This document lists 19 questions from the PARTNER question bank that is included in each PARTNER account. The wording here is suggested wording and we encourage you to modify it for your own community/cultural contexts. The entire survey is modifiable. The PARTNER validated survey has been used in over 4000 communities in all 50 states and over 40 countries, to help networks identify needs, leverage resources efficiently, evaluate the strength (and gaps) among member relationships, and ensure that networks have the capacity to address the needs of their community. Read this <u>article</u> for more information on how the metrics within the PARTNER Default survey were developed.

NOTE: This survey and the questions within it are only approved for use with the PARTNER CPRM platform. To learn how to license use of our survey instrument, please contact us. Visit our FAQs for more information or contact us at partnertool@visiblenetworklabs.com.

Consent:

By starting the survey, you are agreeing to participate. Your participation is voluntary, and you can stop at any time. There are no known risks to participate in this survey. If you have questions about your participation in the survey, please reply to the email invitation you received, or contact the PARTNER team at partnertool@visiblenetworklabs.com.

Instructions:

Thank you for taking this survey. To begin, you will be asked to answer a few questions about your own organization. You will then be asked to answer questions about other organizations.

Answer all questions from the perspective of your organization, rather than yourself as an individual. Feel free to check with others in your organization for more information.

At any time, you can save the responses and continue the survey later. When complete, you can review your responses and modify them, if required.

Q#	Question Text	Question Response Options
1	How long have you been in this position (in months)?	1. >1 month 2. 1-3 months 3. 3-6 months 4. 6-12 months 5. 1-3 years 6. 4-6 years 7. 7-9 years 8. 10+ years
2	Leveraging resources is a key function of a network. Please indicate what your organization/program/department contributes, or can potentially contribute, to this network (choose as many as apply). • Note: Throughout the survey you can define community collaborative by whatever will be the most recognizable to the individuals being asked to respond, typically the name of the network, coalition, system, etc. This should be changed everywhere there is red text.	 Advocacy Community Connections Content area expertise Data Resources including data sets, collection and analysis Facilitation/Leadership Fiscal Management (e.g. acting as fiscal agent) Funding In-Kind Resources (e.g., meeting space) Info/ Feedback IT/web resources (e.g. server space, web site development, social media) Paid Staff Volunteers and Volunteer staff Other, please specify:
3	What is your <u>organization's</u> most important contribution to <u>this network</u> ?	The responses a respondent chooses in Q2 will populate as possible responses for Q3.

4	Outcomes of this network's work include (or could potentially include): (choose all that apply).	1. Community Support 2. Improved community outcomes 3. Improved communication 4. Improved Resource Sharing 5. Improved services 6. Increased Knowledge Sharing 7. New Sources of Data 8. Public Awareness 9. Policy, law and/or regulation 10. Reduction of Disparities
5	Which is this network's most important outcome?	The responses a respondent chooses in Q4 will populate as possible responses for Q5.
6	How successful has this network been at reaching its goals? Note: You can add the specific goals the network is working toward achieving. That will give respondents specific goals to keep in mind as they answer this question.	1. Very Unsuccessful 2. Unsuccessful 3. Neutral 4. Successful 5. Very Successful
7	To what extent do each of the following aspects of collaboration contribute to this success? Please rate each from Not at All to A Great Deal. 1. Bringing together diverse stakeholders 2. Meeting regularly 3. Exchanging info/knowledge 5. Sharing resources 6. Creation of informal relationships 7. Collective decision-making 8. Having a shared mission, goals, and vision	1. Not at all 2. A small amount 3. A fair amount 4. A great deal
8	A goal of this project is to visualize and map the network of connections in the ecosystem of organizations that are working to	Respondents choose from the uploaded bounded list.

	improve [area of focus] in [geographical region or population of focus].	
	From the list, select <u>organizations/programs/departments</u> with which you have an established relationship (either formal or informal). In subsequent questions you will be asked about your relationships with these organizations/programs/departments in the context of this network.	
	NOTE: Your organization is not listed below because you are representing the organization in the survey you are taking now and cannot choose your own organization as a partner to answer questions about.	
9	Please describe how your relationship with each of these partners was developed [pick all that apply].	 We don't have a relationship yet Through the network's committees, task forces, trainings, focus groups, or other related activities Our relationship was not developed through the network, but the network work has deepened our relationship Through a partner of a network partner agency The state mandated the partnership for grant funding. Through other community venues/work not related to the network Completely by accident (relationship was not related to work at all, for example we met at a grocery store) Other Don't Know
10	At what level of collaboration is your relationship with this organization/program/department [note: the responses increase in level of collaboration]? Awareness of this organization: We're aware of what this organization does (e.g., understanding of services, offered, resources available, mission goals)	 None Awareness Cooperative Activities Coordinated Activities Integrated Activities

	Cooperative Activities: involves exchanging information, attending meetings together, and offering resources to partners (Example: Informs other programs of RFA release) Coordinated Activities: Include cooperative activities in addition to intentional efforts to enhance each other's capacity for the mutual benefit of programs. (Example: Separate granting programs utilizing shared administrative processes and forms for application review and selection.)	
	Integrated Activities: In addition to cooperative and coordinated activities, this is the act of using commonalities to create a unified center of knowledge and programming that supports work in related content areas. (Example: Developing and utilizing shared priorities for funding effective prevention strategies. Funding pools may be combined.)	
11	What kinds of activities does your relationship with this partner entail (Select all that apply)?	 Advocacy Attend Events Client Referrals Collect/Store Data Conduct Research Develop standards and tools Fund Research Exchange general information Legal/Regulation Change Provide Training Service Delivery Share resources Technical Assistance Other

12	This partnership has (Select all that apply):	 Been informative only (we only exchange information, knowledge about resources, etc.) Improved my organization's capacity Led to an exchange of resources Led to improved services or supports Led to new program development Not resulted in any systems change Not resulted in any systems change, but we anticipate that it will 	
The	The following set of six questions make up the PARTNER Value and Trust Questions.		
13	To what extent does this <u>organization/program/department</u> have_power and influence to impact the overall mission of the <u>network?</u> *Power/Influence: The organization/program/department holds a prominent position in the community by being powerful, having influence, success as a change agent, and showing leadership.	 Not at all A small amount A fair amount A great deal 	
14	What is this organization/program/department's level of involvement in the network? *Level of Involvement: The organization/program/department is strongly committed and active in the partnership and gets things done.	 Not at all A small amount A fair amount A great deal 	
15	To what extent does this organization/program/department/s contribute resources to the network? *Contributing Resources: The organization/program/department brings resources to the partnership like funding, information, or other	 Not at all A small amount A fair amount A great deal 	

16	How reliable is the <u>organization/program/department</u> ? *Reliable: This organization/program/department is reliable in terms of following through on commitments.	 Not at all A small amount A fair amount A great deal 		
17	To what extent does the <u>organization/program/department</u> share a mission with the <u>network's</u> mission and goals? *Mission Congruence: this organization/program/department shares a common vision of the end goal of what working together should accomplish.	 Not at all A small amount A fair amount A great deal 		
18	*Open to Discussion: this organization/program/department? *Open to Discussion: this organization/program/department is willing to engage in frank, open and civil discussion (especially when disagreement exists). The organization/program/department is willing to consider a variety of viewpoints and talk together (rather than at each other). You are able to communicate with this organization/program/department in an open, trusting manner.	 Not at all A small amount A fair amount A great deal 		
19	Do you have any questions or comments?	Open-ended		
The	The following lists additional relational questions available in the PARTNER Question Bank.			
20	Please describe how your relationship with each of these partners was developed [select all that apply]	 Completely by accident (relationship was not related to work at all, for example we met at a grocery store) Our relationship was not developed through the network, but the network work has deepened our relationship We don't have a relationship yet The state mandated the partnership for grant funding. Through a partner of a network partner agency Through other community venues/work not related to the 		

			7. Through the network's committees, task forces, trainings, focus
			groups, or other related activities
			8. Other
			9. Don't Know
			1. Never/We only interact on issues unrelated to the network
		How frequently does your organization/program/department work with	2. Once a year or less
	21	this organization/program/department on issues related to this	3. About once a quarter
	41	network's goals?	4. About once a month
			5. Every week
			6. Every day
2	22	How would you describe this organization as a current or potential partner? [please pick one]:	 None Just learning about this organization, not really aware of how a partnership would benefit my organization Aware of how my organization could benefit from a partnership with this organization, but have not built that relationship Aware of how my organization could benefit from a partnership with this organization, and have interacted a few times to try out a partnership Aware of how my organization could benefit from a partnership with this organization, and consider this organization a steady partner in our work Fully engaged with this organization as a partner