Capacity Building Assistance Program: Data Management, Monitoring, and Evaluation

Attachment 12

Training and Technical Assistance Follow-Up Survey

The Training and Technical Assistance Follow-up Survey collects information from Centers for Disease Control and Prevention (CDC) directly funded organizations that received capacity building assistance (CBA) through training and/or technical assistance (TA) from CBA providers funded by the CDC.

Our records indicate that one or more program staff from your organization has received training, TA or a combination of both from one or more CBA providers. You have been identified by your Program Development and Implementation Branch (PDIB) project officer as the ideal point of contact for following up on the programmatic outcomes of the CBA training and/or technical assistance.

The purpose of this survey is to gather information CDC and CBA providers can use to better serve your organization as your staff seeks to start or sustain implementation of interventions and public health strategies.

Participation in this survey is voluntary. If you participate, your name and individual responses will not be reported. Your responses will be combined with the responses of others to see if there are any patterns in the feedback. Completing the questions should take approximately 18 minutes.

The results of this survey will provide valuable information that can be used to improve CBA training and technical assistance services so your organization continues to strengthen its ability to improve performance and maximize impact. Working together, we will end the HIV epidemic. We appreciate your feedback and assistance.

If you feel that you are not the correct point of contact for completing the survey, please email us at CBAEvaluations@cdc.gov.

[Please click "Next" to continue.]

Training

The following questions:
- Confirm the trainings received by your staff
- Seek your feedback about whether and how a training helped your organization
- Ask you to identify barriers to implementation of an intervention or public health strategy
- Help you request technical assistance

Summary of Trainings

1. Our records indicate that staff at your organization received the following classroom and/or eLearning trainings in the past 6 months. Is your organization funded by CDC to implement the intervention or public health strategy related to the training listed below?

Training Name [Pre-populated fields below]	Funded by CDC to implement	
[Training #1]	O Yes	O No
[First and last name of staff member]		
[Training #2]	O Yes	O No
[First and last name of staff member]		
[Training #3]	O Yes	O No
[First and last name of staff member]		

1.a. *[Health Departments ONLY]* Did your staff attend the training with the intent to: 1) support health department implementation or activities (e.g., development of standard operating procedures), or 2) support implementation by partners or grantees in the field (e.g., CBOs, local health departments)?

Training Name [Pre-populated fields below]	Primary reason for staff attending training		
[Training #1]	O To support health department implementation or activities (e.g., development of standard operating procedures)	O To support implementation by partners or grantees in the field (e.g., community-based organizations, local health departments)	O Both
[Training #2]	O To support health department implementation or activities (e.g., development of standard operating procedures)	O To support implementation by partners or grantees in the field (e.g., community-based organizations, local health departments)	O Both
[Training #3]	O To support health department implementation or activities (e.g., development of standard operating procedures)	O To support implementation by partners or grantees in the field (e.g., community-based organizations, local health departments)	O Both

CTS PROGRAMMING NOTE: No additional survey questions are asked for trainings that receive a response of "Staff attended to support activities that were/ are carried out by agencies that we fund". If all the trainings have a response of "Staff attended to support activities that were/ are carried out by agencies that we fund", proceed to the "Thank You" message.]

Implementation Status

This section asks about the implementation status of each intervention or public health strategy for which your staff received training. For this survey, we define implementation as conducting the intervention with clients/patients. [CTS survey programming will repeat Questions 2 through 14 (as applicable) for each training.]

2. What is the current status of your organization's implementation of [Training Name #1]?
   ○ Decided not to implement
   ○ Planning or preparing to implement, but have not started
   ○ Implementing à Go to Question 4
   ○ Not applicable (staff did not take the training with an intent to implement) à Go to "Thank You" message

3. Is your organization planning to implement [Training Name #1] within the next 12 months?
   ○ Yes, within the next 3 months
   ○ Yes, within the next 6 months
   ○ Yes, within the next 12 months
   ○ No
   ○ Don't know/ not sure

4. Prior to training, had your organization ever implemented [Training Name #1]?
   ○ Yes
   ○ No à Go to Question 9
   ○ Don't know/ not sure à Go to Question 9

5. For [Training Name #1], did your organization stop or take a break in implementing (i.e., the intervention was not delivered to clients) before staff attended this training?
   ○ Yes
   ○ No à Go to Question 9
   ○ Don't know/ not sure à Go to Question 9

6. Did staff attend [Training Name #1] to address the break in implementation?
   ○ Yes
   ○ No à Go to Question 9
   ○ Don't know/ not sure à Go to Question 9

7. Did the training that staff received help your organization to resume implementation?
   ○ Yes à Go to Question 9
   ○ No
   ○ Don't know/ not sure

8. Do you know how to request technical assistance from CDC to help you implement this intervention/public health strategy?
   ○ Yes
   ○ No *[CTS programming note: provide a pop-up box with information about how to request TA]*

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Barriers Affecting Implementation

9. To what extent have you encountered the following barriers to implementing [Training Name #1]?

Barriers	Not at all	Very little	Some -what	To a great extent	Don't know/ not sure	Not applic- able
Difficulty recruiting target population	O	O	O	O	O	O
Difficulty retaining target population	O	O	O	O	O	O
Difficulty adapting the intervention/ public health strategy to our clients	O	O	O	O	O	O
Turnover of trained staff	O	O	O	O	O	O
Lack of funding	O	O	O	O	O	O
Lack of time to implement	O	O	O	O	O	O
Lack of frontline staff buy-in about the use of the intervention/ public health strategy	O	O	O	O	O	O
Intervention/ public health strategy is too complicated	O	O	O	O	O	O
Lack of knowledge about how to implement the intervention/ public health strategy	O	O	O	O	O	O
Implementing this intervention/ public health strategy is not a priority for our organization	O	O	O	O	O	O
Which other barriers have you encountered? [Open text field- *CTS survey programming will allow entry of up to three additional barriers. The 6 response options to the right will appear for each barrier.*]	O	O	O	O	O	O

10. Does your organization want to be contacted by a CBA provider to get additional training and/or technical assistance to help your organization address the following implementation barriers that you identified for [Training Name #1]?

[CTS survey programming will pre-populate the table with the barriers that received a response of "Somewhat" and "To a great extent", and "Don't know".]

| Intervention Name [Pre-populated fields below]	Contact me	
Barrier #1	O Yes	O No
Barrier #2	O Yes	O No
Barrier #3	O Yes	O No
Other [Open text field]	O Yes	O No

[CTS pop-up message if one or more "Yes" is selected: "We will have a CBA provider to contact you so that you can get additional training and/or technical assistance."]

NEXT STEPS:

If staff only received training and <u>no</u> TA, the following submission instructions and "Thank You" message is displayed:

> *Click on "submit" to confirm your responses and complete the survey. Upon successful submission, you will be redirected to the Effective Interventions webpage. [Automatic redirect of survey to Effective Interventions webpage: https://effectiveinterventions.cdc.gov]*

> *Thank you for your participation! Please contact CBAEvaluations@cdc.gov if you have any questions about the survey.*
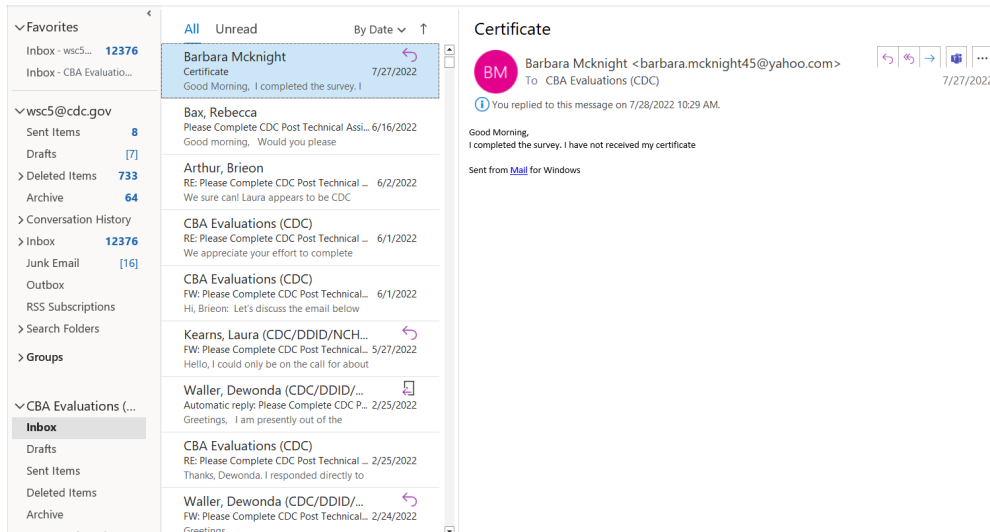
CTS Programming Note: If staff at the organization <u>also</u> received TA, proceed to the TA portion of the survey.

Technical Assistance

The following set of questions:
- Confirms the technical assistance (TA) received by your staff
- Seeks your feedback about whether and how TA helped your organization
- Helps you request additional TA

Summary of Technical Assistance (TA) Requests

Our records indicate that, in the past 6 months, staff at your organization completed the TA requests listed in the table below. (Note: If desired, use the CTS request number below to access full details of the TA provided.)

CTS Request # [Pre-populated fields below]	Request Date [Pre-populated fields below]
[CTS Request #]	[Date]
[First and last name of staff member]	
[CTS Request #]	[Date]
[First and last name of staff member]	
[CTS Request #]	[Date]
[First and last name of staff member]	

Overall Quality of TA

Thinking about your organization's overall experience related to all of the TA that your staff received during the past 6 months, please respond to the following questions.

1. Overall, to what extent do you agree with the following statements about the TA that staff received in the past 6 months?

	Strongly agree	Agree	Disagree	Strongly disagree	Don't know/ not sure	Not applic-able
Timeliness						
The TA was delivered in a timely manner (i.e., the length of time between requesting TA and completing TA)	O	O	O	O	O	O
Relevance						
The TA was what our organization requested (e.g., covered the correct topic)	O	O	O	O	O	O
The TA was appropriate for our organization's policies, practices, and procedures	O	O	O	O	O	O
The TA was appropriate for our local context (e.g., economic, political, and cultural conditions)	O	O	O	O	O	O
Usefulness						
The TA was what our organization needed (e.g., addressed a problem that my organization faces)	O	O	O	O	O	O
The TA provided solutions that improved our work with our target population(s)	O	O	O	O	O	O
Overall Quality						
The TA improved my organization's ability to provide services	O	O	O	O	O	O
The TA led to changes in program practices	O	O	O	O	O	O
The TA led to changes in organizational policies	O	O	O	O	O	O

2. *[CTS survey programming will only ask this question if one or more of the statements in Question 1 receives a "Disagree" or "Strongly disagree" response.]* When you selected disagree or strongly disagree, were you thinking about a specific CTS request number?
   - O Yes
   - O No à Go to Question 4
   - O Not sure/ Don't know à Go to Question 4

3. Select the related CTS request number and describe areas of concern or unmet expectations.

CTS Request # [Pre-populated fields below]	Area(s) of concern or unmet expectations
[CTS Request #]	
[First and last name of staff member]	

[CTS Request #]	
[First and last name of staff member]	

4. Do you have any suggestions for improving TA services, events, activities, products, or resources?
   - ○ Yes
   - ○ No à Go to Question 6
   - ○ Not sure/ Don't know à Go to Question 6

5. Please share your suggestions for improving TA services, events, activities, products, or resources.
   [TEXT BOX]

Use of TA

6. How did your organization use the TA obtained during the past 6 months (i.e., since completing TA)? (Select all that apply.)

   - ○ To implement **clinical HIV testing**, specifically to:
     - o Assess needs
     - o Assess resources
     - o Set goals and desired outcomes
     - o Address post-training barriers (e.g., individualized staff skill development)
     - o Assess structural supports in place (e.g., supportive policies, necessary technology)
     - o Select an intervention or public health strategy
     - o Plan implementation of an intervention or public health strategy
     - o Assess organizational capacity to implement an intervention or public health strategy
     - o Increase organizational capacity to implement an intervention or public health strategy
     - o Assess sustainability of an intervention or public health strategy
     - o Plan sustainability of an intervention or public health strategy
     - o Evaluate the effectiveness of the implemented intervention or public health strategy
     - o Other [Open text field]

   - ○ To implement **nonclinical HIV testing**, specifically to:
     - o Assess needs
     - o Assess resources
     - o Set goals and desired outcomes
     - o Address post-training barriers (e.g., individualized staff skill development)
     - o Assess structural supports in place (e.g., supportive policies, necessary technology)
     - o Select an intervention or public health strategy
     - o Plan implementation of an intervention or public health strategy
     - o Assess organizational capacity to implement an intervention or public health strategy
     - o Increase organizational capacity to implement an intervention or public health strategy
     - o Assess sustainability of an intervention or public health strategy
     - o Plan sustainability of an intervention or public health strategy
     - o Evaluate the effectiveness of the implemented intervention or public health strategy
     - o Other [Open text field]

○ To implement **services to prevent new HIV infections and reduce transmission of HIV for persons with HIV**, specifically to:
  o Assess needs
  o Assess resources
  o Set goals and desired outcomes
  o Address post-training barriers (e.g., individualized staff skill development)
  o Assess structural supports in place (e.g., supportive policies, necessary technology)
  o Select an intervention or public health strategy
  o Plan implementation of an intervention or public health strategy
  o Assess organizational capacity to implement an intervention or public health strategy
  o Increase organizational capacity to implement an intervention or public health strategy
  o Assess sustainability of an intervention or public health strategy
  o Plan sustainability of an intervention or public health strategy
  o Evaluate the effectiveness of the implemented intervention or public health strategy
  o Other [Open text field]

○ To implement **services to prevent new HIV infections and reduce transmission of HIV for HIV-negative persons**, specifically to:
  o Assess needs
  o Assess resources
  o Set goals and desired outcomes
  o Address post-training barriers (e.g., individualized staff skill development)
  o Assess structural supports in place (e.g., supportive policies, necessary technology)
  o Select an intervention or public health strategy
  o Plan implementation of an intervention or public health strategy
  o Assess organizational capacity to implement an intervention or public health strategy
  o Increase organizational capacity to implement an intervention or public health strategy
  o Assess sustainability of an intervention or public health strategy
  o Plan sustainability of an intervention or public health strategy
  o Evaluate the effectiveness of the implemented intervention or public health strategy
  o Other [Open text field]

○ For **HIV activities integration**, specifically to:
  o Assess needs
  o Assess resources
  o Set goals and desired outcomes
  o Address post-training barriers (e.g., individualized staff skill development)
  o Assess structural supports in place (e.g., supportive policies, necessary technology)
  o Select an intervention or public health strategy
  o Plan implementation of an intervention or public health strategy
  o Assess organizational capacity to implement an intervention or public health strategy
  o Increase organizational capacity to implement an intervention or public health strategy
  o Assess sustainability of an intervention or public health strategy
  o Plan sustainability of an intervention or public health strategy
  o Evaluate the effectiveness of the implemented intervention or public health strategy
  o Other [Open text field]

- To implement **structural interventions**, specifically to:
    - Assess needs
    - Assess resources
    - Set goals and desired outcomes
    - Address post-training barriers (e.g., individualized staff skill development)
    - Assess structural supports in place (e.g., supportive policies, necessary technology)
    - Select an intervention or public health strategy
    - Plan implementation of an intervention or public health strategy
    - Assess organizational capacity to implement an intervention or public health strategy
    - Increase organizational capacity to implement an intervention or public health strategy
    - Assess sustainability of an intervention or public health strategy
    - Plan sustainability of an intervention or public health strategy
    - Evaluate the effectiveness of the implemented intervention or public health strategy
    - Other [Open text field]

- Other [Open text field]

Barriers to Using TA

7. Is your organization experiencing barriers to applying the TA received?
    - Yes
    - No à Go to "Thank You" message
    - Not sure/ Don't know à Go to "Thank You" message

8. Please describe the barriers.
   [TEXT BOX]

9. Will additional TA from CDC help you to address the barrier(s)?
    - Yes
    - No à Go to "Thank You" message
    - Not sure/ Don't know

10. What additional assistance do you think would help your organization to address the barriers?
    [TEXT BOX] *[CTS programming note: provide a pop-up box with information about how to request TA]*

End of Survey

Click on "submit" to confirm your responses and complete the survey. Upon successful submission, you will be redirected to the Effective Interventions webpage. [Automatic redirect of survey to Effective Interventions webpage: https://effectiveinterventions.cdc.gov]

Thank you for your participation! Please contact CBAEvaluations@cdc.gov if you have any questions about the survey.