outcome of reaching and supporting underserved small businesses. The evaluation will provide suggestions for improvements to this valuable small business assistance program.This is not an evaluation of any specific Hub or Spoke.

The SBA has hired a small business, Optimal Solutions Group to conduct the evaluation of this program. Your responses will be kept strictly confidential, and your or your organization name will never be used in any reports produced for this evaluation. All responses will be presented as aggregated statistics such as averages, percentages, and frequency counts. All responses will be de-identified and then these data will be provided to the SBA.

The estimated time for completing this survey about 15 minutes. Your participation is completely voluntary. You have the right to not participate. You can stop participating at any time and do not have to answer any questions that you do not want to. The OMB Control No. for this survey is 3245-0425, which has an expiration date of 10/31/2025.

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

***Note:*** *In the context of this study, the term “underserved” refers to populations and communities that have been historically left out (those that have been underserved by governments).*

By clicking “I consent” below, you are consenting to participate in the study.

* I consent
* I do not consent

*Hub Survey: Data Collection Instrument*

1. Which of the following organizations has your organization ever partnered or collaborated with?

(select all that apply) [PROGRAMMER NOTE: Randomize the list’s order]

* + Business financing sources (banks, investors, Community development financial institutions (CDFIs), etc.)
	+ Federal, state, local, or tribal government agencies
	+ Nonprofit organizations
	+ Business organizations (industry associations, chambers of commerce, etc.)
	+ Business leaders, large firms, and companies
	+ Universities, colleges, schools
	+ Places of worship
	+ Other local organizations in underserved communities, specify:
1. [PROGRAMMER NOTE: Display for each option endorsed in Q1] To what extent has your level of collaboration with the following organizations changed as a result of your participation in Community Navigators? [PROGRAMMER NOTE: Randomize the list’s order excluding the ‘Other’ option]

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Stopped collaboration | Significant decrease in collaboration | Slight decrease in collaboration | No change | Slight increase in collaboration | Significant increase in collaboration | Started collaboration | Not applicable |
| Business financing sources (banks, investors, CDFIs, etc.)  |  |  |  |  |  |  |  |  |
| Federal, state, local, or tribal government agencies  |  |  |  |  |  |  |  |  |
| Nonprofit organizations |  |  |  |  |  |  |  |  |
| Business organizations (industry associations, chambers of commerce, etc.)  |  |  |  |  |  |  |  |  |
| Business leaders, large firms, and companies  |  |  |  |  |  |  |  |  |
| Universities, colleges, and schools  |  |  |  |  |  |  |  |  |
| Places of worship  |  |  |  |  |  |  |  |  |
| Other local organizations in underserved communities, specify |  |  |  |  |  |  |  |  |

1. Which of the following SBA programs or resource partners has your organization ever partnered or collaborated with? (select all that apply) [PROGRAMMER NOTE: Randomize the list’s order]
* Small Business Administration (SBA) District Office
* Small Business Development Centers (SBDC)
* SCORE Association
* Women’s Business Centers (WBC)
* Veterans Business Outreach Centers (VBOC)
* U.S. Export Assistance Center (USEAC)
* Procurement Technical Assistance Center (PTAC)
* Other, specify:
1. [PROGRAMMER NOTE: Display for each option endorsed in Q3] To what extent has your level of collaboration with the following SBA programs or resource partners changed as a result of your participation in Community Navigators? [PROGRAMMER NOTE: Randomize the list’s order excluding the ‘Other’ option]

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Stopped collaboration | Significant decrease in collaboration | Slight decrease in collaboration | No change | Slight increase in collaboration | Significant increase in collaboration | Started collaboration | Not applicable |
| Small Business Administration (SBA) District Office   |  |  |  |  |  |  |  |  |
| Small Business Development Centers (SBDC)   |  |  |  |  |  |  |  |  |
| SCORE Association  |  |  |  |  |  |  |  |  |
| Women’s Business Centers (WBC)  |  |  |  |  |  |  |  |  |
| Veterans Business Outreach Centers (VBOC)  |  |  |  |  |  |  |  |  |
| U.S. Export Assistance Center (USEAC)   |  |  |  |  |  |  |  |  |
| Procurement Technical Assistance Center (PTAC)   |  |  |  |  |  |  |  |  |
| Other, specify     |  |  |  |  |  |  |  |  |

1. Based on your experience implementing the Community Navigators Program, please indicate whether (and to what extent) the following factors acted as either BARRIERS or FACILITATORS to implementation:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Significant barrier | Slight barrier | No effect | Slight facilitator | Significant facilitator | Not applicable |
| **Hub service delivery scope, staffing & resources:** |
| Geographic location or coverage of Hub |  |  |  |  |  |  |
| Clients’ linguistic or cultural issues  |  |  |  |  |  |  |
| Hub staffing availability   |  |  |  |  |  |  |
| Hub budget   |  |  |  |  |  |  |
| Hub information technology |  |  |  |  |  |  |
| **Partner relations:** |
| Leveraging existing Hub partnerships  |  |  |  |  |  |  |
| Developing new Hub partnerships  |  |  |  |  |  |  |
| **Spoke relations:** |
| Enlisting culturally knowledgeable Spokes  |  |  |  |  |  |  |
| Hub-Spoke governance  |  |  |  |  |  |  |
| Monitoring Spokes’ activities and outcomes |  |  |  |  |  |  |
| Support provided to Spokes  |  |  |  |  |  |  |
| Communication with Spokes  |  |  |  |  |  |  |
| Training provided to Spokes  |  |  |  |  |  |  |
| Spoke staffing availability |  |  |  |  |  |  |
| Spoke budget |  |  |  |  |  |  |
| Spoke information technology |  |  |  |  |  |  |
| **Other** |
| Please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  |

1. The evaluation team would like to describe clients’ experiences in any group trainings Hubs and Spokes have provided. For the purpose of follow-up with clients, do you track and maintain the roster of clients who attend group trainings?
* Yes
* No (Skip to Q8)
* Don’t know (Skip to Q8)
1. We would like to reach out to businesses that (only) participated in group training sessions. Would you be willing to share the roster of businesses, including their email addresses, who participated in group training sessions between Sept. 1, 2021 through Sept. 1, 2022?
* Yes [[1]](#footnote-3)
* No
* Don’t know

(If Yes to Q7) Thank you, we will contact you in the next few days.

1. Please provide suggestions for improving the Community Navigators program to better engage potential clients:

We thank you for your time spent taking this survey.

The results will provide suggestions for improvements to this valuable small business assistance program.

*Hub Interview: Scheduling Request Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Hub Administrator’s Name*],

I am reaching out to thank you for your response to our Community Navigators survey, as well as to request your participation in a brief virtual interview (via Microsoft Teams) so that we can learn a bit more about your experience with the program. The interview will take no more than one hour to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential. Your feedback is essential in assisting the SBA to make improvements so that the program can better support our nation’s small businesses.

**Below is a link to Optimal’s appointment scheduling tool, which allows you to select a date and time during which you are available to participate** *(alternatively, please respond to this email with your scheduling preferences)*.

**<INTERVIEW SCHEDULING LINK (CALENDLY)>**

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Hub Interview: Scheduling Request Reminder Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Hub Administrator’s Name*],

This is just a friendly reminder to request your participation in a brief virtual interview (via Microsoft Teams) so that we can learn a bit more about your experience with Community Navigators. The interview will take no more than one hour to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential. Your feedback is essential in assisting the SBA to make improvements so that the program can better support our nation’s small businesses.

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Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Hub Interview: Telephone Reminder Script*

Hello, my name is [*name*], and I am a [*title*] with a small business called Optimal Solutions Group. Optimal specializes in evaluation research, and we have been hired by the Small Business Administration to conduct an evaluation of the Community Navigator Program. As part of this evaluation, we are asking for feedback from Hub administrators and staff.

I’m calling to check in and see if you’ve had a chance to review our recent email inviting you to take part in in a brief virtual interview via Microsoft Teams. The interview will take no more than one hour to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential.

***If leaving a voicemail:***

If you are interested in participating, please give us a call at (301) 306-1170, ext. 731 to provide a date and time during which you will be available to meet with us via Microsoft Teams. Thank you in advance for your cooperation!

***If respondent is on the line:***

If you are interested in participating, can you please provide a date and time during which you will be available to meet with us via Microsoft Teams?

* ***[If date/time provided]*** Great, thank you so much. We will follow-up shortly with a calendar invite that includes the link to join the interview meeting on [*selected date*] at [*selected time*]. If you have any questions in the meantime, please feel free to give us a call at (301) 306-1170, ext. 731.
* ***[If not interested]*** Thank you for your consideration. If you have any further questions about this evaluation, please feel free to give us a call at (301) 306-1170, ext. 731.

*Hub Interview: Consent Form*

The U.S. Small Business Administration (SBA) is conducting an evaluation of the Community Navigator Pilot Program (CNPP). This program funds local organizations to assist underserved small businesses to enroll in various business assistance, training, or financing programs or services.

The interview has been designed to learn about your organization’s experience with the program, best practices, barriers, and facilitators to the program implementation and outcomes. The objective of this evaluation is to determine if the program is meeting its intended outcome of reaching and supporting underserved small businesses. The evaluation will provide suggestions for improvements to this valuable small business assistance program.This is not an evaluation of any specific Hub or Spoke.

The SBA has hired a small business, Optimal Solutions Group, to conduct the evaluation of this program. Your responses will be kept strictly confidential, and your or your organization name will never be used in any reports produced for this evaluation. All responses will be de-identified and then these aggregated data will be provided to the SBA.

The estimated time for completing this interview is less than an hour. Your participation is completely voluntary. You have the right to not participate. You can stop participating at any time and do not have to answer any questions that you do not want to.The OMB Control No. for this survey is 3245-0425, which has an expiration date of 10/31/2025.

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
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***Note:*** *In the context of this study, the term “underserved” refers to populations and communities that have been historically left out (those that have been underserved by governments).*

By clicking “I consent” below, you are consenting to participate in the study.

* I consent
* I do not consent

*Hub Interview: Data Collection Instrument*

***Note:*** *In the context of this study, the term “underserved” refers to populations and communities that have been historically left out (those that have been underserved by governments).*

**Introduction (5 minutes)**

Please describe your organization and its mission*.* What are the goals for your organization’s participation in the Community Navigators?

**Program Implementation (30 minutes)**

1. What types of outreach activities has your network conducted to reach aspiring and existing entrepreneurs?
2. How have you tailored activities to reach specific communities? [*Prompt: Could you describe the communities your organization serves? Are there differences in how you've tailored activities to each different community or group that you serve?]*
3. What barriers have you encountered in implementing Community Navigators?
4. What factors have enabled Community Navigators' success?
5. In order to meet local needs, have you needed to adjust or change your approach to implementation of the Community Navigators effort? [*Prompt: Were there any specific adjustments you made to the required program tasks? If so, why did you make these adjustments?]*
6. What outreach activities do you think are successful in increasing awareness of Community Navigators and/or SBA programs?
7. What outreach activities do think have not been effective in increasing awareness of Community Navigators and/or SBA programs?
8. Based on your outreach to communities [*mentioned in #2*] have you noticed any gaps in your organization’s outreach and engagement? [*list underserved communities that the respondent answered in #2]*:
9. How successful was your outreach to [*list underserved communities that the respondent answered in #2]* and why?
10. Which planned goals were the most challenging to achieve?

**Partner Relationships (10 minutes)**

1. Has your organization established any new strategic partnerships as a result of your Community Navigator efforts?
	* Briefly describe how these new strategic partnerships have affected your organization’s implementation of the Community Navigators (i.e., program innovations, resources, and/or assets, budgets, outreach, and staffing).
2. Does your organization have a system in place for monitoring the extent to which the Community Navigators Program is being implemented as planned?

*[Prompt: Organizations might conduct quality assurance reviews to assess compliance and/or variation between the implementation plan (as outlined in the proposal) and program delivery (based on quarterly performance reports and other Hub/Spoke/client data).]*

**[If yes]** What issues do you encounter when doing this work? [If issues are given] Do you employ any mitigation strategies? *[Prompt: Which ones? Tell me more about them.]*

1. Has your organizationnoticed increased engagement or communication between Spokes?

**Identified Best Practices (10 minutes)**

1. Has the CNPP increased awareness of and participation in SBA programs among business owners and entrepreneurs who you serve? Can you provide examples?
2. Based on your experiences with Community Navigators, what modifications to the program should we consider?

**Conclusion (5 minutes)**

1. Is there anything else related to Community Navigators that you would like to share?

Attachment A-2: CNPP Spoke Data Collection Materials

*Spoke Survey: SBA Introduction Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Spoke Representative’s Name*],

I hope this message finds you well. I’m the U.S. Small Business Administration’s Program Manager for the Community Navigator Pilot Program (CNPP). I am contacting you regarding a study about small business owners’ and entrepreneurs’ experiences with Community Navigators.  The SBA’s Office of Program Performance, Analysis, and Evaluation is working with Optimal Solutions, a small business research firm, to understand the CNPP. More specifically, the evaluation aims to understand which factors facilitate or hinder CNPP implementation, understand the extent to which the activities are changing clients’ awareness of and participation in SBA programs, and identify best practices for the program design and delivery. This is not an evaluation of [*Spoke name*].

I would like to invite you and your staff to take part in a survey. I encourage [*Spoke name*]’s participation as your responses will provide important insights and will help SBA inform Community Navigator design and delivery. We will share the results of the evaluation with you in January 2024.

Within a week, Optimal Solutions will send an online survey about [*Spoke name*]’s experiences with the program. It will take less than 20 minutes to complete. Your participation in this survey is voluntary and your responses will be kept strictly confidential. Your or [*Spoke name*]’s name will never be used in any reports produced from this study.

The SBA values your perspective and experiences with the program. Your opinion and feedback are important in helping the SBA improve its services to America’s small businesses.

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Thank you for your time and participation in this project.

Sincerely,

*<signature>*

Benjamin Selden, CNPP Officer at SBA

CC: Sana Ahmed Wilder, SBA

*Spoke Survey: Survey Invitation Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Spoke Representative’s Name*],

Last week, you received an e-mail from the SBA inviting you to participate in a survey about your organization’s experience with the Community Navigator Program. Your feedback is essential in assisting the SBA to make improvements so that the program can better support our nation’s small businesses.

The survey should take no more than 20 minutes to complete. Your participation is voluntary, and your responses will be kept strictly confidential. To complete the survey, please follow the link below:

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Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Spoke Survey: Survey Invitation Reminder Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Spoke Representative’s Name*],

As you may recall, you recently received an e-mail inviting you to participate in a survey about your organization’s experience with the Community Navigator Program. Your feedback is essential in assisting the SBA to make improvements so that the program can better support our nation’s small businesses.

This is just a friendly reminder to ask you to participate in the survey, which should take no more than 20 minutes to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential. To complete the survey, please follow the link below:

<**INDIVIDUALIZED** **SURVEY LINK**>

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Spoke Survey: Telephone Reminder Script*

Hello, my name is [*name*], and I am a [*title*] with a small business called Optimal Solutions Group. Optimal specializes in evaluation research, and we have been hired by the Small Business Administration to conduct an evaluation of the Community Navigator Program. As part of this evaluation, we are asking for feedback from Spoke representatives and staff.

I’m calling to check in and see if you’ve had a chance to review our recent email inviting you and your staff to take part in a survey about Community Navigators. The survey should take no more than 20 minutes to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential.

***If leaving a voicemail:***

If you are interested in participating, please refer back to the email you received from SBASurveys@optimalsolutionsgroup.com to access the survey link. If you did not receive this email, please give us a call back at (301) 306-1170, ext. 731 to let us know the best way to re-send the information and survey link. Thank you in advance for your cooperation!

***If respondent is on the line:***

Did you receive this email? It was sent from SBASurveys@optimalsolutionsgroup.com.

* ***[If yes]*** Great. If you are interested in participating, please refer back to that email to access the survey link. If you have any questions in the meantime, please feel free to give us a call back at (301) 306-1170, ext. 731.
* ***[If no/unsure]*** What’s the best way for us to re-send the information and survey link?
* ***[If updated contact information provided]*** Great, thank you so much. We will follow-up shortly with a [*text/email*] that includes a link to access the survey. If you have any questions in the meantime, please feel free to give us a call at (301) 306-1170, ext. 731.
* ***[If refusal to provide updated contact information]*** Thank you for your consideration. If you have any further questions about this evaluation, please feel free to give us a call at (301) 306-1170, ext. 731.

*Spoke Survey: Consent Form*

The U.S. Small Business Administration (SBA) is conducting an evaluation of the Community Navigator Pilot Program (CNPP). This program funds local organizations to assist underserved small businesses to enroll in various business assistance, training, or financing programs and services.

The survey has been designed to learn about your organization’s experience with the program, best practices, barriers and facilitators to the program implementation and outcomes. The objective of this evaluation is to determine if the program is meeting its intended outcome of reaching and supporting underserved small businesses. The evaluation will provide suggestions for improvements to this valuable small business assistance program.This is not an evaluation of any specific Hub or Spoke.

The SBA has hired a small business, Optimal Solutions Group (Optimal) to conduct the evaluation of this program. Your responses will be kept strictly confidential, and your or your organization name will never be used in any reports produced for this evaluation. All responses will be presented as aggregated statistics such as averages, percentages, and frequency counts. All responses will be de-identified and then these data will be provided to the SBA.

The estimated time for completing this survey is less than 20 minutes. Your participation is completely voluntary. You have the right to not participate. You can stop participating at any time and do not have to answer any questions that you do not want to. The OMB Control No. for this survey is 3245-0425, which has an expiration date of 10/31/2025.

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

***Note:*** *In the context of this study, the term “underserved” refers to populations and communities that have been historically left out (those that have been underserved by governments).*

By clicking “I consent” below, you are consenting to participate in the study.

* I consent
* I do not consent

*Spoke Survey: Data Collection Instrument*

1. How successful was your organization in using the following methods to conduct outreach among local entrepreneurs and business owners?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Not at all successful | Slightly successful | Moderately successful | Successful | Very successful | Not applicable |
| Websites  |  |  |  |  |  |  |
| E-mail or electronic mailing lists |  |  |  |  |  |  |
| Virtual events or videos |  |  |  |  |  |  |
| Social media |  |  |  |  |  |  |
| Direct mailing  |  |  |  |  |  |  |
| Telephone (calls and/or texts) |  |  |  |  |  |  |
| Radio, TV  |  |  |  |  |  |  |
| Newspapers or magazines |  |  |  |  |  |  |
| Bulletins, newsletters, and flyers in the community (places of worship, local organizations, etc.)  |  |  |  |  |  |  |
| In-person events or meetings in the community |  |  |  |  |  |  |
| Word of mouth (via friends, family, colleagues, etc.)  |  |  |  |  |  |  |
| Other, specify  |  |  |  |  |  |  |

1. Did you have to change your outreach strategies or activities to better reach certain communities?
* Yes
* No
* Don’t know
1. (IF YES) Please briefly describe these changes: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. How successful was your organization in promoting participation by entrepreneurs and business owners in the following business training and assistance activities conducted by your organization? [PROGRAMMER NOTE: Randomize the list’s order, excluding the ‘Other’ option]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Not at all successful | Slightly successful | Moderately successful | Successful | Very successful | Not applicable |
| Financial literacy, credit counseling   |  |  |  |  |  |  |
| Business operations (business plan, accounting, marketing, import/export, HR)  |  |  |  |  |  |  |
| Contracting and procurement  |  |  |  |  |  |  |
| Access to capital  |  |  |  |  |  |  |
| Disaster preparedness, recovery  |  |  |  |  |  |  |
| Loans/program applications  |  |  |  |  |  |  |
| Business certifications (WOSB, 8(a), HUBZone)  |  |  |  |  |  |  |
| Business networking  |  |  |  |  |  |  |
| Startups and business development  |  |  |  |  |  |  |
| Assistance in languages other than English  |  |  |  |  |  |  |
| Other, specify   |  |  |  |  |  |  |

1. Did you refer clients to any other business support programs or services?
* Yes
* No (Skip to Q7)
* Don’t know (Skip to Q7)
1. (IF YES) Which business support programs or services did you refer clients to? (select all that apply)
* SBA programs (8(a), 7(j), B2B, THRIVE, RIC, etc.)
* SBA loans (7(a), Microloan, CDC/504, etc.)
* SBA resource partners (SBDC, VBOC, SCORE, PTAC, WBC, etc.)
* Other federal business assistance programs
* State or local government business assistance programs
* Business, industry, chamber of commerce, professional organizations, or associations
* Non-SBA loans or grants
* Other business financing sources (investors, line of credit, etc.)
* Other, specify
1. Which of the following organizations has your organization ever partnered or collaborated with?  (select all that apply) [PROGRAMMER NOTE: Randomize the list’s order, excluding the ‘Other’ option]
* Business financing sources (banks, investors, etc.)
* Federal, state, local, or tribal government agencies
* Nonprofit organizations
* Business organizations (industry associations, chambers of commerce, etc.)
* Business leaders, large firms, and companies
* Universities, colleges, and schools
* Places of worship
* Other local organizations in underserved communities, specify
1. [PROGRAMMER NOTE: Display for each option endorsed in Q7] To what extent has your level of collaboration with the following organizations changed as a result of your participation in Community Navigators? [PROGRAMMER NOTE: Randomize the list’s order, excluding the ‘Other’ option]

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Stopped collaboration | Significant decrease in collaboration | Slight decrease in collaboration | No change | Slight increase in collaboration | Significant increase in collaboration | Started collaboration | Not applicable |
| Business financing sources (banks, investors, etc.)  |  |  |  |  |  |  |  |  |
| Federal, state, local, or tribal government agencies  |  |  |  |  |  |  |  |  |
| Nonprofit organizations |  |  |  |  |  |  |  |  |
| Business organizations (industry associations, chambers of commerce, etc.)  |  |  |  |  |  |  |  |  |
| Business leaders, large firms, and companies  |  |  |  |  |  |  |  |  |
| Universities, colleges, and schools  |  |  |  |  |  |  |  |  |
| Places of worship  |  |  |  |  |  |  |  |  |
| Other local organizations in underserved communities, specify |  |  |  |  |  |  |  |  |

1. Which of the following SBA programs or resource partners has your organization ever partnered or collaborated with? (select all that apply) [PROGRAMMER NOTE: Randomize the list’s order, excluding the ‘Other’ option]
* Small Business Administration (SBA) District Office
* Small Business Development Centers (SBDC)
* SCORE Association
* Women’s Business Centers (WBC)
* Veterans Business Outreach Centers (VBOC)
* U.S. Export Assistance Center (USEAC)
* Procurement Technical Assistance Center (PTAC)
* Other, specify
1. [PROGRAMMER NOTE: Display for each option endorsed in Q9] To what extent has your level of collaboration with the following SBA programs or resource partners changed as a result of your participation in Community Navigators? [PROGRAMMER NOTE: Randomize the list’s order, excluding the ‘Other’ option]

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | Stopped collaboration | Significant decrease in collaboration | Slight decrease in collaboration | No change | Slight increase in collaboration | Significant increase in collaboration | Started collaboration | Not applicable |
| Small Business Administration (SBA) District Office   |  |  |  |  |  |  |  |  |
| Small Business Development Centers (SBDC)   |  |  |  |  |  |  |  |  |
| SCORE Association  |  |  |  |  |  |  |  |  |
| Women’s Business Centers (WBC)  |  |  |  |  |  |  |  |  |
| Veterans Business Outreach Centers (VBOC)  |  |  |  |  |  |  |  |  |
| U.S. Export Assistance Center (USEAC)   |  |  |  |  |  |  |  |  |
| Procurement Technical Assistance Center (PTAC)   |  |  |  |  |  |  |  |  |
| Other, specify     |  |  |  |  |  |  |  |  |

1. Based on your experience implementing the Community Navigators Program, please indicate whether (and to what extent) the following factors acted as either BARRIERS or FACILITATORS to implementation:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Significant barrier | Slight barrier | No effect | Slight facilitator | Significant facilitator | Not applicable |
| **Program staff:** |
| Using linguistically and culturally knowledgeable staff   |  |  |  |  |  |  |
| Staffing levels  |  |  |  |  |  |  |
| **Client relations:** |
| Conducting targeted outreach to potential clients  |  |  |  |  |  |  |
| Knowledge of targeted groups and communities  |  |  |  |  |  |  |
| Clients’ linguistic or cultural issues  |  |  |  |  |  |  |
| **External partner relations:** |
| Engaging existing partners  |  |  |  |  |  |  |
| Developing new partnerships  |  |  |  |  |  |  |
| Referring clients to other business support programs or services |  |  |  |  |  |  |
| **Program-specific partner relations:** |
| Communication with other Spokes  |  |  |  |  |  |  |
| Communication with Hub   |  |  |  |  |  |  |
| Hub-provided resources, training, assistance, and/or support  |  |  |  |  |  |  |
| **Service delivery scope & resources:** |
| Geographic location or coverage  |  |  |  |  |  |  |
| Information Technology   |  |  |  |  |  |  |
| Budget  |  |  |  |  |  |  |
| **Other** |
| Please specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  |  |  |  |

1. How often did your organization conduct the following activities?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Never | Rarely | Sometimes | Often | Very often | Not applicable |
| Measured and tracked over time the demographic composition of the program’s service area (race, ethnicity, primary language spoken, gender, etc.).   |  |  |  |  |  |  |
| Offered services in (or close to) the neighborhoods where people being reached by your organization reside or have business.   |  |  |  |  |  |  |
| Offeredservices easily accessible by public transportation.  |  |  |  |  |  |  |
| Offeredt servicesavailable during evenings and weekends.  |  |  |  |  |  |  |
| Offeredservices available virtually |  |  |  |  |  |  |
| Developed and reviewed your organization’s mission statement to ensure that it prioritizes cultural competence and equitable access to services and resources.   |  |  |  |  |  |  |
| Hired staff congruent with the demographic composition of your service area (ethnicity, race, language capabilities, etc.).  |  |  |  |  |  |  |
| Considered clients’ culture, race, ethnicity, language, inequality, and other factors in developing and implementing outreach and support services.   |  |  |  |  |  |  |
| Monitored client service satisfaction, including using different languages reflecting the demographic data of the program’s service area.  |  |  |  |  |  |  |
| Engaged at various levels of the community (e.g., residents, leaders, and cultural/social organizations) to develop and implement outreach and assistance services  |  |  |  |  |  |  |
| Other, specify |  |  |  |  |  |  |

1. The evaluation team would like to describe clients’ experiences in any group trainings that Hubs and Spokes have provided. For the purpose of follow-up with clients, do you track and maintain the roster of clients who attend group trainings?
* Yes
* No (Skip to Q15)
* Don’t know (Skip to Q15)
1. (IF YES) We would like to reach out to businesses that (only) participated in group training sessions. Would you be willing to share the roster of businesses, including their email addresses, who participated in group training sessions between Sept. 1, 2021 through Sept. 1, 2022?
* Yes [[2]](#footnote-4)
* No
* Don’t know

(If Yes to 14) Thank you, we will contact you in the next few days.

1. Please provide suggestions for improving the Community Navigators program to better engage potential clients:

We thank you for your time spent taking this survey.

The results will provide suggestions for improvements to this valuable small business assistance program.

*Spoke Interview: Scheduling Request Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Spoke Representative’s Name*],

I am reaching out to thank you for your response to our Community Navigators survey, as well as to request your participation in a brief virtual interview (via Microsoft Teams) so that we can learn a bit more about your experience with the program. The interview will take no more than one hour to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential. Your feedback is essential in assisting the SBA to make improvements so that the program can better support our nation’s small businesses.

**Below is a link to Optimal’s appointment scheduling tool, which allows you to select a date and time during which you are available to participate** *(alternatively, please respond to this email with your scheduling preferences)*.

**<INTERVIEW SCHEDULING LINK (CALENDLY)>**

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Spoke Interview: Scheduling Request Reminder Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear [*Spoke Representative’s Name*],

This is just a friendly reminder to request your participation in a brief virtual interview (via Microsoft Teams) so that we can learn a bit more about your experience with Community Navigators. The interview will take no more than one hour to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential. Your feedback is essential in assisting the SBA to make improvements so that the program can better support our nation’s small businesses.

**Below is a link to Optimal’s appointment scheduling tool, which allows you to select a date and time during which you are available to participate** *(alternatively, please respond to this email with your scheduling preferences)*.

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Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Spoke Interview: Telephone Reminder Script*

Hello, my name is [*name*], and I am a [*title*] with a small business called Optimal Solutions Group. Optimal specializes in evaluation research, and we have been hired by the Small Business Administration to conduct an evaluation of the Community Navigator Program. As part of this evaluation, we are asking for feedback from Spoke representatives and staff.

I’m calling to check in and see if you’ve had a chance to review our recent email inviting you to take part in in a brief virtual interview via Microsoft Teams. The interview will take no more than one hour to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential.

***If leaving a voicemail:***

If you are interested in participating, please give us a call at (301) 306-1170, ext. 731 to provide a date and time during which you will be available to meet with us via Microsoft Teams. Thank you in advance for your cooperation!

***If respondent is on the line:***

If you are interested in participating, can you please provide a date and time during which you will be available to meet with us via Microsoft Teams?

* ***[If date/time provided]*** Great, thank you so much. We will follow-up shortly with a calendar invite that includes the link to join the interview meeting on [*selected date*] at [*selected time*]. If you have any questions in the meantime, please feel free to give us a call at (301) 306-1170, ext. 731.
* ***[If not interested]*** Thank you for your consideration. If you have any further questions about this evaluation, please feel free to give us a call at (301) 306-1170, ext. 731.

*Spoke Interview: Consent Form*

The U.S. Small Business Administration (SBA) is conducting an evaluation of the Community Navigator Pilot Program (CNPP). This program funds local organizations to assist underserved small businesses to enroll in various business assistance, training, or financing programs or services.

The interview has been designed to learn about your organization’s experience with the program, best practices, barriers and facilitators to the program implementation and outcomes. The objective of this evaluation is to determine if the program is meeting its intended outcome of reaching and supporting underserved small businesses. The evaluation will provide suggestions for improvements to this valuable small business assistance program.This is not an evaluation of any specific organization.

The SBA has hired a small business, Optimal Solutions Group, to conduct the evaluation of this program. Your responses will be kept strictly confidential, and you or your organization name will never be used in any reports produced for this evaluation. All responses will be de-identified and then these aggregated data will be provided to the SBA.

The estimated time for completing this interview is less than an hour. Your participation is completely voluntary. You have the right to not participate. You can stop participating at any time and do not have to answer any questions that you do not want to.The OMB Control No. for this survey is 3245-0425, which has an expiration date of 10/31/2025.

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

***Note:*** *In the context of this study, the term “underserved” refers to populations and communities that have been historically left out (those that have been underserved by governments).*

By clicking “I consent” below, you are consenting to participate in the study.

* I consent
* I do not consent

*Spoke Interview: Data Collection Instrument*

***Note:*** *In the context of this study, the term “underserved” refers to populations and communities that have been historically left out (those that have been underserved by governments).*

**Introduction (5 minutes)**

Please describe your organization and its mission*.* What are the goals for your organization’s participation in the Community Navigators?

**Program Implementation (30 minutes)**

1. What types of outreach activities has your network conducted to reach aspiring and existing local entrepreneurs?
2. How have you tailored activities to reach specific communities? [*Prompt: Could you describe the communities your organization serves? Are there differences in how you've tailored activities to each different community or group that you serve?]*
3. What barriers have you encountered in implementing Community Navigators?
4. What factors have enabled Community Navigators' success?
5. In order to meet local needs, have you needed to adjust or change your approach to implementation of the Community Navigators effort? [*Prompt: Were there any specific adjustments you made to the required program tasks? If so, why did you make these adjustments?]*
6. What outreach activities do you think are successful in increasing awareness of Community Navigators and/or SBA programs?
7. What outreach activities do think have not been effective in increasing awareness of Community Navigators and/or SBA programs?
8. Based on your outreach to communities [*mentioned in #2*] have you noticed any gaps in your organization’s outreach and engagement? [*list underserved communities that the respondent answered in #2]*:
9. How successful was your outreach to [*list underserved communities that the respondent answered in #2]* and why?
10. Which planned goals were the most challenging to achieve?

**Partner Relationships (10 minutes)**

1. Has your organization established any new strategic partnerships as a result of your Community Navigator efforts?
	* Briefly describe how these new strategic partnerships have affected your organization’s implementation of the Community Navigators (i.e., program innovations, resources, and/or assets, budgets, outreach, and staffing).
2. Does your organization have a system in place for monitoring the extent to which the Community Navigators Program is being implemented as planned?

*[Prompt: Organizations might conduct quality assurance reviews to assess compliance and/or variation between the implementation plan (as outlined in the proposal) and program delivery (based on quarterly performance reports and other Hub/Spoke/client data).]*

**[If yes]** What issues do you encounter when doing this work? [If issues are given] Do you employ any mitigation strategies? *[Prompt: Which ones? Tell me more about them.]*

1. Has your organizationnoticed increased engagement or communication between Spokes?

**Identified Best Practices (10 minutes)**

1. Has the CNPP increased awareness of and participation in SBA programs among business owners and entrepreneurs who you serve? Can you provide examples?
2. Based on your experiences with Community Navigators, what modifications to the program should we consider?

**Conclusion (5 minutes)**

1. Is there anything else related to Community Navigators that you would like to share?

Attachment A-3: CNPP Client Data Collection Materials

*Client Survey: SBA Introduction Email*

**RE: The Small Business Administration’s (SBA) Community Navigator Program**

Dear Community Navigator Program Participant,

We are emailing you today to learn about your participation in Community Navigators, a program administered by the SBA. The focus of Community Navigators is to reach, and support small businesses, especially those that haven’t been served in the past by SBA programs and services. The program funds local organizations to assist small businesses enroll into various business assistance, training, and financing programs and services. [*HUB/Spokes names*] are the organizations in your area supporting businesses like yours.

The SBA has hired a small business, Optimal Solutions Group (Optimal) to evaluate Community Navigators and determine how well the program is reaching its goals of supporting small businesses. Your participation will help improve this valuable small business assistance program. We will share the results of the evaluation with you in January 2024.

Within a week, Optimal will send an online survey about your experiences with the program. It will take less than 20 minutes to complete. Your participation in this survey is voluntary and your responses will be kept strictly confidential. Your name will never be used in any reports produced from this study.

The SBA values your perspective and experiences with the program. Your opinion and feedback are important in helping the SBA improve its services to America’s small businesses.

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

Thank you for your time and participation in this project.

Sincerely,

*<signature>*

Benjamin Selden, CNPP Officer at SBA

CC: Sana Ahmed Wilder, SBA

*Client Survey: Survey Invitation Email*

**RE: The Small Business Administration (SBA) Community Navigator Program**

Dear Community Navigator Program Participant,

My name is [*name*] and I am a [*title*] with Optimal Solutions Group (Optimal), which is a small business that specializes in evaluation research. Optimal has been hired by the SBA to conduct an evaluation of the Community Navigator Program, which is the program that connects small businesses like yours with local organizations like [*HUB/Spokes names*] to provide assistance, training, and financial support that can help you meet your business goals.

As part of our evaluation, we are reaching out to small business owners who have received Community Navigator services (such as those provided by [*HUB/Spokes names*]) to ask for feedback about your experience with the program. This will help the SBA to make improvements so that Community Navigators can better support your business in the future.

The survey should take no more than 20 minutes to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential. To complete the survey, please follow the link below:

<**INDIVIDUALIZED** **SURVEY LINK**>

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
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Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Client Survey: Survey Invitation Reminder Email*

**RE: The Small Business Administration (SBA) Community Navigator Program**

Dear Community Navigator Program Participant,

As you may recall, you recently received an e-mail requesting your participation in a survey about Community Navigators, which is the program that connects small businesses like yours with local organizations like [*HUB/Spokes names*] to provide various business assistance, training, and financing services. This is just a friendly reminder to ask you to participate in the survey. Your participation will help the SBA to make improvements so that Community Navigators can better support your business in the future.

The survey should take no more than 20 minutes to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential. To complete the survey, please follow the link below:

<**INDIVIDUALIZED** **SURVEY LINK**>

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Client Survey: Consent Form*

The U.S. Small Business Administration (SBA) is conducting an evaluation of the Community Navigator Pilot Program (CNPP). This program funds local organizations to assist small businesses to enroll in various business assistance, training, or financing programs or services.  {HUB/Spokes} are the organizations in your area funded to support businesses like yours.

The survey has been designed to learn about the program participants, their businesses, and their experience with the program. The objective of this evaluation is to determine if the program is meeting its intended outcome of reaching and supporting small businesses. The evaluation will provide suggestions for improvements to this valuable small business assistance program.

The SBA has hired a small business, Optimal Solutions Group (Optimal) to conduct the evaluation of this program. Your responses will be kept strictly confidential, and your name will never be used in any reports produced for this evaluation. All responses will be presented as aggregated statistics such as averages, percentages, and frequency counts. All responses will be de-identified and then these data will be provided to the SBA.

The estimated time for completing this survey is less than 20 minutes. Your participation in this survey is completely voluntary. You have the right to not participate. You can stop participating at any time and do not have to answer any questions that you do not want to.  The OMB Control No. for this survey is 3245-0425, which has an expiration date of 10/31/2025.

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

By clicking “I consent” below, you are consenting to participate in the study.

* I consent
* I do not consent

*Client Survey: Data Collection Instrument*

1. In the past 12 months, did you receive outreach (e.g., advertisements, emails, information at an event, etc.) from any organizations (e.g., local government agencies, community organizations, chambers of commerce, SBA resource partners) regarding business assistance, training, and/or financing services available in your community?
* Yes
* No (SKIP TO Q4)
* Don’t know (SKIP TO Q4)
1. In the past 12 months, did you receive outreach from any of the following organizations regarding business assistance, training, and/or financing services available in your community? (Select all that apply)
	* <insert Spoke\_name> - Community Navigator Spoke
	* <insert Hub\_name> - Community Navigator Hub
	* SBA programs (8(a), 7(j), B2B, THRIVE, RIC, etc.) [links to definitions on web survey]
	* SBA resource partners (SBDC, VBOC, PTAC, WBC, etc.) [links to definitions on web survey]
	* SBA district office
	* Other federal, state, or local government business assistance programs
	* Bank or financial institution (Community Development Financial Institutions [CDFI])
	* Private-sector business assistance program (Goldman Sachs 10k small business)
	* Industry, business, or professional association/organization, chamber of commerce
	* Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
	* Don’t know
2. In the past 12 months, did you receive any of the following types of outreach regarding business assistance, training, and/or financing services available in your community? (Select all that apply)
* E-mail or electronic mailing lists
* Websites
* Virtual events or videos
* Social media
* Direct mailing
* Phone calls, texts
* Radio, TV
* Newspapers, magazines
* In-person events and meetings in the community
* Bulletins, newsletters, and flyers in the community (places of worship, local organizations, etc.)
* Word of mouth (via friends, family, colleagues, etc.)
* Other, specify : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know
1. Moving forward, how would you prefer to receive outreach regarding business assistance, training, and/or financing services available in your community? (Select all that apply)
* E-mail or electronic mailing lists
* Websites
* Virtual events or videos
* Social media
* Direct mailing
* Phone calls, texts
* Radio, TV
* Newspapers, magazines
* In-person events and meetings in the community
* Bulletins, newsletters, and flyers in the community (places of worship, local organizations, etc.)
* Word of mouth (via friends, family, colleagues, etc.)
* Other, specify : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Don’t know
1. In the past 12-months, have you participated in any business assistance, training, and/or financing services related to your small business needs and goals? (e.g., workshops, events, counseling, etc.)
* Yes
* No
* Don’t know

[Select out non-participants: SKIP TO Q17 IF NO/DON’T KNOW TO BOTH Q1 AND Q5]

1. (IF Q5=Yes) In the past 12 months, which of the following organizations provided you with business assistance, training, and/or financing services? (Select all that apply)
	* <insert Spoke\_name> - Community Navigator Spoke
	* <insert Hub\_name> - Community Navigator Hub
	* SBA programs (8(a), 7(j), B2B, THRIVE, RIC, etc.) [links to definitions on web survey]
	* SBA resource partners (SBDC, VBOC, PTAC, WBC, etc.) [links to definitions on web survey]
	* SBA district office
	* Other federal, state, or local government business assistance programs
	* Bank or financial institution (Community Development Financial Institutions [CDFI])
	* Private-sector business assistance program (Goldman Sachs 10k small business)
	* Industry, business, or professional association/organization, chamber of commerce
	* Other, specify: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
	* Don’t know

[IF Q2 Hub or Spoke or Q6 Hub or Spoke is endorsed, go to Q7; otherwise, if none Hub and Spoke endorsed skip to Q17]

1. In the past 12 months, which of the following business assistance, training, and/or financing services have you received through *[HUB/Spoke]*? (Select all that apply) [PROGRAMMER NOTE: Randomize the list’s order]
* Financial literacy, credit counseling
* Business operations (business plan, accounting, marketing, import/export, HR, etc.)
* Contracting and procurement
* Access to capital
* Disaster preparedness, recovery
* Loan/program applications
* Business certifications (WOSB, 8(a), HUBZone)
* Business networking
* Startups and business development
* Other, specify
* Don’t know
1. Please rate your level of satisfaction with the following services or activities provided by *[HUB/Spoke]* over the past 12 months: [PROGRAMMER NOTE: Randomize the list’s order]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|   | Highly dissatisfied  | Dissatisfied  | Neither satisfied nor dissatisfied  | Satisfied  | Highly satisfied  | Not Applicable  |
| Ease of engagement   (e.g., scheduling an appointment)   |   |   |   |   |   |   |
| Outreach (emails, phone calls, information at an event, etc.)    |   |   |   |   |   |   |
| Application process for business assistance, training, and/or financing services    |   |   |   |   |   |   |
| Delivery of business assistance, training, and/or financing services |   |   |   |   |   |   |
| Referrals to other organizations for additional business assistance, training, and/or financing services    |   |   |   |   |   |   |
| Overall experience   |   |   |   |   |   |   |
| Other, specify: |   |   |   |   |   |   |

1. As a result of your participation in services through *[HUB/Spoke]* over the past 12 months, please rate the change in your **knowledge** of the following programs/organizations:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | No change | Slight increase | Moderate increase | Considerable increase  | Substantial increase | Not Applicable |
| SBA programs (8(a), 7(j), B2B, THRIVE, RIC, etc.)  |  |  |  |  |  |  |
| SBA loans (7(a), Microloan, CDC/504, etc.)  |  |  |  |  |  |  |
| SBA resource partners (SCORE, SBDC, VBOC, PTAC, WBC, etc.)  |  |  |  |  |  |  |
| SBA District Office |  |  |  |  |  |  |
| Other federal, state, or local government business assistance programs  |  |  |  |  |  |  |
| Business, industry, chamber of commerce, professional organization, or association  |  |  |  |  |  |  |
| Non-SBA loans or grants  |  |  |  |  |  |  |
| Other business financing sources (investors, etc.)  |  |  |  |  |  |  |
| Other, specify  |  |  |  |  |  |  |

1. As a result of your participation in services through *[HUB/Spoke]* over the past 12 months, please rate the change in your **trust** in the following SBA programs/partners: [PROGRAMMER NOTE: Randomize the list’s order]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Substantially decreased | Decreased | No change | Increased  | Substantially increased | Not applicable |
| SBA programs (8(a), 7(j), B2B, THRIVE, RIC, etc.)  |  |  |  |  |  |  |
| SBA loans (7(a), Microloan, CDC/504, etc.)  |  |  |  |  |  |  |
| SBA resource partners (SCORE, SBDC, VBOC, PTAC, WBC, etc.)  |  |  |  |  |  |  |
| SBA district office |  |  |  |  |  |  |
| Other, specify  |  |  |  |  |  |  |

1. As a result of your participation in services through *[HUB/Spoke]* over the past 12 months, please rate the change in your **skills, abilities, and/or confidence** to complete the following activities:

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Substantially decreased | Decreased | No change | Increased  | Substantially increased | Not applicable |
| Identifying business assistance, training, and/or financing services that are relevant to my business needs and goals  |  |  |  |  |  |  |
| Applying for business assistance, training, and/or financing services that are relevant to my business needs and goals  |  |  |  |  |  |  |
| Resolving any application issues |  |  |  |  |  |  |
| Obtaining small business loans and/or grants  |  |  |  |  |  |  |
| Other activities related to business assistance, training, and/or financing services (specify):  |  |  |  |  |  |  |

1. To what extent do you **agree or disagree** with the following statements about your experience working with *[HUB/Spoke]* over the past 12 months?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree  | Neither agree nor disagree | Agree  | Strongly agree | Not applicable |
| The staff understand people like me. |  |  |  |  |  |  |
| The staff are knowledgeable about people in my community.   |  |  |  |  |  |  |
| The staff respect my values and beliefs.  |  |  |  |  |  |  |
| I feel represented among staff. |  |  |  |  |  |  |
| I trust the staff.  |  |  |  |  |  |  |
| Services are provided in, or close to, my neighborhood |  |  |  |  |  |  |
| Services are easily accessible by public transportation.  |  |  |  |  |  |  |
| Services are available during evenings and weekends.  |  |  |  |  |  |  |
| Services are available virtually  |  |  |  |  |  |  |
| If I need it, there are documents, materials, or services in multiple languages easily available for me.  |  |  |  |  |  |  |
| If I need it, there is sufficient accommodation for people with disabilities.  |  |  |  |  |  |  |
| Other, specify  |  |  |  |  |  |  |

1. Have you ever been referred by *[HUB/Spoke]* to participate in any other business support programs or services?
* Yes
* No (Skip to Q15)
* Don’t know (Skip to Q15)
1. (IF YES) Which business support programs or services have you been referred to? (Select all that apply)
* SBA programs (8(a), 7(j), B2B, THRIVE, RIC, etc.)
* SBA loans (7(a), Microloan, CDC/504, etc.)
* SBA resource partners (SCORE, SBDC, VBOC, PTAC, WBC, etc.)
* SBA district office
* Other federal business assistance programs
* State or local government business assistance programs
* Business, industry, chamber of commerce, professional organization, or association
* Non-SBA loans or grants
* Other business financing sources (investors, etc.)
* Other, specify
* Don’t know
1. Have the services provided by [*HUB/Spoke*] allowed you (or your business) to achieve new business goals/outcomes that you had not achieved prior to your participation in the program?
* Yes
* No (SKIP TO Q17)
* Don’t know (SKIP TO Q17)
1. (IF YES) To what extent do you agree or disagree with the following statements about the services provided by [*HUB/Spoke*]?

**The services provided by [*HUB/Spoke*] have allowed me to…** [PROGRAMMER NOTE: Randomize the list’s order]

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | Strongly disagree | Disagree | Neither agree nor disagree | Agree | Strongly agree | Not applicable |
| Improve my business management practices (business plan, accounting, marketing, import/export, HR, etc.) |  |  |  |  |  |  |
| Win new contracts and/or subcontracts |  |  |  |  |  |  |
| Gain new financing opportunities |  |  |  |  |  |  |
| Develop new networks and collaborations |  |  |  |  |  |  |
| Achieve business growth (employment, revenue, profits, etc.) |  |  |  |  |  |  |
| Continue to stay in business |  |  |  |  |  |  |
| Open a new business |  |  |  |  |  |  |
| Other, specify |  |  |  |  |  |  |

1. Please, provide suggestions for improving your knowledge, trust, and engagement in SBA business assistance programs or services:

We thank you for your time spent taking this survey.

The results will provide suggestions for improvements to this valuable small business assistance program.

*Client Interview: Scheduling Request Email*

**RE: The Small Business Administration (SBA) Community Navigator Program**

Dear Community Navigator Program Participant,

I am reaching out to thank you for your response to our Community Navigators survey, as well as to request your participation in a brief virtual interview (via Microsoft Teams) so that we can learn a bit more about your experience with the program. The interview will take no more than 30 minutes to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential. Your feedback is essential in assisting the SBA to make improvements so that Community Navigators can better support small businesses like yours.

**Below is a link to Optimal’s appointment scheduling tool, which allows you to select a date and time during which you are available to participate** *(alternatively, please respond to this email with your scheduling preferences)*.

**<INTERVIEW SCHEDULING LINK (CALENDLY)>**

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Client Interview: Scheduling Request Reminder Email*

**RE: The Small Business Administration (SBA) Community Navigator Program**

Dear Community Navigator Program Participant,

This is just a friendly reminder to request your participation in a brief virtual interview (via Microsoft Teams) so that we can learn a bit more about your experience with Community Navigators. The interview will take no more than 30 minutes to complete. Your participation is completely voluntary, and your responses will be kept strictly confidential. Your feedback is essential in assisting the SBA to make improvements so that Community Navigators can better support small businesses like yours.

**Below is a link to Optimal’s appointment scheduling tool, which allows you to select a date and time during which you are available to participate** *(alternatively, please respond to this email with your scheduling preferences)*.

**<INTERVIEW SCHEDULING LINK (CALENDLY)>**

* If you have questions about this study, please contact Benjamin Selden, CNPP Officer at SBA, via email at [Benjamin.Selden@sba.gov](https://optsol-my.sharepoint.com/personal/emcmanus_optsol_onmicrosoft_com/Documents/Desktop/Benjamin.Selden%40sba.gov)
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Thank you for your time and cooperation.

Sincerely,

Mark Turner

Project Director

Optimal Solutions Group, LLC

*Client Interview: Consent Form*

The U.S. Small Business Administration (SBA) is conducting an evaluation of the Community Navigator Pilot Program (CNPP). This program funds local organizations to assist small businesses to enroll in various business assistance, training, or financing programs or services.  {HUB/Spokes} are the organizations in your area funded to support businesses like yours.

The interview has been designed to learn about your business and your experience with the program. The objective of this evaluation is to determine if the program is meeting its intended outcome of reaching and supporting underserved small businesses. The evaluation will provide suggestions for improvements to this valuable small business assistance program.

The SBA has hired a small business, Optimal Solutions Group to conduct the evaluation of this program. Your responses will be kept strictly confidential, and your name will never be used in any reports produced for this evaluation. All responses will be de-identified and then these aggregated data will be provided to the SBA.

The estimated time for completing this interview is less than 30 minutes. Your participation is completely voluntary. You have the right to not participate. You can stop participating at any time and do not have to answer any questions that you do not want to.The OMB Control No. for this survey is 3245-0425, which has an expiration date of 10/31/2025.

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* If you have questions about your participation in this study, please contact Ellen McManus, Research Analyst at Optimal, via phone at (301) 306-1170 ext. 731 or via email at SBASurveys@optimalsolutionsgroup.com

By clicking “I consent” below, you are consenting to participate in the study.

* I consent
* I do not consent

*Client Interview: Data Collection Instrument*

**Introduction (5 minutes)**

1. Could you please describe your business and your work?
	* What are your business goals?
	* Could you share what influenced your decision to start your own business, and start on this journey?
2. What are your business needs?
	1. What organization(s) provide you with business trainings or counseling services?

How did you find out about the business support services provided by *[organization]*?

**Program (15 minutes)**

1. Within the past 12 months, what business trainings, events, and/or webinars have you attended?
2. How satisfied or dissatisfied are you with the services you have received and why?
3. Has CNPP allowed you to do something that you couldn’t or didn’t do before your participation in the program?
4. Would you recommend any of these services to others and why?
5. Have you received referral(s) to any other organizations or programs providing business support services?
	1. If so, what type of service did they provide?
	2. What organization(s) you were referred to?

**Feedback (7 minutes)**

1. Since receiving business support services, have you learned about other services offered by the SBA like Women’s Business Centers (WBC), SCORE, or Small Business Development Centers (SBDC)?

**Conclusion (3 minutes)**

1. Is there anything else that you would like to share?
1. Respondents will be sent a follow-up email with instructions on how to securely transmit the roster of clients that participated in group training activities. [↑](#footnote-ref-3)
2. Respondents will be sent a follow-up email with instructions on how to securely transmit the roster of clients that participated in group training activities. [↑](#footnote-ref-4)