

Form Approved
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Public Health Improvement Training (PHIT)

Session Evaluation

Introduction

Thank you for attending this PHIT session. Your feedback will help us improve the training we deliver in the future. This survey should take no longer than 2 minutes. Responses will remain anonymous and be kept secure. If you have any questions or technical difficulties, please reach out to Nicole Waller at nwaller@nnphi.org.

The public reporting burden of this collection of information is estimated to average 2 minutes per response, including 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 or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to **CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333 ATTN: PRA (0920-1050)**

(Session Title and Date)

1. Overall, did this session **meet your expectations**?
 - a. Yes
 - b. No (Skip pattern: If "NO", display #1a)

1a. Why didn't this session meet your expectations?

2. After attending this session, how well do you feel you **understand the concepts** addressed?
(Select the **one** best option.)

Response Options
a. I am somewhat or very confused about the content addressed.
b. I have a basic understanding of the content addressed.
c. I have a solid or comprehensive understanding of the content addressed.

3. Which of the following, if any, reflect your experience during this session? (Select **all** that apply.)

Response Options
a. Session content was clearly presented .
b. Key points were repeated in a variety of ways .
c. High-quality audio or visual aids were used to support key concepts.
d. I was shown examples of key concepts in practice.
e. I discussed key concepts with my peers.
f. I had an adequate amount of time to practice the skills taught.
g. I practiced the skills taught using realistic, work-related exercises .
h. I received helpful feedback after practicing the skills taught.
i. I received useful resources , such as checklists or templates.
j. I created a specific plan to apply the content I learned to my work.
k. None of these options are true for me.

4. How **capable are you** of using the content from this session in your work environment? (Select the **one** best option.)

Response Options
a. I need more training or guidance before I know how to use the content presented.
b. I need more experience to be successful using the content presented.
c. I can be successful now in using the content presented (even without more guidance or experience).
d. The content presented in this session is not applicable to my work.

5. Do you anticipate any **barriers to using** the session content when you return to your job?

- a. Yes (Skip pattern: If "YES", display #5a)
- b. No

5a. What barriers do you expect?

6. Please provide any additional comments or suggestions to improve this session.

Thank you for your feedback!