**Evaluation Form**



**CE Program Title**: Parent-Child Interaction Therapy Within-Agency Trainer Training

**Number of CE Credits Awarded**: 8

**Date(s)**:

| **Instruction** | Not Applicable | Strongly Disagree | Disagree | Neither Agree nor Disagree | Agree | Strongly Agree |
| --- | --- | --- | --- | --- | --- | --- |
| 1. Individual Learning Objectives were met: |  |  |  |  |  |  |
| A. State the methods by which therapist competencies in coaching will be evaluated. | 0 | 1 | 2 | 3 | 4 | 5 |
| B. Demonstrate the ability to calculate the percent reliability between trainer and trainee’s DPICS coding. | 0 | 1 | 2 | 3 | 4 | 5 |
| C. Effectively score an integrity checklist to ensure fidelity to the PCIT protocol. | 0 | 1 | 2 | 3 | 4 | 5 |
| D. List two different schedules for structuring a therapist training. | 0 | 1 | 2 | 3 | 4 | 5 |
| E. Accurately state the PCIT International criteria to become both a Certified Therapist and Within Agency Trainer. | 0 | 1 | 2 | 3 | 4 | 5 |
| F. Apply at least two cultural considerations for increasing engagement with diverse families. | 0 | 1 | 2 | 3 | 4 | 5 |
| 2. Accuracy and utility of content were discussed. | 0 | 1 | 2 | 3 | 4 | 5 |
| 3. Content was appropriate for post-graduate level training. | 0 | 1 | 2 | 3 | 4 | 5 |
| 4. Instruction was at a level appropriate to post-graduate level training. | 0 | 1 | 2 | 3 | 4 | 5 |
| 5. Teaching methods were effective. | 0 | 1 | 2 | 3 | 4 | 5 |
| 6. Visual aids, handouts, and oral presentations clarified content. | 0 | 1 | 2 | 3 | 4 | 5 |
| 7. How much did you learn as a result of this CE program? | 1 (Very Little) | 2 | 3 | 4 | 5 (A Great Deal) |
| 8. How useful was the content of this CE program for your practice or other professional development? | 1 (Not Useful) | 2 | 3 | 4 | 5 (Extremely Useful) |

| **Instructor 1**: Insert Name | Not Applicable | Strongly Disagree | Disagree | Neither Agree nor Disagree | Agree | Strongly Agree |
| --- | --- | --- | --- | --- | --- | --- |
| 9. Knew the subject matter. | 0 | 1 | 2 | 3 | 4 | 5 |
| 10. Taught the subject matter competently. | 0 | 1 | 2 | 3 | 4 | 5 |
| 11. Elaborated upon the stated objectives. | 0 | 1 | 2 | 3 | 4 | 5 |
| 12. Presented content in an organized manner. | 0 | 1 | 2 | 3 | 4 | 5 |
| 13. Maintained my interest. | 0 | 1 | 2 | 3 | 4 | 5 |
| 14. Answered questions effectively. | 0 | 1 | 2 | 3 | 4 | 5 |
| 15. Was responsive to questions, comments, and opinions. | 0 | 1 | 2 | 3 | 4 | 5 |
| **Instructor 2**: Insert Name | Not Applicable | Strongly Disagree | Disagree | Neither Agree nor Disagree | Agree | Strongly Agree |
| 9. Knew the subject matter. | 0 | 1 | 2 | 3 | 4 | 5 |
| 10. Taught the subject matter competently. | 0 | 1 | 2 | 3 | 4 | 5 |
| 11. Elaborated upon the stated objectives. | 0 | 1 | 2 | 3 | 4 | 5 |
| 12. Presented content in an organized manner. | 0 | 1 | 2 | 3 | 4 | 5 |
| 13. Maintained my interest. | 0 | 1 | 2 | 3 | 4 | 5 |
| 14. Answered questions effectively. | 0 | 1 | 2 | 3 | 4 | 5 |
| 15. Was responsive to questions, comments, and opinions. | 0 | 1 | 2 | 3 | 4 | 5 |

| **Professional and Ethical Issues** | N/A | No | Yes |
| --- | --- | --- | --- |
| 16. Presenter (or program chair) made clearly evident, prior to registration, the following: | 0 | 1 | 2 |
| A. Requirements for successful completion of activity. | 0 | 1 | 2 |
| B. Commercial support for CE program, sponsor, or instructor (or any other relationship that could reasonably be construed as a conflict of interest). | 0 | 1 | 2 |
| C. Commercial support for content of instruction (e.g., research grants funding research findings, etc) that could be construed as a conflict of interest. | 0 | 1 | 2 |
| D. Commercial support or benefit for endorsement of products (e.g., books, training, drugs, etc). | 0 | 1 | 2 |
| E. Accuracy and utility of the materials presented, the basis of such statements, the limitations of the content being taught and the severe and most common risks)? | 0 | 1 | 2 |

| **Venue, Setting, etc.** | Not Applicable | Strongly Disagree | Disagree | Neither Agree nor Disagree | Agree | Strongly Agree |
| --- | --- | --- | --- | --- | --- | --- |
| 17. Facility was adequate for my needs. | 0 | 1 | 2 | 3 | 4 | 5 |
| 18. Special needs were met. | 0 | 1 | 2 | 3 | 4 | 5 |
| 19. Facility was comfortable and accessible. | 0 | 1 | 2 | 3 | 4 | 5 |
| 20. Food and beverage were adequate. | 0 | 1 | 2 | 3 | 4 | 5 |
| 21. Web-based program was easy to access and provided a user-friendly interface. | 0 | 1 | 2 | 3 | 4 | 5 |
| **Learning** |  |  |  |  |  |  |
| 22. Information could be applied to my practice. | 0 | 1 | 2 | 3 | 4 | 5 |
| 23. Information could contribute to achieving personal or professional goals. | 0 | 1 | 2 | 3 | 4 | 5 |
| 24. Cultural, racial, ethnic, socioeconomic, and gender differences were considered. | 0 | 1 | 2 | 3 | 4 | 5 |
| 25. Did this program enhance your professional expertise? | 0 | 1 | 2 | 3 | 4 | 5 |
| 26. Would you recommend this program to others? | 0 | 1 | 2 | 3 | 4 | 5 |
| Participant Information |  |
| 27. Please note your profession and status. | Psychologist | Medical Professional |
| Social Worker | Student |
| Administrator | University |
| Faculty | Other \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| 28. Please note years in your profession. | Student | 1 - 5 | 6 - 10 | 11 - 20 | 20+ |

29. What was your overall impression of the activity? What went well? What could have been improved?

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30. What did you learn that was new or different? How and/or will this information change how you practice?

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31. What topics or presenters would you like to see at future CE presentations?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

32. Other comments? Please use another sheet of paper if you wish to expand on your observations.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If you have any complaints regarding this or any CE activity or additional questions, please email us at pcit.ce@gmail.com