

OJJDP National Training and Technical Assistance Center TRAINING/TA PARTICIPANT FOLLOW-UP PHONE INTERVIEW

Interview Date:	
Interview Start Time:	
Participant's Name:	
Name of Agency/Organization Representing:	
Phone #:	
E-mail Address:	
Name of Training/TA Session:	
Instructor(s):	

Approximately three months ago, you attended an Office of Juvenile Justice and Delinquency Prevention (OJJDP) NTTAC Training/Technical Assistance Session entitled <insert title>, led by <insert consultant>. We are re-contacting participants from that session who indicated that they would be willing to participate in a brief follow-up survey. Your feedback is indispensable in improving the services that OJJDP NTTAC provides to the field. The confidentiality of the information you provide is guaranteed. OJJDP will never have access to what you as an individual say during this interview. Your responses to these questions will be reported only in aggregate and will never identify you as an individual. Your participation in this interview is completely voluntary. You may decline to participate in this interview at any time without consequences or penalties. The interview will last approximately 10 minutes.

Please indicate your responses to the following questions, on a scale of 1 to 5. Base your answers on how you feel about the Training/TA Session now.

1. On a scale of 1 to 5, with 1 representing "strongly disagree" to 5 representing "strongly agree," to what extent do you agree or disagree with the following statement: The Training/TA has enabled me to serve my clients better. Please explain your rating.

1	2	3	4	5	NA	

2. On a scale of 1 to 5, with 1 representing "not helpful at all" and 5 representing "extremely helpful," how helpful was the information you received at the Training/TA? Please explain your rating.

1	2	3	4	5	NA

- 3. Did you gain any new *skills* as a result of attending the Training/TA?
 - □ Yes
 - No

If yes, what new skills did you gain?

- □ Yes
- □ No

^{4.} Did you gain any new *knowledge* as a result of attending the Training/TA?

If yes, what new knowledge did you gain?



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- 5. Was there a change in your attitude toward the *clients* you serve as a result of attending this Training/TA?
 - Yes
 - □ No

If yes, in what way has your attitude changed?

- 6. Was there a change in your attitude toward the *organization/agency* you work for as a result of attending this Training/TA?
 - YesNo

If yes, in what way has your attitude changed?

7. In the *Participant Feedback Form* that you completed immediately following the Training/TA, you identified the following "action steps" that you planned to take as a result of your attendance. For each of the action steps I will ask you to classify the item as a program, policy, or practice change and then indicate the extent to which you have made progress on that action step.

Action Step 1: <insert Action Step 1 from their participant feedback form>

Please classify:

- Program change
- Policy change
- Practice change
- Other: _____

Please indicate your progress:

- No, I have not made progress on this action step.
- Yes, I have made some progress on this action step but there is additional work to be done
- Yes, I have completed this action step

Comments: ____

Action Step 2: <insert Action Step 2 from their participant feedback form>

Please classify:

- Program change
- Policy change
- Practice change
- Other: _____

Please indicate your progress:

- No, I have not made progress on this action step.
- Yes, I have made some progress on this action step but there is additional work to be done
- Yes, I have completed this action step

Comments: ____

Action Step 3: <insert Action Step 3 from their participant feedback form> Please classify:



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- Program change
- Policy change
- Practice change
- Other: _____

Please indicate your progress:

- No, I have not made progress on this action step.
- Yes, I have made some progress on this action step but there is additional work to be done

• Yes, I have completed this action step

Comments: _____

8. Have you encountered any obstacles or barriers in taking these "action steps?"

- □ Yes
- □ No

If yes, what were they and how have you addressed these obstacles/barriers?

- 9. In addition to the action steps just described, how have you been able to apply the information you gained from the Training/TA in your job (e.g., sharing information with colleagues, serving clients in a different way, implementing changes to agency/organization, etc.)? Please check all that apply.
 - Yes, I have implemented at least one programmatic change (please indicate the # of changes made:____)
 - Yes, I have implemented at least one policy change (please indicate the # of changes made:____)
 - Yes, I have implemented at least one practice change (please indicate the # of changes made:____)
 - □ Yes, I have implemented at least one other change(please indicate the # of changes made:___):
 - □ No

Comments:

10. Looking back, which part of the session has been most helpful to you, and why? What could have been done differently during the Training/TA Session to make it more useful to you now?

11. Do you have any other comments/suggestions that you'd like to make regarding the Training/TA Session that you attended?

Thank you for taking the time to participate in this interview. We value your input!