Division of Overdose Prevention Technical Assistance Hub

OMB #0920-new

Attachment 5. Technical Assistance Feedback Form Screenshots



OD2A Technical Assistance (TA) Feedback Form

ICF Institutional Review Board IRB00001920 FWA00002349 Exempt

Determination Date: March 16, 2020

Form Approved

OMB No. 0920-XXXX

Exp. Date: XX-XX-XXXX

Public reporting burden of this collection of information is estimated to average 5 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 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: OMB-PRA (0920-New)

Introduction

ICF, under contract with the Center for Disease Control (CDC), manages and evaluates the Overdose Data to Action (OD2A) technical assistance (TA). This survey is to gather your feedback regarding the perceived quality and effectiveness of the TA offered through the CDC DOP TA Center. Our goal is to provide the best assistance to support your work and this feedback will help us to make that TA better. The survey is designed to take about 5 minutes to complete.

Informed Consent

- Your participation is voluntary. You may refuse to answer any questions or stop the survey at any time.
- ICF will have access to your contact information when you complete this survey. However, ICF will aggregate and de-identify responses when reporting to CDC. ICF will not link your name with your individual responses in any reports to CDC. ICF will maintain your responses in a secure manner.
- There are no right or wrong answers or ideas—we want to hear your experiences and opinions.

 There are no risks to you or your organization for participating in this survey. The information will be used to improve the training and TA provided to OD2A recipients. If you have questions about the survey or Institutional Review Board (IRB) approval, contact Megan Brooks at megan.brooks@icf.com. 	
* I confirm that I have read the information above and agree to participate in the survey. Agree, continue to the survey	
Next	

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OD2A Technical Assistance (TA) Feedback Form

OD2A Technical Assistance (TA) Feedback Form

This survey is referring to the specific TA activity listed in your invitation email. Please select the response that best represents your rating for this TA activity for each of the following questions.

Please	rate the	overall	quality	of this	activity.

Poor	Fair	Good	Very Good	Excellent
0	0	0	0	\circ

Select the best response:

	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
My knowledge and/or skills increased as a result of this activity.	0	0	0	0	0
The information and materials shared were useful to my work.	0	0	0	0	0
The length and pace of the activity was appropriate.	0	0	0	0	0
The materials and information were appropriate for my level of experience and knowledge.	0	0	0	0	0
The knowledge and expertise of this trainer/presenter were appropriate for this activity.	0	0	0	0	0

Additional Items for	<u>r Webinars</u> - Selec	t the best re	sponse:		
	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
The webinar met the following objectives: <insert specific webinar objectives></insert 		0	0)	O
The webinar technology provided a positive learning environment.	0	0	0	0	0
The event connected us with the appropriate peers/agencies.	0	0	0	0	0
Additional Items for	r Peer-to-Peer Exc	hange Sessi	ons - Select the best	response:	
	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
The event connected us with the appropriate peers/agencies.	0	0	0	0	0
The event gave access to subject matter experts.	0	0	0	0	0
Additional Item for	In-Person Training Strongly Disagree	g/Site Visit - Disagree	Select the best resp Neither Agree nor Disagree	oonse: Agree	Strongly Agree
the stated objectives: <insert specific training objectives></insert 	0	0	0	0	0
Additional items for	· ALL group TA Ev	<u>rents</u> - Select	the best response:		
	Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree
Participation and interaction were encouraged.	0	0	0	0	0
The overall quality of the event met my expectations.	0	0	0	0	0
How do you plan to	apply the informa	ation from th	is activity to your w	ork?	

What was MOST valuable about the activity in which you participated?
What was LEAST valuable about the activity in which you participated?
What suggestions do you have for improving training and technical assistance activities?
What additional technical assistance needs do you or your organization have?