Form Approved

OMB No. 0920-1129

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OBGYN Telecom Training Satisfaction Survey (TTS)

Please indicate the extent to which you agree with each of the following statements.

	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. This training mode provided a realistic provider-patient interaction.	○	○	○	○	○
2. It was just as easy to talk with the patient about substance use via teleconference as it would be in in-person training.	○	○	○	○	○
3. This mode of interacting was distracting from the content of the conversation.	○	○	○	○	○
4. Feedback from the standardized patient was useful to me.	○	○	○	○	○
5. I prefer this method of training to in-person role plays or simulations.	○	○	○	○	○
6. Getting set up and started with this technology for training was easy enough.	○	○	○	○	○
7. This mode of experiential training is an expedient method for learning how to conduct a good intervention.	○	○	○	○	○
8. I plan to utilize what I've learned from this training in my clinical practice.	○	○	○	○	○
9. Overall, the training met or exceeded my expectations.	○	○	○	○	○

10. What did you like best about this training?

11. What suggestions do you have for improving the training?

NEXT

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We thank you for your time spent taking this survey.
Your response has been recorded.

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Partnering for Practice Change