

MENTAL HEALTH SUPPORT SPECIALIST TRAINING EVALUATION

PART 1: Modules 1-6

Introduction: This anonymous questionnaire is designed for you to evaluate the first six sessions that you just completed on the Role of the Mental Health Support Specialist, Understanding Mental Health and Mental Illness, Trauma, Health and Recovery, Communication, and Confidentiality. Please do not put your name anywhere on this form. The information that you provide will be used by the trainers and the state Department of Health and Human Services, Office of Adult Mental Health, to: (1) assess group learning, and (2) to make improvements to this curriculum and training session program. Your participation in this evaluation is voluntary. The training evaluation report will not include any identifying information. If you have any questions about this evaluation process and or the results, please contact the Center for Learning at 626-5280.

Thank you for your feedback!

I. PARTICIPANT CHARACTERISTICS

1. What is your primary work setting? (Check one)

- Medical / Hospital Setting
- Psychiatric / Hospital Setting
- Residential Facility for Adults
- Residential Facility for Youth/Children
- Group Home for Adults
- Group Home for Youth/Children
- In-Home Support Work
- Other: _____

2. How many years have you worked in the role of a Mental Health Support Specialist in this setting (selected above)?

Less than one year? If so, how many months? _____

One year or more? Please write in total number of years: _____

3. What is the highest level of education that you have completed? (Check one)

- High School Associate's Degree Master's Degree
- Some College Bachelor's Degree

4. What is your gender? FEMALE MALE

5. What is your date of birth? (MM/DD/YYYY) _____

II. MODULES 1-6

Instructions: For the following questions, you are going to be asked to rate your perceptions *now at the end* of the training period, and then rate what you believe your perceptions were *before you started* the training period. The ratings are: 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly Agree. (Please select just one response for each question.)

<i>Rate your level of Disagreement / Agreement with the following statements.</i>				
MODULE 1: Role of MHSS	1	2	3	4
Before Training: I could identify several activities of daily living that I may support in my role as MHSS.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can identify several activities of daily living that I may support in my role as MHSS.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before Training: I could explain Maslow’s Hierarchy of Needs as it applies to all of us.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can explain Maslow’s Hierarchy of Needs as it applies to all of us.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before Training: I could apply the “Tell, Show and Do” strategy for teaching a new skill.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can apply the “Tell, Show and Do” strategy for teaching a new skill.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before Training: I could identify boundary violations that I should avoid.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can identify boundary violations that I should avoid.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rate your level of Agreement / Disagreement: 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly Agree.				
	1	2	3	4
Before Training: I could identify steps of a problem-solving strategy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can identify steps of a problem-solving strategy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before Training: I knew what situations require mandatory reporting.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I know what situations require mandatory reporting.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MODULE 2: Understanding Mental Health And Mental Illness				
Before Training: I could define the “biopsychosocial model.”	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can define the “biopsychosocial model.”	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before Training: I knew how clinicians use the DSM-IV to make a diagnosis.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I know how clinicians use the DSM-IV to make a diagnosis.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before Training: I could define mental health.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can define mental health.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before Training: I could define mental illness.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can define mental illness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Rate your level of Agreement / Disagreement:				
1 = Strongly Disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly Agree.				
	1	2	3	4
Before Training: I could define co-occurring disorders and describe their prevalence.	O	O	O	O
After Training: I can define co-occurring disorders and describe their prevalence.	O	O	O	O
Before Training: I understood the mental health issues that impact older adults, including depression, dementia, and delirium.	O	O	O	O
After Training: I understand the mental health issues that impact older adults, including depression, dementia, and delirium.	O	O	O	O
Before Training: I was already aware of strategies for addressing depression in older adults.	O	O	O	O
After Training: I am aware of strategies for addressing depression in older adults.	O	O	O	O
Before Training: I was already aware of strategies for addressing dementia in older adults.	O	O	O	O
After Training: I was already aware of strategies for addressing dementia in older adults.	O	O	O	O
Before Training: I was already aware of strategies for addressing delirium in older adults.	O	O	O	O
After Training: I was already aware of strategies for addressing delirium in older adults.	O	O	O	O
MODULE 3: Trauma				
Before Training: I knew the DHHS definition of trauma.	O	O	O	O
After Training: I know the DHHS definition of trauma.	O	O	O	O

Rate your level of Agreement / Disagreement: 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly Agree.				
	1	2	3	4
Before Training: I could name a common response/adaptation to trauma.	O	O	O	O
After Training: I can name a common response/adaptation to trauma.	O	O	O	O
Before Training: I knew the signs of vicarious traumatization.	O	O	O	O
After Training: I know the signs of vicarious traumatization.	O	O	O	O
Before Training: I knew how Advance Directives could benefit trauma survivors.	O	O	O	O
After Training: I know how Advance Directives could benefit trauma survivors.	O	O	O	O
MODULE 4: Health and Recovery				
Before Training: I knew that recovery is an ongoing process.	O	O	O	O
After Training: I know that recovery is an ongoing process.	O	O	O	O
Before Training: I understood that recovery from mental illness is possible.	O	O	O	O
After Training: I understand that recovery from mental illness is possible.	O	O	O	O
Before Training: I could identify the stages of recovery.	O	O	O	O
After Training: I can identify the stages of recovery.	O	O	O	O

Rate your level of Agreement / Disagreement:				
1 = Strongly Disagree, 2 = Disagree, 3 = Agree, and 4 = Strongly Agree.				
	1	2	3	4
Before Training: I understood the contribution of intentional peer support to the recovery process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I understand the contribution of intentional peer support to the recovery process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MODULE 5: Communication				
Before Training: I could define the four essential parts of communication.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can define the four essential parts of communication.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before Training: I could give at least two examples of how “attending” is demonstrated in a conversation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can give at least two examples of how “attending” is demonstrated in a conversation.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
MODULE 6: Confidentiality				
Before Training: I could name the exceptions to the General Rule of Confidentiality.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I can name the exceptions to the General Rule of Confidentiality.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Before Training: I understood what information I can share with guardians about the lives of the people I support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
After Training: I understand what information I can share with guardians about the lives of the people I support.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

III. OVERALL SATISFACTION WITH SESSIONS

Instructions: The following questions ask you to evaluate the training just for these modules. The ratings are: 1 = Strongly Disagree (Very Dissatisfied), 2 = Disagree (Dissatisfied), 3 = Neutral, 4 = Agree (Satisfied), and 5 = Strongly Agree (Very Satisfied). *(Please select one)*

<i>Rate your level of Disagreement/Agreement or Satisfaction on the following:</i>					
	1	2	3	4	5
TRAINER					
1. The discussion in class added to learning.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The teaching/instruction methods helped me to learn.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The instructor was organized.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The instructor was knowledgeable about the topics presented.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. The instructor clearly explained the objectives of the modules/course.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. My individual questions/problems were discussed to my satisfaction.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
COURSE					
1. The information that was presented is applicable to my work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. The skills that I have learned will help me improve my performance on the job.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. The course was well paced.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Overall, my satisfaction with this training session is...	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

**THANK YOU FOR YOUR FEEDBACK!!
PLEASE RETURN THIS FORM TO THE TRAINER.**