OMB 2900-XXXX  
Estimated Burden 10 minutes

Expiration Date: XX/XX/XXXX

**Department of Veterans Affairs**

VA emblem.tif

**Veterans Health Administration**

**Understanding PTSD for Family Caregivers: Feedback Survey**

**This information is collected in accordance with section 3507 of the Paperwork Reduction Act of 1995.** Accordingly, we may not conduct or sponsor and you are not required to respond to a collection of information unless it displays a valid OMB number. We anticipate that the time expended by all individuals who complete this survey will average 10 minutes. This includes the time it will take to read instructions, gather the necessary facts and fill out the form. Customer satisfaction surveys are used to gauge customer perceptions of VA services as well as customer expectations and desires. The results of this survey will lead to improvement in the quality of service delivery by helping to shape the direction and focus of specific programs or services. Completion of this form is voluntary and failure to respond will have no impact on benefits to which you may be entitled.

**1) PURPOSE OF SURVEY:** VA is interested in feedback on the education programs it offers to Caregivers. Please take a moment to let us know your thoughts on the education program you recently attended as well as suggestions for future Caregiver education programs.

**2) SELECTION:** You were selected to receive this survey because you attended the Understanding PTSD for Family Caregivers program.

**3) TIME:** The survey is estimated to take **10 minutes** to complete.

**4) QUESTIONS:** For **content-related questions,** please contact **Paul Holmes** at [Paul.Holmes2@va.gov](mailto:Paul.Holmes2@va.gov)

**5) HELP:** If you have **technical difficulty** with this survey, please send a message to [Nital.Patel@va.gov](mailto:Nital.Patel@va.gov)

**How would you describe your role as a Caregiver?**

 Spouse

 Parent

 Child

 Friend

 Other

**Please type in your role:**

Please indicate your level of agreement with the following statements regarding the "Understanding PTSD for Family Caregivers" program.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Strongly  Disagree | Disagree | Neutral | Agree | Strongly  Agree |
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|  |  |  |  |  |

I would recommend this program to other  
Caregivers of Veterans

The content presented met my needs.

The setting was conducive to my ability to learn.

I learned something new from the training program

I was satisfied with the length of this Caretaker   
Education program

I was satisfied with the format of this Caregiver  
Education Program

Overall, I was satisfied with the program.

**Please check the top three ways you would like future Caregiver education programs to   
be delivered.**

Live Broadcast with other Caregivers participating

Webinar at a VHA site with other Caregivers participating

Webinar accessed from home computer

Telephone Conference call with Power Points

Live Stream to home computer

Other

**What other way would you like future Caregiver education programs to be delivered?**

The "Understanding PTSD for Caregivers" program provided information on the following topics. Please indicate both the level of usefulness of each of the topics below as well as whether you have had an opportunity to utilize any of the suggested strategies.

**Usefulness of Information**

Did you try to use this information after attending the program?

Common Barriers to Treatment (lack of awareness, stigma, fear)

Resiliency (social support, role models, purpose)

c

PTSD Symptoms & Triggers (irritability, withdrawal, TV, crowding)

Not Somewhat Moderately Useful Very Not  
Useful Useful Useful Useful Applicable

Responses to Nightmares

(calm voice, no touching)

Responses to Anger   
(understand cause no  
confrontation)

Stress Management

(relaxation exercises,   
practice together daily)

Grounding (focus on the here  
and now)

Treatment Options (trauma

focused, family and couples  
therapy etc.)

**Please indicate the level of importance for the following components of the Caregiver education program.**

**Please rank the importance of the following topics to your individual needs. Please indicate your ranking from 1 to 5 with "1= Most Important" and "5= Least Important". Please use each number only once.**

Children living with a Parent with PTSD

Traumatic Brain Injury

Respite Care

Education Benefits for Veterans Caregivers and Children

Employment

**If you think there are other topics that should be considered for future Caregiver programs, please specify below.**

**How often should we provide these trainings?**

The "Question and Answer" section of the program

The presence of a VA mental health provider at your group meeting

The presence of other Caregivers in the room

Not Very Somewhat Moderately Important Very Important Important Important Important

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
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