

POWER Evaluation Form

Motivational Interviewing Training

Please complete this evaluation for today's training. Your responses will help us to understand how best to support you in your work to prevent and raise awareness of issues concerning substance addiction and opioid misuse among women aged 55+. IHR relies on your honest opinions & suggestions for improvement of future trainings. All of your responses will be kept confidential and will only be reported in the aggregate. Your name will not be used in any reports put together for this project.

Content of Training:

As a result of the training, to what extent do you agree with the following statements?

	Strongly Agree	Agree	Disagree	Strongly Disagree
The information and skills presented will be useful to my work.	€	€	€	€
I can describe the basic principles of Motivational Interviewing (MI).	€	€	€	€
I can identify the elements of the Brief Negotiated Interview	€	€	€	€
I am more comfortable talking to clients about the risks of opioids and other substance misuse.	€	€	€	€
I am comfortable using MI to engage with clients around their substance use.	€	€	€	€

Use in the Field:

1. Have you used Motivational Interviewing (MI) techniques in your work previously? € Yes € No

2. Do you intend to use the MI skills taught today in your future practice? € Yes € No

If yes, how so? _____

3. Have you participated in previous trainings on Motivational Interviewing? (select one)

- € No, I have not participated in prior trainings on topics addressed today.
- € Yes, I participated in a previous training offered by IHR.
- € Yes, I participated in related training(s) offered through a different organization.
Where? _____

Presentation

To what extent do you agree with the following statements?

	Strongly Agree	Agree	Disagree	Strongly Disagree
The presenter was well prepared.	€	€	€	€
The presenter had good knowledge of subject.	€	€	€	€
The presenter delivered material well.	€	€	€	€
Presenter used time effectively.	€	€	€	€

What is your title/role? (Select One)

- € Social worker
- € Doctor
- € Nurse
- € Other Clinical Staff – Please specify: _____
- € Case Manager
- € Personal Care/Home Care Attendant
- € Medical Assistant
- € Activity Assistant
- € Other: _____

How can we improve this training?
