

## Attachment 6: Training Follow-Up Instrument (screenshots)

Centers for Disease Control and Prevention  
National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention  
Divisions of HIV/AIDS Prevention / Capacity Building Branch

### Training Follow-up Instrument

Form Approved  
OMB No. 0920-New  
Exp. Date: XX/XX/XXXX

Thank you for participating in a capacity building assistance (CBA) training event. We would like to gather additional feedback about whether the objectives of the training were met, and to assess the effectiveness of the training. The information that you provide will be used to improve future trainings. Your participation in the assessment is completely voluntary, and failure to participate will not jeopardize their employment or CDC funding of their organization. Your time and assistance is appreciated.

Start

Public reporting burden of this collection of information is estimated to average 15 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct a survey, collect data through a processing system, or perform another collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any aspect of this collection of information, including suggestions for reducing the burden, to Washington Headquarters Service, Paperwork Project (0172-0188), Washington, DC 20543-0188. Reporting Burden Estimate: OMB No. 0920-0001. CDC/ATSDR Reports Clearance Office, 1600 Clifton Road, Atlanta, GA 30333; Attn: PRA (0920-New)



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Issue Date: 8/1/2014

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John

NOTE: Your responses are confidential and will not be linked in any way to your name or agency in analysis.

1. What is your Confidential Identifier?

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2. Overall, how helpful was the Survey Design: Focus on NLAAD Street Intercepts training in preparing you to implement the intervention?

- Very useful
- Moderately useful
- Somewhat useful
- A little useful
- Not at all useful

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3. How relevant was the training to your current job?

- Very relevant
- Moderately relevant
- Somewhat relevant
- A little relevant
- Not relevant at all

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4. To what extent did the training meet your needs?

- Fully met my needs (SKIP TO #6)
- Met most of my needs
- Met some of my needs
- Met few of my needs
- Did not meet my needs at all

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5. Please explain in what ways your needs were not met?

  

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|   | Not motivated at all  |                       | Somewhat motivated               |                                  | Highly motivated      | Not part of my job    |
|---|-----------------------|-----------------------|----------------------------------|----------------------------------|-----------------------|-----------------------|
|   | 1                     | 2                     | 3                                | 4                                | 5                     | 98                    |
| 6. On the <u>last day of the training</u> , how motivated were you to implement what you learned? | <input type="radio"/> | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> | <input type="radio"/> |
| 7. How motivated are you <u>today</u> to implement what you learned?                              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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8. How ready are you to implement Survey Design: Focus on NLAAD Street Intercepts?

- Have not implemented, not ready to start (SKIP TO #10)
- Have not implemented, but ready to start (SKIP TO #10)
- Have already started implementing
- Not sure (SKIP TO #10)

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|   | Planning implementation |                       | Somewhat implemented  |                       | Fully implemented     | Not part of my job    |
|---|-------------------------|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|   | 1                       | 2                     | 3                     | 4                     | 5                     | 98                    |
| 9. Please indicate the degree to which you have implemented the intervention. | <input type="radio"/>   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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To what degree is there buy-in to implement this intervention from the following sources? (Note that "Buy-In" is belief in the value of an intervention and willingness to allocate time, money and staff to it over time.)

|                              | No buy-in             |                                  | Moderate buy-in                  |                                  | Complete buy-in       |
|------------------------------|-----------------------|----------------------------------|----------------------------------|----------------------------------|-----------------------|
|                              | 1                     | 2                                | 3                                | 4                                | 5                     |
| 10. Yourself                 | <input type="radio"/> | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/> |
| 11. Your Agency              | <input type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/> |
| 12. Your Priority Population | <input type="radio"/> | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/> |

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The next set of questions is about actions you have taken since attending the Survey Design: Focus on NLAAD Street Intercepts training. Since the training, have you:

|   | Yes                              | No                               | Not yet, but I will              | Not part of my job               |
|---|----------------------------------|----------------------------------|----------------------------------|----------------------------------|
|   | 1                                | 2                                | 3                                | 98                               |
| 13. Explained the goals of the intervention to agency colleagues/staff                                  | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| 14. Explained to colleagues/staff why this intervention is important for the agency's target population | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/>            |
| 15. Advocated for the allocation of resources for this intervention                                     | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            |
| 16. Encouraged others in the agency to adopt the intervention   | <input type="radio"/>            | <input type="radio"/>            | <input type="radio"/>            | <input checked="" type="radio"/> |
| 17. Encouraged community stakeholders to support the intervention                                       | <input type="radio"/>            | <input checked="" type="radio"/> | <input type="radio"/>            | <input type="radio"/>            |

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|   | Not at all                       |                       | Some                  |                       | A lot                 |
|---|----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|   | 1                                | 2                     | 3                     | 4                     | 5                     |
| 18. How much have you shared information from this training with your colleagues? | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 19. How much have you recommended this training to others?                        | <input checked="" type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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Please indicate how much the following barriers affect your ability to effectively implement Survey Design: Focus on NLAAD Street Intercepts.

|  | Not at all            |                       | Somewhat              |                       | A lot                 |
|--|-----------------------|-----------------------|-----------------------|-----------------------|-----------------------|
|  | 1                     | 2                     | 3                     | 4                     | 5                     |
| 20. Lack of funding  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 21. Lack of time (too busy)  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 22. Lack of necessary resources (e.g. meeting space, video equipment, materials) | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 23. Inadequate training in the intervention                                      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 24. Intervention is too complicated  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 25. Implementing this particular intervention is a not priority for the agency   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 26. Lack of support from administration  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 27. Lack of support from supervisor  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 28. Lack of support from staff   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 29. Turn-over of trained staff   | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 30. Intervention is not translated into the primary language of our clients      | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 31. Difficulty adapting intervention to our clients                              | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 32. Difficulty recruiting eligible participants from the target population       | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 33. Difficulty retaining participants  | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 34. Other (please specify): <input type="text"/>                                 | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

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35. How likely is it that your agency will attract and sustain new prevention funding through the successful implementation of an evidence-based intervention (EBI)?

- Extremely likely
- Very likely
- Somewhat likely
- Not very likely
- Not at all likely

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36. Does your agency need technical assistance (TA) in order to implement Survey Design: Focus on NLAAD Street Intercepts?

Yes

No

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37. Do you know how to access TA from the Centers for Disease Control and Prevention (CDC)?

- Yes  
 No

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38. What training/TA have you or your agency received since the training? [CHECK ALL THAT APPLY]

- Population-based Needs Assessment
- Selection of a behavioral, structural, or biomedical Intervention
- Adaptation of a behavioral, structural, or biomedical Intervention (based on population and/or agency resources)
- Planning and Implementation of a behavioral, structural, or biomedical Intervention (includes addressing fidelity, scheduling, and logistics)
- Recruitment and Retention of clients/participants (includes marketing)
- Cultural Competence in Prevention Activities (includes intervention adaptations to increase cultural appropriateness)
- Monitoring and Evaluation of a behavioral, structural, or biomedical intervention
- None
- Not Sure
- Other (Please specify:)

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To what degree would you or your organization benefit from additional training/TA in the following areas?

|   | Would not benefit at all |                       | Would benefit somewhat |                       | Would benefit greatly |
|---|--------------------------|-----------------------|------------------------|-----------------------|-----------------------|
|   | 1                        | 2                     | 3                      | 4                     | 5                     |
| 39. Population-based Needs Assessment   | <input type="radio"/>    | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> |
| 40. Selection of a behavioral, structural, or biomedical Intervention   | <input type="radio"/>    | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> |
| 41. Adaptation of a behavioral, structural, or biomedical Intervention (based on population and/or agency resources)                              | <input type="radio"/>    | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> |
| 42. Planning and Implementation of a behavioral, structural, or biomedical Intervention (includes addressing fidelity, scheduling, and logistics) | <input type="radio"/>    | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> |
| 43. Recruitment and Retention of clients/participants (includes marketing)  | <input type="radio"/>    | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> |
| 44. Cultural Competence in Prevention Activities (includes intervention adaptations to increase cultural appropriateness)                         | <input type="radio"/>    | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> |
| 45. Monitoring and Evaluation of a behavioral, structural, or biomedical intervention   | <input type="radio"/>    | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> |
| 46. Other (Please specify:)   | <input type="radio"/>    | <input type="radio"/> | <input type="radio"/>  | <input type="radio"/> | <input type="radio"/> |

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End of Survey.

Thank you for your time and assistance in completing this instrument.

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