

Attachment A

CSAT GPRA 30-Day Post-Training and 30 Day Post-Technical Assistance Feedback Surveys

**Substance Abuse and Mental Health Services Administration (SAMHSA)
Center for Substance Abuse Treatment (CSAT)
CSAT GPRA 30-Day Post-Training Feedback Survey**

You were selected to participate in this feedback survey because of your participation in the Center for Substance Abuse Treatment (CSAT) Government Performance and Results Act (GPRA) Training. This survey is for all who attended a CSAT GPRA Trainings for Discretionary Services grantees.

The purpose of this survey is to allow training participants to provide feedback that will help us improve the GPRA trainings. All responses to this survey will be kept confidential, and participation is voluntary. Your identity will not be connected to the information that you provide, and your information will be grouped with other respondents' information for presentation purposes. All survey results will be presented in aggregate form so that individual responses cannot be identified. We greatly value your feedback.

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0197. Public reporting burden for this collection of information is estimated to average 5 minutes per client per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 7-1044, Rockville, Maryland, 20857.

Thank you for taking the time to complete this survey.

CSAT GPRA 30 Day Post-Training Feedback Form

General Information				
Grant number:				
Training date(s) attended:				
Training Topic:	<input type="checkbox"/> Data Entry	<input type="checkbox"/> Tool Administration	<input type="checkbox"/> Follow-Up	
Please provide your feedback about the CSAT technical assistance (TA) you received.				
1. Please indicate how satisfied you are with the <i>information</i> that you received at the training you recently attended. (Check one option)				
<input type="checkbox"/> Very Satisfied (Go to 1a)	<input type="checkbox"/> Satisfied (Go to 1a)	<input type="checkbox"/> Neutral (Go to 2)	<input type="checkbox"/> Dissatisfied (Go to 1b)	<input type="checkbox"/> Very Dissatisfied (Go to 1b)
1a. If you were satisfied with the information you received, why were you satisfied? (Choose all that apply.) <input type="checkbox"/> It provided me the information I needed to train others. <input type="checkbox"/> It answered questions that I had. <input type="checkbox"/> It provided useful strategies for doing my job. <input type="checkbox"/> It made me think about ways of improving what I do. <input type="checkbox"/> Other (Specify) _____	1b. If you were dissatisfied with the information you received, why were you dissatisfied? (Choose all that apply.) <input type="checkbox"/> It did not provide me the information I needed to train others. <input type="checkbox"/> It did not answer questions that I had. <input type="checkbox"/> It did not provide useful strategies for doing my job. <input type="checkbox"/> It did not make me think about ways of improving what I do. Other (Specify) _____			
2. Please indicate how satisfied you are with the <i>materials</i> that you received at the training you recently attended. (Check one option)				
<input type="checkbox"/> Very Satisfied (Go to 2a)	<input type="checkbox"/> Satisfied (Go to 2a)	<input type="checkbox"/> Neutral (Go to 3)	<input type="checkbox"/> Dissatisfied (Go to 2b)	<input type="checkbox"/> Very Dissatisfied (Go to 2b)
2a. If you were satisfied with the materials you received, why were you satisfied? (Choose all that apply.) <input type="checkbox"/> Materials provided relevant information. <input type="checkbox"/> Materials were easy to use. <input type="checkbox"/> Materials were easy to understand. <input type="checkbox"/> Other (Specify) _____	2b. If you were dissatisfied with the materials you received, why were you dissatisfied? (Choose all that apply.) <input type="checkbox"/> Materials did not provide relevant information. <input type="checkbox"/> Materials were difficult to use. <input type="checkbox"/> Materials were difficult to understand. Other (Specify) _____			
3. Have you shared the information and/or materials you received from the training with other staff?				
<input type="checkbox"/> Yes (Go to 3a) <input type="checkbox"/> No (Go to 4)				
3a. If you have shared the training information and/or materials, please indicate how have you shared it. (Choose all that apply.)	<input type="checkbox"/> I loan the materials to staff. <input type="checkbox"/> I use the information to train staff. <input type="checkbox"/> I answer questions that staff has about the information/materials. <input type="checkbox"/> I made presentations to staff using the information. Other (Specify) _____			
4. If you have suggestions for improving the training that you received or a particular topic or issue that you would like to see covered in future trainings, please indicate them below.				

**Substance Abuse and Mental Health Services Administration (SAMHSA)
Center for Substance Abuse Treatment (CSAT)
CSAT GPRA 30-Day Post-Technical Assistance Feedback Survey**

You were selected to participate in this feedback survey because of your completed request for Center for Substance Abuse Treatment (CSAT) Government Performance and Results Act (GPRA) Technical Assistance. This survey is for all requestors of CSAT GPRA Technical Assistance for Discretionary Services grantees.

The purpose of this survey is to allow TA requestors to provide feedback that will help us improve the GPRA TA. All responses to this survey will be kept confidential, and participation is voluntary. Your identity will not be connected to the information that you provide, and your information will be grouped with other respondents' information for presentation purposes. All survey results will be presented in aggregate form so that individual responses cannot be identified. We greatly value your feedback.

Public Burden Statement: An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0197. Public reporting burden for this collection of information is estimated to average 5 minutes per client per year, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, 1 Choke Cherry Road, Room 7-1044, Rockville, Maryland, 20857.

Thank you for taking the time to complete this survey.

CSAT GPRA 30 DAY POST-TECHNICAL ASSISTANCE FEEDBACK FORM

General Information	
Grant number:	
TA delivery date(s):	
TA topic(s):	
Please provide your feedback about the CSAT technical assistance (TA) you received.	
1. Please indicate how satisfied you are with the <i>information</i> that you received to help you to resolve your programs issues or problems. (Check one option)	
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
Very Satisfied (Go to 1a)	Satisfied (Go to 1a)
Neutral (Go to 2)	Dissatisfied (Go to 1b)
	Very Dissatisfied (Go to 1b)
1a. If you were satisfied with the information you received, why were you satisfied? (Choose all that apply.) <input type="checkbox"/> It provided me the information I needed to train others. <input type="checkbox"/> It answered questions that I had. <input type="checkbox"/> It provided useful strategies for doing my job. <input type="checkbox"/> It made me think about ways of improving what I do. <input type="checkbox"/> Other (Specify) _____	1b. If you were dissatisfied with the information you received, why were you dissatisfied? (Choose all that apply.) <input type="checkbox"/> It did not provide me the information I needed to train others. <input type="checkbox"/> It did not answer questions that I had. <input type="checkbox"/> It did not provide useful strategies for doing my job. <input type="checkbox"/> It did not make me think about ways of improving what I do. <input type="checkbox"/> Other (Specify) _____
2. Please indicate how satisfied you are with the <i>materials</i> that you received help you to resolve your program's issues or problems. (Check one option)	
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
Very Satisfied (Go to 2a)	Satisfied (Go to 2a)
Neutral (Go to 3)	Dissatisfied (Go to 2b)
	Very Dissatisfied (Go to 2b)
2a. If you were satisfied with the materials you received, why were you satisfied? (Choose all that apply.) <input type="checkbox"/> Materials provided relevant information. <input type="checkbox"/> Materials were easy to use. <input type="checkbox"/> Materials were easy to understand. <input type="checkbox"/> Other (Specify) _____	2b. If you were dissatisfied with the materials you received, why were you dissatisfied? (Choose all that apply.) <input type="checkbox"/> Materials did not provide relevant information. <input type="checkbox"/> Materials were difficult to use. <input type="checkbox"/> Materials were difficult to understand. <input type="checkbox"/> Other (Specify) _____
3. Have you shared the information and/or materials you received from the training with other staff?	<input type="checkbox"/> Yes (Go to 3a) <input type="checkbox"/> No (Go to 4)
3a. If you have shared the TA information and/or materials, please indicate how have you shared it. (Choose all that apply.)	<input type="checkbox"/> I loan the materials to staff. <input type="checkbox"/> I use the information to train staff. <input type="checkbox"/> I answer questions that staff has about the information/materials. <input type="checkbox"/> I made presentations to staff using the information. <input type="checkbox"/> Other (Specify) _____
4. If you have suggestions for improving the TA that you received, please indicate them below.	

Attachment B

Initial Email for CSAT GPRA 30-Day Post-Training and 30 Day Post-TA Feedback Surveys

**Substance Abuse and Mental Health Services Administration (SAMHSA)
Center for Substance Abuse Treatment's (CSAT)
CSAT GPRA 30-Day Post-Training Feedback Survey**

Thank you for attending the CSAT GPRA Training that was held [MONTH, DAY, YEAR]. All those who attended the CSAT GPRA Training are being asked to complete a feedback survey.

PLEASE TAKE A FEW MINUTES TO COMPLETE THE POST-TRAINING FEEDBACK SURVEY BY CLICKING ON THE FOLLOWING LINK (<http://XXXXXX>). The feedback survey will take approximately 5 minutes to complete. All responses to this survey will be kept confidential, and participation is entirely voluntary. Your feedback will help us to improve future trainings and is greatly valued.

If you have any questions about the content of this survey or are in need of assistance regarding the completion of this survey, please contact the GPRA Training staff at 1-800-203-0398 between 8:00 a.m. and 4:00 p.m. Eastern Time (Mon-Fri) or contact them via email at GPRA-Training@Danya.com.

As a reminder, if you have additional questions regarding:

Data/IT issues, usernames/passwords, questions about the GPRA Tool:

Call the GPRA Help Desk at 1-888-507-9351 between 8:00 a.m. and 7:00 p.m. Eastern Time (Mon-Fri) or contact them via email at CSAT-GPRA@Westat.com.

Technical Assistance:

Contact Louis Podrasky at (202) 403-6820 or via email at Lpodrasky@AIR.org

CSAT GPRA Trainings:

Call the CSAT GPRA Training line at 1-800-203-0398 between 8:00 a.m. and 4:00 p.m. Eastern Time (Mon-Fri) or contact them via email at GPRA-Training@Danya.com.

Programmatic Issues:

Contact your Government Project Officer (GPO). If you are not sure who he/she is, contact the CSAT GPRA Help Desk.

Sincerely,
GPRA Training Staff

**Substance Abuse and Mental Health Services Administration (SAMHSA)
Center for Substance Abuse Treatment's (CSAT)
CSAT GPRA 30-Day Post-Technical Assistance Feedback Survey**

Dear [GRANTEE REQUESTOR NAME]:

Thank you for requesting the CSAT GPRA Technical Assistance that was completed on [MONTH, DAY, YEAR]. As requestor of the TA, you are being asked to complete a feedback survey.

PLEASE TAKE A FEW MINUTES TO COMPLETE THE ATTACHED POST-TECHNICAL ASSISTANCE SURVEY AND RETURN IT BY REPLYING TO THIS EMAIL. The feedback survey will take approximately 5 minutes to complete. All responses to this survey will be kept confidential, and participation is entirely voluntary. Your feedback will help us to improve future TA and is greatly valued.

If you did not attend the TA session provided, please speak with your staff that did attend the TA session and summarize their feedback on one survey form.

If you have any questions about the content of this survey or are in need of assistance regarding the completion of this survey, please contact Louis Podrasky at (202) 403-6820 or via email at Lpodrasky@AIR.org.

Sincerely,
Louis Podrasky
Senior Program Specialist

Attachment C

Follow-up Email CSAT GPRA 30-Day Post-Training and 30 Day Post-TA Feedback Surveys

**Substance Abuse and Mental Health Services Administration (SAMHSA)
Center for Substance Abuse Treatment's (CSAT)
CSAT GPRA 30-Day Post-Training Feedback Survey**

Thank you again for attending the CSAT GPRA training that was held [MONTH, DAY, YEAR]. All those who attended the CSAT GPRA training are being asked to complete a feedback survey.

As survey responses are anonymous, we do not know exactly who completed survey and who did not. If you have already completed the survey, thank you very much! If you have not completed the survey, this is our second and last request for you to complete it.

PLEASE TAKE A FEW MINUTES TO COMPLETE THE POST-TRAINING FEEDBACK SURVEY BY CLICKING ON THE FOLLOWING LINK (<http://XXXXXX>). The feedback survey will take approximately 5 minutes to complete. All responses to this survey will be kept confidential, and participation is entirely voluntary. Your feedback will help us to improve future trainings and is greatly valued.

If you have any questions about the content of this survey or are in need of assistance regarding the completion of this survey, please contact the GPRA Training staff at 1-800-203-0398 between 8:00 a.m. and 4:00 p.m. Eastern Time (Mon-Fri) or contact them via email at GPRA-Training@Danya.com.

As a reminder, if you have additional questions regarding:

Data/IT issues, usernames/passwords, questions about the GPRA Tool:

Call the GPRA Help Desk at 1-888-507-9351 between 8:00 a.m. and 7:00 p.m. Eastern Time (Mon-Fri) or contact them via email at CSAT-GPRA@Westat.com.

Technical Assistance:

Contact Louis Podrasky at (202) 403-6820 or via email at Lpodrasky@AIR.org

CSAT GPRA Trainings:

Call the CSAT GPRA Training line at 1-800-203-0398 between 8:00 a.m. and 4:00 p.m. Eastern Time (Mon-Fri) or contact them via email at GPRA-Training@Danya.com.

Programmatic Issues:

Contact your Government Project Officer (GPO). If you are not sure who he/she is, contact the CSAT GPRA Help Desk.

Sincerely,
GPRA Training Staff

**Substance Abuse and Mental Health Services Administration (SAMHSA)
Center for Substance Abuse Treatment's (CSAT)
CSAT GPRA 30-Day Post-Technical Assistance Feedback Survey**

Dear [GRANTEE REQUESTOR NAME]:

Thank you again for requesting the CSAT GPRA Technical Assistance that was completed on [MONTH, DAY, YEAR]. As requestor of the TA, you are being asked to complete a feedback survey.

As responses are anonymous, we do not know exactly who completed survey and who did not. If you have already completed the survey, thank you very much! If you have not completed the survey, this is our second and last request for you to complete it.

PLEASE TAKE A FEW MINUTES TO COMPLETE THE ATTACHED POST-TECHNICAL ASSISTANCE SURVEY AND RETURN IT BY REPLYING TO THIS EMAIL. The feedback survey will take approximately 5 minutes to complete. All responses to this survey will be kept confidential, and participation is entirely voluntary. Your feedback will help us to improve future TA and is greatly valued.

If you did not attend the TA session provided, please speak with your staff that did attend the TA session and summarize their feedback on one survey form.

If you have any questions about the content of this survey or are in need of technical assistance regarding the completion of this survey, please contact Louis Podrasky at (202) 403-6820 or via email at Lpodrasky@AIR.org.

This is our second and last contact request for you to complete the feedback survey. I hope that you will take the time to complete the feedback survey, as your feedback is very important to us.

Sincerely,
Louis Podrasky
Senior Program Specialist