

The Consortium Topical Conference Call Evaluation



From Information to Action: Using an Interactive Website to Access Data from the National Survey



May 25, 2005 from 1:00–2:30 PM, EST

We would appreciate your evaluation of this topical conference call. Your comments will assist The Consortium in planning future telephone conferences that meet the needs of our participants. **Thank you for your time.**

	Not True				Very True
1. This conference call was informative	1	2	3	4	5
2. This conference call added to my knowledge of resources, materials and experts on this topic.....	1	2	3	4	5
3. The information during this call may help me to network and build collaborations	1	2	3	4	5
4. The information during this call could help me to develop recommendations for policy.....	1	2	3	4	5
5. This conference call helped me learn how to support and include families/consumers as partners.....	1	2	3	4	5
6. This conference call could add to my capacity to build more effective programs for children and families	1	2	3	4	5
7. The presenter(s) were knowledgeable and effective in style	1	2	3	4	5
8. The structure of the call allowed opportunities to raise questions and issues and to get information from the presenter/others	1	2	3	4	5
9. I would find the information <u>most</u> useful presented in the following format(s): (please all that apply)					
<input type="checkbox"/> Monograph <input type="checkbox"/> Fact Sheet/Research Brief <input type="checkbox"/> Internet/Web <input type="checkbox"/> Audio recorded <input type="checkbox"/> Meeting <input type="checkbox"/> Conference Call (as is) <input type="checkbox"/> Other _____					
10. I will use the information obtained during this conference call as follows: (please check all that apply)					
<input type="checkbox"/> To learn more information <input type="checkbox"/> To share with others <input type="checkbox"/> To improve services <input type="checkbox"/> To develop policy <input type="checkbox"/> To affect changes in system <input type="checkbox"/> For research <input type="checkbox"/> To teach <input type="checkbox"/> Other _____					
11. My role can best be described as:					
<input type="checkbox"/> Administrator <input type="checkbox"/> Consumer/Family Member <input type="checkbox"/> Health Plan <input type="checkbox"/> Policy maker <input type="checkbox"/> Practitioner/Provider <input type="checkbox"/> Researcher <input type="checkbox"/> Other _____					
12. The primary area in which I work can best be described as:					
<input type="checkbox"/> Child Welfare <input type="checkbox"/> Developmental Disabilities <input type="checkbox"/> Occupational Therapy <input type="checkbox"/> Health <input type="checkbox"/> Special Education <input type="checkbox"/> Family Involvement <input type="checkbox"/> Mental Health <input type="checkbox"/> Physical Therapy <input type="checkbox"/> Early Childhood <input type="checkbox"/> Speech & Hearing <input type="checkbox"/> Vocational Rehabilitation <input type="checkbox"/> Other _____					

Name(optional): _____ State: _____

THANK YOU!

Please mail to The Consortium, c/o Georgetown University, 3300 Whitehaven St., NW, Suite 3300, PO Box 571485, Washington, D.C. 20007 or fax to: (202) 687-8899; Attn: Tammy Edwards