

Understanding Research & Critical Appraisal: Studies of Treatment Effectiveness

Date: Nov. 20, 2007, Presenter: Dr. David Streiner

EVALUATION FORM

A. Content

- | | Strongly Agree | Agree | Disagree | Strongly Disagree |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 1. The content presented met the objectives of the training. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 2. The content was presented at a level that was understandable. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 3. The information provided in this session was relevant to my needs. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

B. Handouts

- | | Strongly Agree | Agree | Disagree | Strongly Disagree |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| 4. The handouts were well-written and reinforced learning. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 5. Overall, I was satisfied with the handouts. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

C. Instructor

- | | Strongly Agree | Agree | Disagree | Strongly Disagree |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 6. The instructor was prepared and comfortable with the material. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 7. The instructor presented the material in a clear manner. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 8. The instructor was approachable and willing to answer questions. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 9. Overall, I was satisfied with the instructor. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

D. Technology

10. How did you participate in this session?
 Adobe Connect (webcast) OTN (videocast) In-person at Baycrest
11. Did you experience any technical difficulties during this session?
 No Yes

Please specify:

- | | Strongly Agree | Agree | Disagree | Strongly Disagree |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 12. Overall, I was satisfied with the technical quality of the session. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

E. Overall

- | | Strongly Agree | Agree | Disagree | Strongly Disagree |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| 13. Overall, I was satisfied with the information I learned. | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

14. What was the most important thing you learned from this session?

15. If you could have changed one thing about today's session, what would that have been?

Thank you for taking the time to complete this survey.