

CDC Follow-up Evaluation

Live and Enduring Educational Activity

Please take a few minutes to answer this brief follow-up survey. Your feedback will help CDC understand the impact of educational activities.

Knowledge, Competence, Practice		
1.	Did you use what you learned from this course in your work?	<input type="radio"/> A) Yes <input type="radio"/> B) No <input type="radio"/> C) Not applicable, I did not learn anything from this course
4.	What did you use from this course? (if it applies)	
5.	As a result of this course, I have: (select all that apply)	<input type="radio"/> A) not improved <input type="radio"/> B) maintained my competence <input type="radio"/> C) increased my competence <input type="radio"/> D) improved my performance <input type="radio"/> E) provided clinical interventions in practice <input type="radio"/> F) developed strategies I can use in practice <input type="radio"/> G) other: please specify <input type="radio"/> H) not applicable, I did not learn from this course <input type="radio"/> I) not applicable, I do not use anything from this course
14.	How did you benefit your team as a result of what you learned? (select all that apply)	<input type="radio"/> A) I provided better communication across my interprofessional team(s) <input type="radio"/> B) I shared information with colleagues to improve patient education <input type="radio"/> C) I identified changes needed in practice <input type="radio"/> D) I increased participation in shared decision making across my interprofessional team(s) <input type="radio"/> E) None of the above <input type="radio"/> F) Other: please specify <input type="radio"/> G) Not applicable, I did not learn from the course and/or will not benefit my team
21.	What factors kept you from using the content of this course in your work? (select all that)	<input type="radio"/> A) None, I have used this content in my work <input type="radio"/> B) I did not have the resources I needed <input type="radio"/> C) I was not provided opportunities to use this course <input type="radio"/> D) I did not have time to use what I learned

Public reporting burden of this collection of information is estimated to average 3 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 H21-8, Atlanta, Georgia 30333; ATTN: PRA 0920-1071

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	apply)	<input type="radio"/> E) My supervisor did not support me in using what I learned	
		<input type="radio"/> F) My colleagues did not support me in using what I learned	
		<input type="radio"/> G) The course content was not relevant to my current work	
		<input type="radio"/> H) Other: please specify	
22.	Have you recommended this course to colleagues?	<input type="radio"/> Yes	<input type="radio"/> No

1. As a result of this training, do you feel you were able to improve the safety of patients or other healthcare workers in some way?
 - Yes
 - No
2. Have you consulted any additional Project Firstline materials (e.g., website, other modules, etc.) since the completion of this training?
 - Yes (please specify: _____)
 - No
 - Unsure
3. Have you used or sought out other infection control information as a result of this training?
 - Yes
 - No

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