

For assistance with this survey, please contact Kelly Davila at the Polis Center at 317-274-4510 or davilak@iu.edu.

* 1. What is the name of your agency?

* 2. How many staff members does your agency employ?

Full time

Part time

Temporary, seasonal,
and volunteer

* 3. Please provide your contact information.

First and last name:

Title:

Email:

Phone:

* 4. Please select the geographic area(s) in which your agency provides its services.

Near Eastside

Far Eastside

Northwest / Midtown

Near Westside

* 5. Select the appropriate area(s) below which describe the services your agency provides.

Early childhood education

Post-secondary / adult education

Post-secondary / adult career development

* 6. What software programs does your agency use to manage client data? Please select all that apply.

- ClientTrack
- ETO (Efforts to Outcomes)
- Infocus Solutions
- Microsoft Access
- Microsoft Excel
- Salesforce
- A database or system required by a parent organization (please list name of software below)
- We do not have a client management software program
- Other (please specify):

* 7. If United Way offered your agency a chance to purchase a site license for Efforts to Outcomes (ETO) client management software at a discounted rate, would your organization be interested?

- My agency already uses ETO.
- Yes
- Maybe
- No

Comments:

* 8. Does your agency currently collect or could your agency start collecting the following information about **YOUR AGENCY'S PROGRAMS**:

	Currently collect	Do not currently collect but could start collecting within 6 months	Do not currently collect and do not plan to
Program information, including name, location, start and end dates, and service area.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program curriculum information or program agenda, including the number of sessions required to complete the program and associated milestones.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Program outcome information, including average client enrollment and number of clients successfully completing the program.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

* 9. Does your agency currently collect or could your agency start collecting the following information about **YOUR CLIENTS**:

	Currently collect	Do not currently collect but could start collecting within 6 months	Do not collect and do not plan to
Client or family identification numbers (assigned by your agency)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Client contact information, including address, email, or phone number	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Client demographic information, including age, date of birth, gender, race, ethnicity, or marital status	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Client employment information, including employment status, employer, or location of workplace	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Client education information, including school student attends, grade level, or highest level of education	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Client income information, including income level or number of working adults in the household	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Client family information, including spouse's name, children's name, or parent's name	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

* 10. Does your agency currently collect or could your agency start collecting the following information about each **CLIENT'S PARTICIPATION** in your programs or services:

	Currently collect	Do not currently collect but could start collecting within 6 months	Do not collect and do not plan to
Program name, type, and progress to program completion	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Number of times client attended sessions or received services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Enrollment start and end dates	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

* 11. Does your agency currently collect or could your agency start collecting the following information about each **CLIENT'S CHILDHOOD EDUCATION OUTCOMES**:

	Currently collect	Do not currently collect but could start collecting within 6 months	Do not collect and do not plan to
Children enrolled in childcare rated PTQ level 3 or 4	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Children assessed for kindergarten readiness using ISTAR-KR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Students passing standardized testing	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Students' attendance, suspension, expulsion, or progression to the next grade level	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

* 12. Does your agency currently collect or could your agency start collecting information about each **CLIENT'S ADULT EDUCATION AND FINANCIAL STABILITY OUTCOMES:**

	Currently collect	Do not collect but could start collecting within 6 months	Do not collect and do not plan to
Adults enrolled in post-secondary education, training, or certification programs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults employed after completion of training or education programming	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults maintaining or increasing income, net worth, or credit scores	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Adults reporting that they earn a living wage	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

* 13. Does your agency currently collect or could your agency start collecting the following information about each **CLIENT'S BASIC NEEDS OUTCOMES:**

	Currently collect	Do not collect but could start collecting within 6 months	Do not collect and do not plan to
Individuals receiving housing assistance, including emergency shelter or rental / mortgage assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Individuals receiving utility or transportation assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Individuals receiving meals or food security assistance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Comments:

* 14. Approximately how many client records are in your database? (That is, if you export all of your data to a single spreadsheet, approximately how many rows would be in the file?)

* 15. When does your agency collect client data?

- Only at the time the client signs up for services
- Once per year (annually) after the client signs up
- 1-2 times per year after the client signs up
- 2-3 times per year after the client signs up
- More than 3 times per year after the client signs up
- Other (please specify):

* 16. Does your agency collect the same information from each client?

- Yes
- No

Comments:

* 17. From which clients does your agency collect information?

- All clients
- Subset of clients (e.g., only those in specific programs)
- Other (please specify):

* 18. How often does your agency update information about its existing clients (including demographic information)?

- At each interaction
- At a regular interval (please specify in the comment box below)
- Not at a regular interval
- Never

Comments:

* 19. Does someone on staff have the ability to export client record data (not summaries) into one of the following formats: Excel, .csv, .dbf, Access, XML:

- Yes
- No

Comments:

* 20. Which formats can you export data? (select all that apply)

Excel

CSV

DBF

Access

XML

Other (please specify):

21. Please provide the contact information of a staff member who can do this:

First and last name:

Title:

Email:

Phone #:

* 22. What barrier(s) prevent you from being able to export client record data? Select all that apply.

Staff limitations

Software limitations

Other (please specify):

* 23. Is there a staff member at your agency who is responsible for managing client data?

Yes

No

Comments:

24. Please provide the contact information of a staff member who can do this:

First and last name:

Title:

Email:

Phone #:

* 25. Are the appropriate staff members at your agency properly trained to collect information from clients, including recording, updating, and managing client data?

Yes

No

Comments:

26. Please list any barriers to collecting or managing client data at your agency. These may include limitations due to time, staff training, or workloads/capacity.



Thank you!