

**TESH – TELEHEALTH EDUCATION FOR SCHOOL HEALTH
CONTINUING EDUCATION ACTIVITY EVALUATION FORM**

Nebraska DHHS Division of Public Health
School and Child Health Program

Activity Title: ***Performing a Pediatric Oral Health Inspection: Lessons for School Nurses***

Date: ***February 1, 2012 (live)***

Activity No. 31130

If viewing on-demand recording, Date: _____

As a learner please assist in the evaluation of this presentation. Please circle the number beside each statement that best reflects the extent of your agreement. Thank you.

		Disagree				Agree
Content						
1.	The content was interesting to me.....	1	2	3	4	5
2.	The content extended my knowledge of the topic.....	1	2	3	4	5
3.	The content was consistent with the objectives.....	1	2	3	4	5
4.	The content was related to my job.....	1	2	3	4	5
5.	Objectives were consistent with purpose/goals of activity.....	1	2	3	4	5
Setting						
1.	The room was conducive to learning.....	1	2	3	4	5
2.	The learning environment stimulated idea exchange.....	1	2	3	4	5
3.	Telehealth was appropriate for the activity.....	1	2	3	4	5
4.	<i>(If viewing recorded version)</i> Web streaming was appropriate For the activity.....	1	2	3	4	5
Faculty/Presenter Effectiveness: (Insert Presenter’s Name here)						
1.	The presentation was clear and to the point.....	1	2	3	4	5
2.	The presenter demonstrated mastery of the topic.....	1	2	3	4	5
3.	The method used to present the material held my attention.....	1	2	3	4	5
4.	The presenter was responsive to participant concerns.....	1	2	3	4	5
Instructional Methods						
1.	The instructional material was well organized.....	1	2	3	4	5
2.	The instructional methods illustrated the concepts well.....	1	2	3	4	5
3.	The handout materials given are likely to be used as a future reference.....	1	2	3	4	5
5.	The teaching strategies were appropriate for the activity.....	1	2	3	4	5
Learner Achievement of Objectives						
1.	Discuss data and trends regarding the dental health of Nebraska children.	1	2	3	4	5
2.	Demonstrate the competencies of oral health assessment and school-based dental screening.	1	2	3	4	5
3.	Discuss the findings that warrant notification of parents of need for further evaluation.	1	2	3	4	5
4.	Discuss evidence-based oral health promotion strategies for the school nurse.	1	2	3	4	5
5.	Describe immediate nursing interventions and first aid	1	2	3	4	5

for oral/dental injuries.

Comments:

TELEHEALTH SYSTEM EVALUATION: Please complete if you participated in our “live” event!

1. Location where you are attending this telehealth session:
2. How many persons are attending at your location today?
3. Please evaluate your satisfaction with telehealth learning today.
5 = highly satisfied 4= satisfied 3 = neutral 2 = dissatisfied 1 = highly dissatisfied
 - a. The use of the telehealth system was conducive to my learning. _____
 - b. The picture quality _____
 - c. The sound quality _____
 - d. I am very likely to use telehealth again for my professional learning needs. _____
4. If you were not satisfied with telehealth today, please describe the issues/problems/technical difficulties you faced so we can correct them:

WEB-ON-DEMAND EVALUATION: Please complete if you viewed the recorded learning event!

1. Date and time you viewed the recorded event on www.answers4families.org
2. Please evaluate your satisfaction with web-on-demand learning.
5 = highly satisfied 4= satisfied 3 = neutral 2 = dissatisfied 1 = highly dissatisfied
 - a. The use of web-on-demand access to the TESH recording was conducive to my learning

 - b. The picture quality _____
 - c. The sound quality _____
 - d. I am very likely to use web-on-demand on www.answers4families.org again for my professional learning needs _____
3. If you were not satisfied with our web-on-demand option, please describe the issues/problems/technical difficulties you faced so we can correct them:

THANK YOU! Return your completed evaluation and sign-in sheet to the DHHS School and Child Health Program, c/o Kathy Karsting, RN. Fax:402-471-7049; email

kathy.karsting@nebraska.gov; snail mail P.O. Box 95026 Lincoln NE 68509-5026.