2015 Immunization Awardee Meeting (IAM) Evaluation

Thank you for your participation in the 2015 Immunization Awardee Meeting! Please take time to complete this evaluation. Your feedback is very important and will be used to help inform future meetings.

The survey is estimated to take approximately 8 minutes to complete.

Meeting attendance

- 1) I attended the Immunization Awardee Meeting (IAM) on...(Please check all that apply):
 - Tuesday, July 14th, 2015
 - Wednesday, July 15th, 2015
 - Thursday, July 16th, 2015
 - Friday, July 17th, 2015
 - I did not attend this meeting (SKIP TO THE END)

Demographics

- 2) Please indicate your organization (select one):
 - State health agency
 - Tribal health department
 - Local health department
 - Territorial health department
 - Partner organization
 - CDC
 - Other (specify) ______
- 3) Please indicate your position (select all that apply):
 - Program Manager
 - VFC Coordinator
 - AFIX Coordinator
 - Vaccine Manager
 - IIS Coordinator
 - CDC PHA/field assignee
 - CDC Headquarters Staff
 - Other (specify) ______

Approved Form
OMB No. 0920-1026
Exp. Date: 07/31/2017

- 4) How long have you been working in your current position?
 - < 1 year
 - 1-2 years
 - 3-4 years
 - 5-9 years
 - 10+ years
- 5) How long have you been working in the field of immunizations?
 - < 1 year
 - 1-2 years
 - 3-4 years
 - 5-9 years
 - 10+ years
 - Not applicable I do not currently work in this field.
- 6) Have you previously attended the AIM-sponsored Program Managers' Meeting?

Yes

No

Not sure/Don't know

7. Please place an "X" in the column which accurately reflects your level of agreement with the following statements:

As a result of attending the 2015 IAM	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
I have a better understanding of CDC's requirements/recommendations for immunization awardees (i.e., as specified in the IPOM).					
I learned more about how to implement CDC's immunization awardee requirements/recommendations (i.e., as specified in the IPOM).					
I was able to establish or strengthen professional relationships with CDC staff .					
I was able to establish or strengthen professional relationships with non-CDC					

Approved Form
OMB No. 0920-1026
Exp. Date: 07/31/2017

staff (e.g., awardees, partners).			
I plan to directly apply what I learned from the meeting to my job.			
What I learned at the IAM will improve my job effectiveness.			
The content and learning materials addressed a need or a gap in my knowledge or skills.			
I was able to attend most of the concurrent sessions that were of interest to me.			
In the future, I would attend a similar meeting hosted by CDC.			

8.	Was	the meeting space was	comfortable and	conducive to	learning?
		Vac			

Yes

No

Not sure/Don't know

IF NO: What could be improved? (Please check all that apply)

Amount of space available in sessions

Temperature Lunch options

Other:_____

9. In your opinion, were some key topics missing from the IAM agenda?

Yes

No

Not sure/Don't know

ΙF	YES,	PLEASE SPECIFY:

10. Were most or all of the key staff from your program/organization able to attend the IAM?

Yes

No

Not sure/Don't know

IF NO: Please state the primary reason (check only one):

Budget/travel restrictions

Conflicts due to personal obligations

Conflicts due to professional obligations

Approved Form
OMB No. 0920-1026
Exp. Date: 07/31/2017

Other.	Specify:

11. Please place an "X" in the column which most accurately reflects your answer to the following:

The amount of time spent	Too much	Just about	Too little
		right	
The amount of time spent by CDC staff to provide technical			
assistance/training provided was			
The amount of time spent by CDC staff to provide updates			
or communicate priorities was			
The amount of information provided by non-CDC staff			
(e.g., awardees, partners) was			
The amount of "free" time (e.g., between sessions for			
networking, meetings, or breaks) was			
The overall length of the meeting (Tuesday-Friday, with			
two full and two half days) was			
The amount of time spent on			
VFC/PEAR was			
AFIX was			
IIS was			
HPV vaccination was			
IPOM and the cooperative agreement was			
budget			
pandemic influenza/preparedness was			
adult activities was			
Vaccine management/Spend plan/VTrckS was			
School coverage and exemptions was			
Vaccine storage and handling was			
Communications strategies was			

12. What did you like most about the IAM?

13. What did you like least about the IAM?



Thank you for completing the Immunization Awardee Meeting (IAM) Evaluation!