

## VI. Program Evaluation and Learning Assessment Template

### Sample Self-Assessment and Evaluation Form

#### Part 1: Participant Self- Assessment of Learning and Evaluation of Content and Presenter(s)/Instructor(s)

This set of questions can be repeated for each session in a program

|  |                          |                 |                   |                       |
|--|--------------------------|-----------------|-------------------|-----------------------|
| <b>Self-Assessment:</b><br>I achieved the following learning objectives from this program/session:                           | <b>Strongly Disagree</b> | <b>Disagree</b> | <b>Agree</b>      | <b>Strongly Agree</b> |
| Objective 1 ((write out specific objective)  | 1                        | 2               | 3                 | 4                     |
| Objective 2 (write out specific objective)   | 1                        | 2               | 3                 | 4                     |
| Objective 3 etc. (write out specific objective)  | 1                        | 2               | 3                 | 4                     |
| <b>Learning Assessment:</b>  | <b>Very Little</b>       | <b>Little</b>   | <b>A Good Bit</b> | <b>A Great Deal</b>   |
| How much did you learn as a result of this program/ session  | 1                        | 2               | 3                 | 4                     |
| <b>Evaluation of content and instruction:</b>  | <b>Strongly Disagree</b> | <b>Disagree</b> | <b>Agree</b>      | <b>Strongly Agree</b> |
| The content was appropriate for post-graduate level training/ instruction  | 1                        | 2               | 3                 | 4                     |
| The instruction was at a level appropriate to post-graduate level training/ instruction                                      | 1                        | 2               | 3                 | 4                     |
| The content was relevant to genetic counseling practice (i.e. reflects practice-based competencies and/or practice analysis) | 1                        | 2               | 3                 | 4                     |
| The content was consistent with genetic counseling Code of Ethics  | 1                        | 2               | 3                 | 4                     |
| Teaching methods were effective  | 1                        | 2               | 3                 | 4                     |
| Visual aids, handouts, and oral presentations clarified content  | 1                        | 2               | 3                 | 4                     |

| <b>Evaluation of Instructor (s)/presenter(s)<br/>[Repeat questions for each instructor/presenter in the session]</b> | <b>Strongly Disagree</b> | <b>Disagree</b> | <b>Agree</b> | <b>Strongly Agree</b> |
|--|--------------------------|-----------------|--------------|-----------------------|
| Instructor 1:  |                          |                 |              |                       |
| Knew the subject matter  | 1                        | 2               | 3            | 4                     |
| Presented content effectively  | 1                        | 2               | 3            | 4                     |
| Elaborated on stated objectives  | 1                        | 2               | 3            | 4                     |
| Maintained my interest   | 1                        | 2               | 3            | 4                     |
| Was responsive to questions, comments, opinions  | 1                        | 2               | 3            | 4                     |
| Presented content without any bias of any commercial product   | 1                        | 2               | 3            | 4                     |
| Disclosed any conflict of interest or lack of a conflict of interest at the start of the session.                    | 1                        | 2               | 3            | 4                     |

## Part 2: Program Evaluation

These are examples of the types of questions that program planners could include in an overall program evaluation. They may be modified as needed.

| <b>Program Content</b>   | <b>Strongly Disagree</b> | <b>Disagree</b>        | <b>Agree</b>       | <b>Strongly Agree</b>   |
|--|--------------------------|------------------------|--------------------|-------------------------|
| The content presented in this program can be applied to my practice or other work context.           | 1                        | 2                      | 3                  | 4                       |
| The content contributes to achieving my personal or professional goals.                              | 1                        | 2                      | 3                  | 4                       |
| The program enhanced my professional expertise.  | 1                        | 2                      | 3                  | 4                       |
| Teaching methods or tools focused on how to apply program content to my practice/ work environment.  | 1                        | 2                      | 3                  | 4                       |
| Learning was enhanced through a variety of media utilizing auditory, visual, and multimedia formats. | 1                        | 2                      | 3                  | 4                       |
| The presentation facilitated the integration and synthesis of information.                           | 1                        | 2                      | 3                  | 4                       |
|  | <b>Not Useful</b>        | <b>A Little Useful</b> | <b>Very Useful</b> | <b>Extremely Useful</b> |
| How useful was the content of this program for your practice or other professional development?      | 1                        | 2                      | 3                  | 4                       |
| <b>Venue, Setting, etc.</b>  | <b>Strongly Disagree</b> | <b>Disagree</b>        | <b>Agree</b>       | <b>Strongly Agree</b>   |
| Facility was adequate for my needs   | 1                        | 2                      | 3                  | 4                       |
| Special needs were met   | 1                        | 2                      | 3                  | 4                       |
| Facility was comfortable and accessible  | 1                        | 2                      | 3                  | 4                       |
| Food and beverage were adequate (if applicable)  | 1                        | 2                      | 3                  | 4                       |
| Program brochure was informative and accurate  | 1                        | 2                      | 3                  | 4                       |

The following questions can be edited as appropriate to the program

| <b>Professional &amp; Ethical Issues</b>                       |            |           |
|--|------------|-----------|
| Prior to registration, the following were may clearly evident: | <b>Yes</b> | <b>No</b> |
| Requirements for successful completion of activity             |            |           |

|  |  |  |
|--|--|--|
| Commercial support for the program, sponsor or instructor  |  |  |
| Commercial support for the content of instruction (e.g. research grants funding research findings, etc.) that could be construed as a conflict of interest |  |  |
| Commercial support or benefit for endorsement of products (e.g. books, training, etc.)   |  |  |