**TITLE OF INFORMATION COLLECTION:** Child Care State Capacity Building Center Feedback on Training for Trainers

**OMB control number: 0970-0401**

**Expiration date: May 31, 2027**

# Email Invitation/Script

Subject line: Your Feedback on [Event Name]

Good morning/afternoon,

The Child Care State Capacity Building Center (SCBC) is collecting feedback about its technical assistance services. According to our records, you recently participated in SCBC’s [NAME OF EVENT]. We would like to get your feedback so that we can improve our future technical assistance efforts.

If you want to provide feedback, please respond to this short, voluntary survey using this link by [DATE]: [LINK TO SURVEY].

Information will be kept private and the survey is estimated to take about 5 minutes.

Thank you!

The Child Care State Capacity Building Center

# Feedback Form

**Technical Assistance Activity: Child Care State Capacity Building Center Training for Trainers**

| Question Number | Question/Prompt | Response Options |
| --- | --- | --- |
|  | **Demographics**The following questions aim to help SCBC better understand the diverse needs of its audience and better tailor its services. |  |
| 1 | Please select your role:  | * Community member
* Consultant (e.g., mental health, health)
* Direct service provider (child care staff, home visiting staff, etc.)
* Federal Office of Child Care staff (Central or Regional Office)
* Higher education professional
* Partner organization, government professional (not a Child Care and Development Fund [CCDF] Lead Agency)
* State/territory CCDF Lead Agency staff
* State-level coach or specialist
* Tribal CCDF Lead Agency staff
* Technical assistance specialist (federal/National Center staff)
* Training and technical assistance professional (coach, specialist, mentor, etc.)
* Other role (please describe):
 |
| 2 | How many years have you held your current role? | * Less than 1 year
* 1–2 years
* 3–5 years
* More than 5 years
 |
|  | **Delivery of Technical Assistance** The following questions aim to get your feedback about SCBC’s delivery of technical assistance (TA). |  |
|  | **Content Relevance** |  |
| 3 | Indicate your level of agreement or disagreement with the following statements 1. The content provided was relevant to my current work.
 | 1 = Strongly disagree2 = Disagree3 = Agree4 = Strongly agreeN/A = Not applicable |
| 4 | Was the training content too simple, too advanced, or just about right for you? | 1 = Far too advanced2 = A bit too advanced3 = About right4 = A bit too simple5 = Far too simple |
|  | **Satisfaction** |  |
| 5 | Indicate your level of agreement or disagreement with the following statements. 1. Overall, I am happy/satisfied with the quality and content of the Training for Trainers.2. The TA materials were helpful. | 1 = Strongly disagree2 = Disagree3 = Agree4 = Strongly agreeN/A = Not applicable |
| 9 | Which aspects of the training for trainers were most useful for you? | *Open-ended response* |
| 10 | What could SCBC do to improve future trainings for trainers? | *Open-ended response* |
|  | **Facilitator(s)** |  |
| 4 | Indicate your level of agreement or disagreement with the following statements. 1. The facilitator(s) was knowledgeable and experienced with the content.
2. The facilitator(s) gave clear explanations and examples.
3. The facilitator(s) valued/values the contributions of each participant.
4. The facilitator(s) fostered connections among the participants.
 | 1 = Strongly disagree2 = Disagree3 = Agree4 = Strongly agreeN/A = Not applicable |
|  | **Impact of Technical Assistance**The following questions aim to get your feedback about the impact of the TA provided by SCBC.  |  |
| 5 | Indicate your level of agreement or disagreement with the following statements. 1. The TA increased my awareness and knowledge of [INSERT MAIN TOPIC/FOCUS OF PRESENTATION].
2. I can use the TA or resources to make my work better or easier.
3. I learned something during this session that I can use in my current work.
 | 1 = Strongly disagree2 = Disagree3 = Agree4 = Strongly agreeN/A = Not applicable |
| 6 | Indicate how likely you are to do each of the following:1. Review the suggested TA materials or resources.
2. Use strategies or information learned in the presentation.
3. Share what I learned from the training for trainers with my colleagues.
 | 1 = Very unlikely 2 = Unlikely3 = Likely4 = Very likely5 = Already using |
| 7 | Please share any examples of how you used or plan to use what you learned from this training for trainers.  | *Open-ended response* |
|  | **General Feedback**The following questions aim to get your feedback about the TA provided by SCBC. |  |
| 11 | What other topics or resources would you like to see addressed by TA? | *Open-ended response* |
|  | **Thank you for participating!** |  |

Paperwork Reduction Act Statement: The purpose of this information collection is to collect feedback from recipients participating in training and technical assistance activities provided by the Child Care State Capacity Building Center. Public reporting burden for this collection of information is estimated to average 5 minutes per respondent, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a voluntary collection of information. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. The OMB # is 0970-0401, and the expiration date is 5/31/2027. If you have any comments on this collection of information, please contact Caroline Faux at caroline.faux@icf.com.

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