

Standard Evaluation Survey for the National Center on Parent, Family, and Community Engagement's (NCPFCE) Training and Technical Assistance Offerings and Resources

Evaluation Item Question Bank

Below is the bank of questions (along with accompanying introductory text) from which questions are sampled for NCPFCE evaluations. Items with italicized and blue colored text will be updated to reflect content or other available information specific to the training/evaluation/resource. A sample instrument (digital survey) is available upon request. Once approved by OMB, the survey will also contain the control number, expiration date, and required text determined by OMB about the Paperwork Reduction Act.

PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to collect feedback to inform improve future programmatic TTA, services, and resources. Public reporting burden for this collection of information is estimated to average 5 minutes per response, 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 [date]. If you have any comments on this collection of information, please contact [contact info].

ITEMS FOR NCPFCE EVALUATIONS

Evaluation Item	Response Scale	Notes
Demographic Questions		
What program setting do you work with? (check all that apply)	Checkboxes: • Head Start • Early Head Start • Early Head Start - Child	

	Care Partnership (EHS/CCP) • Child Care • Other: Please describe	
What is your role?/What is your current role?/Please select the role that is closest to your position/primary role (select one answer)	Radio buttons: - o Teacher/Teacher Aide/Teacher Assistant - o Family Child Care Provider - o Home Visitor - o Family Services Manager/Family Services Coordinator - o Family Support Worker/Family Services Worker/Family Advocate/Family Engagement Specialist/Family Educator - o Education/Child Development Manager - o Disabilities Manager/Staff - o Nutrition Manager/Staff - o Health Manager/Staff - o Mental Health Manager/Mental Health Services Staff - o Other Manager or Coordinator - o Director/Assistant Director/Associate Director - o Coach - o Parent/Caregiver - o Family Member - o TA Provider	

	☐ State & Tribal Staff ☐ Non-Managerial Fiscal/Accounting Staff ☐ Administrative Assistant/Staff ☐ ERSEA-related role ☐ Data Specialist ☐ Father/Male Engagement Specialist ☐ Federal Staff ☐ CEO, CFO, or Executive ☐ Other: Please describe _____	
What Head Start Region do you represent?/Please select your Region/What is your Region?/In what Region was the Head Start program you were involved with located? (select one answer)	Radio buttons: ☐ Region I ☐ Region II ☐ Region III ☐ Region IV ☐ Region V ☐ Region VI ☐ Region VII ☐ Region VIII ☐ Region IX ☐ Region X ☐ Region XI ☐ Region XII	
In which state/territory do you reside?/Please select your state/territory: (select one answer)	Radio buttons: ☐ Alabama (AL) ☐ Alaska (AK) ☐ American Samoa (AS) ☐ Arizona (AZ) ☐ Arkansas (AR) ☐ California (CA)	

	- o Colorado (CO) - o Connecticut (CT) - o Delaware (DE) - o District of Columbia (DC) - o Florida (FL) - o Georgia (GA) - o Guam (GU) - o Hawaii (HI) - o Idaho (ID) - o Illinois (IL) - o Indiana (IN) - o Iowa (IA) - o Kansas (KS) - o Kentucky (KY) - o Louisiana (LA) - o Maine (ME) - o Maryland (MD) - o Massachusetts (MA) - o Michigan (MI) - o Minnesota (MN) - o Mississippi (MS) - o Missouri (MO) - o Montana (MT) - o Nebraska (NE) - o Nevada (NV) - o New Hampshire (NH) - o New Jersey (NJ) - o New Mexico (NM) - o New York (NY) - o North Carolina (NC) - o North Dakota (ND) - o Northern Mariana Islands (MP) - o Ohio (OH)	
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	☐ Oklahoma (OK) ☐ Oregon (OR) ☐ Pennsylvania (PA) ☐ Puerto Rico (PR) ☐ Rhode Island (RI) ☐ South Carolina (SC) ☐ South Dakota (SD) ☐ Tennessee (TN) ☐ Texas (TX) ☐ Utah (UT) ☐ Vermont (VT) ☐ Virgin Islands (VI) ☐ Virginia (VA) ☐ Washington (WA) ☐ West Virginia (WV) ☐ Wisconsin (WI) ☐ Wyoming (WY)	
How many years have you been working in the early childhood field?/Years in early childhood field (select one answer)	Radio buttons: ☐ 0-2 years ☐ 3-5 years ☐ 6-10 years ☐ 11-20 years ☐ More than 20 years	
How long have you been in the role you identified above?/How long have you held your current role?/Years in role (select one answer)	Radio buttons: ☐ 0-2 years ☐ 3-5 years ☐ 6-10 years ☐ 11-20 years ☐ More than 20 years	
What is your race and/or ethnicity? (Select all that apply)	Checkboxes: ☐ American Indian or Alaska Native ☐ Asian ☐ Black or African American	

	• Hispanic or Latino • Middle Eastern or North African • Native Hawaiian or Pacific Islander • White	
Demographic Questions Used in Select Cases		
How did you view this webinar/event?	Radio buttons: - o I watched the live broadcast. - o I viewed the webinar on-demand.	<i>For events that are also offered on-demand.</i>
Do you work with/specifically support <i>[insert role/group/population of interest]</i> in your current role(s)?	Radio buttons: - o Yes - o No	
Have you explored/used <i>[insert topic/resource/content of interest]</i> before today/this event?	Radio buttons: - o Yes - o No	
Are you affiliated with Early Head Start (EHS) or Head Start (HS)?	Radio buttons: - o Early Head Start (EHS) - o EHS - Home Based - o Early Head Start - Child Care Partnership (EHS/CCP) - o Head Start (HS) - o Other: Please describe	<i>For Program and Family Voice (PFV) Committee evaluations</i>
HS/Program Affiliation	Open-ended response box	<i>For PFV Committee evaluations</i>
Currently enrolled in or graduated from Early Head Start	Radio buttons:	<i>For PFV Committee</i>

(EHS)/Head Start (HS)?	☐ Currently enrolled in EHS/HS ☐ Graduated from EHS/HS ☐ Other: Please describe _____	<i>evaluations</i>
Number of children in EHS/HS or graduated from EHS/HS?	Radio buttons: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ Other (please specify) _____	<i>For PFV Committee evaluations</i>
Event/Resource Feedback		
<i>Overall Satisfaction</i>		
I was satisfied with the quality of the presentation/session/training/event/webinar/institute/meeting/course .	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
<i>Presenter Quality</i>		
The presenter(s) was/were knowledgeable in the content area.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
The presenter(s) was/were effective in engaging participants.	Likert Scale (Horizontal) ☐ Strongly Disagree	

	- o Disagree - o Agree - o Strongly Agree	
The presenter(s) was/were effective in communicating key information.	Likert Scale (Horizontal) - o Strongly Disagree - o Disagree - o Agree - o Strongly Agree	
Content Fit/Relevance		
The content of the presentation/session/training/event/webinar/institute/course/resource was relevant to my work.	Likert Scale (Horizontal) - o Strongly Disagree - o Disagree - o Agree - o Strongly Agree	
Please let us know whether you found the content presented in the session/training/event/webinar/institute/course/resource to be too simple, too advanced, or just about right.	Likert Scale (Horizontal) - o Far Too Simple - o A Bit Too Simple - o About Right - o A Bit Too Advanced - o Far Too Advanced	
The content of the presentation/session/training/event/webinar/institute/course/resource was culturally and linguistically responsive.	Likert Scale (Horizontal) - o Strongly Disagree - o Disagree - o Agree - o Strongly Agree	

The content of the presentation/session/training/event/webinar/institute/course/resource led me to be more culturally responsive in my work.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
This presentation/session/training/event/webinar/institute/course/resource helped me to take on culturally-responsive work.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
Intended Application of Knowledge		
I learned something during the presentation/session/training/event/webinar/institute/course that I plan to use in my work/ outside of the meeting/training/event/course.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
Please give an example of one action step you will take as a result of the knowledge you gained from this presentation/session/training/event/webinar/institute/meeting/course/resource /Please identify one concept or skill you learned that you will use in your work/outside of the meeting/training/event/course.	Open-ended response box	

What factors, if any, may prevent you from using what you learned? (select all that apply)	Checkboxes ☐ Lack of time ☐ Lack of funds/resources ☐ Lack of personnel ☐ Staff turnover ☐ Lack of support/guidance from program leadership ☐ Misalignment with parent needs/goals ☐ Not a good fit ☐ Lack of staff engagement ☐ Other (please specify)	
Knowledge Change		
How much did the presentation/session/training/event/webinar/institute/meeting/course/resource increase your knowledge of the topic(s) presented?	Radio Buttons ☐ No Increase ☐ Small Increase ☐ Moderate Increase ☐ Large Increase	
The presentation/session/training/event/webinar/institute/course/resource deepened my knowledge of the topic(s) presented.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
BEFORE [this] presentation/session/training/event/webinar/institute/course/using this resource, my knowledge of the content/topics addressed can best be described as...	Likert Scale (Horizontal) ☐ I had no knowledge of the content/topic addressed ☐ I had minimal knowledge of the content/topic addressed ☐ I had moderate knowledge of the content/topic addressed ☐ I had a high level of	<i>Alternate knowledge change question</i>

	knowledge of the content/topic addressed	
AFTER [this] presentation/session/training/event/webinar/institute/course/using this resource , my knowledge of the content/topics addressed can best be described as...	Likert Scale (Horizontal) - o I have no knowledge of the content/topic addressed - o I have minimal knowledge of the content/topic addressed - o I have moderate knowledge of the content/topic addressed - o I have a high level of knowledge of the content/topic addressed	<i>Alternate knowledge change question</i>
Strengths and Areas for Improvement/Follow Up		
What do you think worked well in the presentation/session/training/event/webinar/institute/meeting/course/resource ?	Open-ended response box	
How can we improve this presentation/session/training/event/webinar/institute/meeting/course/resource ?/in the future?	Open-ended response box	
Please provide one piece of feedback (either positive or constructive) about the presentation/session/training/event/webinar/institute/meeting/course/resource .	Open-ended response box	<i>Alternate strengths/improvement question</i>
Following this presentation/session/training/event/webinar/institute/meeting/course , what type(s) of follow-up support or resource(s) would be most useful to you on this topic?	Open-ended response box	
Event/Resource Feedback Questions Used in Select Cases		
Please select the sessions you attended:	Dropdown Menu/Radio Buttons: [List of sessions]	<i>Used for events in which session-level evaluation data is needed/requested.</i>

		<i>Bracketed text will be unique to the event.</i>
Please explain/If you wish to share any additional information pertaining to the previous question, please do so here:	Open-ended response box	<i>Used to collect additional information/ask for elaboration on a prior response/question</i>
The presenter(s) was/were responsive to participants' questions.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
The resources provided during the presentation/session/training/event/webinar/institute/course were relevant and useful for my work.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	<i>Alternate relevance/usefulness question</i>
This presentation/session/training/event/webinar/institute/course/resource confirmed my knowledge of the topics presented.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
I feel prepared to apply what I learned in this presentation/session/training/event/webinar/institute/course/resource .	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	<i>Alternate intended application of knowledge question</i>
The environment was supportive of learning.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
What aspects of the presentation/session/training/event/webinar/institute/course/resource were most useful?	Open-ended response box	
What aspects were least useful?		

I plan to share the information received during the presentation/session/training/event/webinar/institute/meeting/course with others.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	
What topics would you like to learn more about in the future?	Open-ended response box	
I believe that the stated learning outcome(s) for this presentation/session/training/event/ webinar/institute/course were met [Learning Objective] /The following stated objective was met: [Learning Objective]	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	<i>Used in evaluations for events/trainings in which CEUs are offered (e.g., iPD courses, national Institutes)</i>
The content of the module was easy to navigate.	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree ☐ Strongly Agree	<i>Used for iPD course evaluations</i>
Other comments/Is there anything else you would like to share?	Open-ended response box	
What tools from the [resource] seem most applicable to the grant recipient staff/families you currently work with?	Open-ended response box	
Reflect on how you might integrate information from the [resource] into your practice as you interact with grant recipient staff/families.	Open-ended response box	
The [resource] will help to increase my knowledge and confidence with supporting/implementing [content/topic] strategies/strategies related to [content/topic] .	Likert Scale (Horizontal) ☐ Strongly Disagree ☐ Disagree ☐ Agree	

	o Strongly Agree	
Do you anticipate any barriers or challenges when using the [resource]?	o Yes o No	

Intro/Welcome Text Used in Evaluations

Thank you for participating in the [event name] event on [date]. To help ensure the quality of our services, we ask that you complete the following feedback survey. This brief survey is voluntary, and you do not have to answer any questions if you wish. All feedback will be kept private. Your responses are anonymous, and results will be summarized in a way that cannot identify any individual. To further protect your privacy please refrain from including personally identifiable information in open-ended responses. The survey takes about 5 minutes to complete. Please note that some survey items use a multi-point scale. If you are taking the survey on your phone, you may have to scroll down to see the entire scale. When finished, click the "Submit" button at the bottom of the final page to record your responses. You are free to move throughout the survey and change responses until you click "Submit".	<i>Intro text used for single-day event evaluation</i>
Thank you for participating in [Day X] of [event name], on [date]. To help ensure the quality of our services, we ask that you complete the following feedback survey. This brief survey is voluntary, and you do not have to answer any questions if you wish. All feedback will be kept private. Your responses are anonymous, and results will be summarized in a way that cannot identify any individual. To further protect your privacy please refrain from including personally identifiable information in open-ended responses. The survey takes about 5 minutes to complete. Please note that some survey items use a multi-point scale. If you are taking the survey on your phone, you may have to scroll down to see the entire scale. When finished, click the "Submit" button at the bottom of the final page to record your responses.	<i>Intro text for first day and any non-final day evaluation of a multi-day event</i>
Thank you for participating in [Day X] of [event name] between [date] and [date]. To help ensure the quality of our services, we ask that you complete the following feedback survey. This survey has two	<i>Intro text for the final day evaluation of a multi-day event</i>

sections addressing (1) the specific sessions offered on the [X] day of the event and (2) the event overall. Please complete both sections, as relevant. This brief survey is voluntary, and you do not have to answer any questions if you wish. All feedback will be kept private. Your responses are anonymous, and results will be summarized in a way that cannot identify any individual. To further protect your privacy please refrain from including personally identifiable information in open-ended responses. The survey takes about 5 minutes to complete. Please note that some survey items use a multi-point scale. If you are taking the survey on your phone, you may have to scroll down to see the entire scale. When finished, click the "Submit" button at the bottom of the final page to record your responses.	
Thank you for participating in [course name] e-learning course. To help ensure the quality of our services and to qualify for CEUs from this course, we ask that you complete the following feedback survey. This brief survey is voluntary and your feedback will be kept private. The survey takes about 5 minutes to complete. When finished, click the "Submit" button at the bottom of the final page to record your responses. You are free to move throughout the survey and change responses until you click "Submit".	<i>Intro text used for evaluations of iPD courses</i>
We are interested in learning more about your thoughts and experiences with [resource name] and invite you to provide feedback using the following survey. Please note that some survey items use a multi-point scale. If you are taking the survey on your phone, you may have to scroll down to see the entire scale. When finished, click the "Submit" button at the bottom of the final page to record your responses. You are free to move throughout the survey and change responses until you click "Submit". Thanks so much for taking the time to provide your thoughts!	<i>Intro text used for evaluations on specific resources or content.</i>
Would you prefer to complete this evaluation in Spanish? Select your preferred language from the dropdown menu in the top right corner of this window.	<i>Included in the intro of all evaluations that have been translated into Spanish</i>