

CDC TRAIN Post-Course Training Evaluation

Public reporting burden of this collection of information is estimated to average 15 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: ATTN: PRA (0920-0017).

Module 1 (Core) - Training Evaluation Questions

[Questions in this module will be used in training evaluations for both accredited and non-accredited courses.]

1. **How relevant is this course to your current work?**
 - ☐ Not at all relevant
 - ☐ Slightly relevant
 - ☐ Moderately relevant
 - ☐ Very relevant
 - ☐ Extremely relevant
2. **Will you use what you learned in this course in your work?**
 - ☐ Definitely not
 - ☐ Probably not
 - ☐ Possibly
 - ☐ Probably will
 - ☐ Definitely will
 - ☐ Not applicable, I did not learn anything new from this course
3. **What, if anything, do you plan to use from this course? (Short answer)**
4. **Rate your knowledge of (or skill in) [learning objective(s)] before the course.** [Insert learning objectives in a consolidated list in the question body.]
 - ☐ Not at all knowledgeable or skilled
 - ☐ Slightly knowledgeable or skilled
 - ☐ Moderately knowledgeable or skilled
 - ☐ Very knowledgeable or skilled
 - ☐ Extremely knowledgeable or skilled
5. **Rate your knowledge of (or skill in) [learning objective(s)] now after the course.** [Insert learning objectives in a consolidated list in the question body.]
 - ☐ Not at all knowledgeable or skilled
 - ☐ Slightly knowledgeable or skilled
 - ☐ Moderately knowledgeable or skilled
 - ☐ Very knowledgeable or skilled
 - ☐ Extremely knowledgeable or skilled

Attachment 2 - CDC TRAIN Post-Course Evaluation

6. What is your opinion of the balance of instruction and interactive learning in this course? (Examples of interactive learning include knowledge checks, case studies, question & answer sessions, exercises, etc.)
 - ☐ Too much instruction and not enough interactive learning
 - ☐ Right amount of both instruction and interactive learning
 - ☐ Too much interactive learning and not enough instruction
7. The instructional strategies (e.g., lecture, case studies, figures, tables, or media) helped me learn.
 - ☐ Strongly disagree
 - ☐ Disagree
 - ☐ Neutral
 - ☐ Agree
 - ☐ Strongly agree
8. **The content expert(s)/the presenter(s)/the author(s) presented the content effectively.** [Modify this question according to the format of the training and number of speakers. For enduring activities (online courses, web-on-demand, phone apps), use "The content expert(s)." For live activities (conferences, workshops, webcasts), insert presenter name(s). For journal activities, insert author name(s).]
 - ☐ Strongly disagree
 - ☐ Disagree
 - ☐ Neutral
 - ☐ Agree
 - ☐ Strongly agree
9. What part of this course was most helpful to your learning? (Short answer)
10. How could this course be improved to make it a more effective learning experience? (Short answer)
11. How likely are you to recommend this course to someone else?
 - ☐ Not at all likely
 - ☐ Somewhat likely
 - ☐ Very likely

Module 2 (Optional) - Continuing Education Evaluation Questions

[Questions in Module 2 are only required for accredited courses in CDC TRAIN. The following questions are required as part of meeting accreditation and reporting requirements outlined by the following Professional Accreditation Agencies: Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), American Association of Veterinary State Boards (AAVSB) Registry of Approved Continuing Education (RACE), International Association for Continuing Education and Training (IACET), National Board of Public Health Examiners (NBPHE), and the National Commission for Health Education Credentialing, Inc. (NCHEC).]

12. How will you use what you learned from this course? I will: (select all that apply)
 - ☐ Maintain my competence
 - ☐ Increase my competence
 - ☐ Improve my performance
 - ☐ Provide interventions in practice
 - ☐ Develop strategies I can use in practice

Attachment 2 - CDC TRAIN Post-Course Evaluation

- ☐ Other, please specify:
- ☐ Not applicable, I did not learn from this course
- ☐ Not applicable, I do not plan to use anything from this course

13. What factors will keep you from using the content of this course in your work? Select all that apply.

- ☐ None, I will use this content in my work
- ☐ I need additional training in the subject matter
- ☐ I will not have the resources I need in my workplace
- ☐ I will not be provided opportunities to use what I learned
- ☐ I will not have the time to use what I learned
- ☐ My supervisor will not support me in using what I learned
- ☐ My colleagues will not support me in using what I learned
- ☐ The course content is not relevant to my current work
- ☐ Other, please specify:

14. How will your team benefit because of what you learned? I will: (select all that apply)

- ☐ provide better communication across my interprofessional team(s) (any team with people from different professions)
- ☐ share information with colleagues to improve client services
- ☐ identify changes needed in practice
- ☐ increase participation in shared decision making across my interprofessional team(s) (any team with people from different professions)
- ☐ Other, please specify:
- ☐ Not applicable, I did not learn from the course and/or it will not benefit my team

15. Do you feel this course was free of commercial bias or influence?

- ☐ Yes
- ☐ No

16. If you answered No, please explain. [Only included if learner responds No to Q15]

Module 3 (Optional) - Feedback on CDC TRAIN

[Questions in Module 3 evaluate learner experience with the CDC TRAIN learning management system. If this information is not applicable for a given provider, course or learning event, questions in this module are not included in order to reduce respondent burden.]

17. How did you hear about this course? Please select all that apply.

- ☐ Website, please specify:
- ☐ Search on CDC TRAIN
- ☐ Search on Google or another search engine
- ☐ Social Media, please specify:
- ☐ E-newsletter, please specify:
- ☐ A presentation, please specify:
- ☐ A referral from a colleague, peer, supervisor, or organization
- ☐ Required by my organization
- ☐ Other, please specify:

Attachment 2 - CDC TRAIN Post-Course Evaluation

18. Did the course meet your expectations based on reading the course's description?

- ☐ Yes
- ☐ Somewhat
- ☐ No
- ☐ Not applicable; I did not read the course's description

19. What other topic(s) related to this course would you like to learn more about? (Short answer)

20. What challenges, if any, did you experience when using CDC TRAIN overall, not the specific course that you completed. Please select all that apply:

- ☐ Creating a CDC TRAIN account
- ☐ Finding the course
- ☐ Registering for the course
- ☐ Launching the course
- ☐ Completing this postcourse evaluation
- ☐ Obtaining technical assistance and support
- ☐ Other, please specify:
- ☐ Not applicable; I did not experience any challenges using CDC TRAIN

21. What additional features would you like to see in CDC TRAIN?

Module 4 (Optional) - Learner Feedback

[Questions in Module 4 collect information on learner professional, work setting, and experience. If this information is not relevant for a given provider, course or learning event, questions in this module are not included in order to reduce respondent burden.]

22. What is your primary profession? Please select one answer.

- ☐ Administration or operations professional
- ☐ Behavioral health professional
- ☐ Laboratory professional
- ☐ Community health worker
- ☐ Emergency preparedness professional
- ☐ Environmental health worker
- ☐ Epidemiologist
- ☐ Evaluator
- ☐ Health communicator or public information specialist
- ☐ Health educator
- ☐ Teacher or instructor
- ☐ Librarian
- ☐ Nurse
- ☐ Oral health professional
- ☐ Pharmacist or pharmacy technician
- ☐ Physician
- ☐ Physician assistant
- ☐ Social worker
- ☐ Statistician

Attachment 2 - CDC TRAIN Post-Course Evaluation

- ☐ Student
- ☐ Veterinarian
- ☐ No longer in the workforce (e.g., retired, disabled)
- ☐ Other, please specify:

23. What is your primary job setting or affiliation? Please select one answer.

- ☐ Clinical laboratory
- ☐ Federal agency
- ☐ Hospital, medical center, or clinic
- ☐ Local government
- ☐ Long-term care or skilled nursing facility
- ☐ Pharmacy
- ☐ Private for-profit business
- ☐ Private industry
- ☐ Private nonprofit organization or foundation
- ☐ Public health laboratory
- ☐ School or university
- ☐ State government
- ☐ Territorial government
- ☐ Tribal government
- ☐ Other, please specify:

24. How many years have you worked in your current profession?

- ☐ Less than 1 year
- ☐ 1–5 years
- ☐ 6–10 years
- ☐ 11–15 years
- ☐ 16–20 years
- ☐ 21 years or more
- ☐ No longer in the workforce