

## Training and Technical Assistance Conference Call Feedback Form

Thank you for participating in this monthly technical assistance conference call. Please take a moment to complete this questionnaire. Your responses will help us design future conference calls that are beneficial to all participants. The confidentiality of the information you provide here is guaranteed. Responses to these questions will only be reported in aggregate and will not identify you individually. Please indicate the extent to which you agree or disagree with each statement.

- 1 = I *strongly disagree* with this statement (SD).
- 2 = I *disagree* with this statement (D).
- 3 = I *neither agree nor disagree* with this statement (N).
- 4 = I *agree* with this statement (A).
- 5 = I *strongly agree* with this statement (SA).

	SD	D	N	A	SA
1. The topic of the conference call was made clear to me prior to the call.	1	2	3	4	5
2. The information presented provided me with a thorough understanding of the topic area.	1	2	3	4	5
3. The presenter was knowledgeable about the information presented and articulate in his presentation of it.	1	2	3	4	5
4. I had ample opportunity to ask questions during the call.	1	2	3	4	5
5. I found the call to be a productive use of my time.	1	2	3	4	5

6. What, if anything, would you have changed about this conference call?

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7. What information did you take away from this systems of care TA conference call that will facilitate the successful implementation of your local system of care?

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Other topics that would be useful?

Feedback on the format for conveying information, i.e., 90 minute TA conference call?

**Thank you for completing our feedback form. We value your input!**

**Please return this form to Caitlin Murphy by e-mail ([cmurphy@icfi.com](mailto:cmurphy@icfi.com)), fax (703-385-3200), or mail (Caitlin Murphy, ICFI/Caliber Associates, 10530 Rosehaven Street, Suite 400 Fairfax, VA 22030).**