



Idaho Training Clearinghouse

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Annual Training Evaluation Report

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Special Education Section**

Table of Contents

Overview of ITC Goals and Functions	1
Reporting Procedures	2
Training Sign-in Sheets Received	3
Respondents and Response Rates	4-5
How Learn of Trainings	6
Improvement of Trainings	7
Advantages of Webinar Trainings	8
Disadvantages of Webinar Trainings	9
Application of Trainings	10
Resources for Implementation	11
Potential Influence of Online Materials	12
Potential Use of Online Materials	13
Future Training Needs	14-15
IDAHO SPECIAL EDUCATION ELECTRONIC FORMS	
Post Evaluation Summary	16
Follow-up Evaluation Summary	17
INTERIM IDAHO SPECIAL EDUCATION MANUAL	
Post Evaluation Summary	18-19
Follow-up Evaluation Summary	20-21
POSSE	
Post Evaluation Summary	22
Follow-up Evaluation Summary	23
RESULTS BASED MODEL: ADVANCED	
Post Evaluation Summary	24-25
Follow-up Evaluation Summary	26
SELF-ASSESSMENT/MONITORING	
Post Evaluation Summary	27
Follow-up Evaluation Summary	28

Table of Contents, Cont.

STRENGTH-BASED INTERVENTION PLANS		
Post Evaluation Summary		29-30
Follow-up Evaluation Summary		31
WEBINAR: IDAHO ALTERNATE ASSESSMENT 2006 ADMINISTRATION		
Post Evaluation Summary		32
Follow-up Evaluation Summary		33
WEBINAR: IDAHO ALTERNATE ASSESSMENT 2006 UPDATES		
Post Evaluation Summary		34
Follow-up Evaluation Summary		35
WEBINAR: INCLUSIVE EDUCATION		
Post Evaluation Summary		36
Follow-up Evaluation Summary		37
WEBINAR: MONITORING PROGRESS		
Post Evaluation Summary		38
Follow-up Evaluation Summary		39
WEBINAR: PERSONAL AND SOCIAL ASSESSMENT OPTIONS FOR TRANSITION		
*Post Evaluation Summary (only)		40
WEBINAR: TEACHING LITERACY		
Post Evaluation Summary		41
Follow-up Evaluation Summary		42
WEBINAR: VOCATIONAL AND OCCUPATIONAL ASSESSMENT OPTIONS FOR TRANSITION		
Post Evaluation Summary		43
Follow-up Evaluation Summary		44

*No *Follow-up Evaluation Summary* developed due to no follow-up email messages were sent within the reporting period.

Overview of ITC Goals and Functions

The Idaho Training Clearinghouse (ITC) was created as part of the State Improvement Grant through the Idaho State Department of Education, Bureau of Special Population Services, Special Education Section (hereafter referred to as ISDE) to link special educators and parents of students with disabilities with statewide training opportunities and resources across multiple agencies and parent groups. The ITC website was developed in collaboration with the Center on Disabilities and Human Development at the University of Idaho and is compliant with the accessibility standards and recommendations in Section 508 of the Rehabilitation Act.

The ITC has three major goals: (1) to inform stakeholders of statewide training opportunities and expedite electronic registration through an online training calendar; (2) to gather evaluative feedback on the usefulness and impact of trainings to inform future planning of inservice trainings in the state; and (3) to support distance education opportunities by creating digital media and online tools that increase accessibility to needed training and foster learning communities where groups of professionals and parents can come together to communicate, collaborate, and support each other in the development of shared knowledge and skills. The functions of each goal are described in more detail below.

(1) **Online Training Calendar and Resources:** With the online ITC training calendar all users can search for trainings by pre-assigned categories, keywords (e.g., subject/content, location), and dates; download training brochures and registration forms; and register for trainings by email. Users of the ITC website can also access other online training calendars (e.g., Idaho Division of Family and Community Services) through a links page. Additionally, users have access to other online training materials including (a) quick reference materials (one page abstracts of pertinent information and additional resources written by state subject matter experts) across various topics such as assistive technology, dyslexia, and transition and (b) online training modules from other institutes of higher education, federal agencies and national organizations (e.g., IRIS Center at Peabody University).

(2) **Training Evaluation Process:** The ITC has developed an evaluation process to gather both short-term and long-term data on the impact of statewide special education inservice trainings. For the 2005-2006 academic year, the ISDE moved to a "paperless" process that required participants to complete training evaluations via online surveys. There are two phases to the training evaluation process: (1) a post-phase (short-term) in which training participants complete evaluations within 1-2 days after the training and (2) a follow-up phase (long-term) in which participants complete a different evaluation survey 6 weeks after the training. In both phases, participants receive an initial email and a reminder email for completing the online evaluation survey. The post survey focuses on participants' satisfaction with the content and delivery of the training. The follow-up survey focuses on how participants have implemented new ideas, what barriers they have encountered, and what they see as additional training needs.

(3) **Distance Education:** In an effort to increase accessibility to professional development opportunities in a predominately rural state, the priority for 2005-2006 was the development of electronic learning communities (ELC) on the topics of Alternate Assessment, Assistive Technology, Results Based Model, and Secondary Transition. An electronic learning community is defined as an online "space" where groups of professionals and parents can come together to communicate, collaborate, and support each other in the development of shared knowledge and skills. The development of ELCs has allowed the ISDE to efficiently organize content information, structure support for implementation, and provide opportunities for networking among geographically dispersed educators, agency representatives, and families.

Reporting Procedures

The 2006 annual training evaluation report encompasses the compilation and analysis of two sets of data: (1) post training evaluation surveys completed by participants 1-2 days after trainings and (2) follow-up training evaluation surveys completed by participants 6 weeks after trainings. In addition, the annual report provides summaries of the evaluation data on two levels – (a) overall and (b) by training title. The intent of the report is to provide the ISDE a combined summary and analysis of all training evaluation data so as to make informed decisions on statewide trainings to offer in the future.

For the **reporting period of April 1, 2005 through March 31, 2006**, the following page provides a listing of all training sign-in sheets received and included in this report. (Note, toward the beginning of the evaluation year, there were a few trainings for which hard copy post evaluation summaries were received and, therefore, not applicable to the new evaluation process established for this 2006 report.) All other sign-in sheets received, which do not fall within the above reporting period, will be included in the next annual reporting period.

Regarding the organization of the report, pages 4-15 provide summarized data at the overall level across both the post and follow-up sets of data. The remaining pages provide post and follow-up summaries specific to the following trainings.

Face-to-Face Trainings

1. Idaho Special Education Electronic Forms
2. Interim Idaho Special Education Manual
3. POSSE
4. Results Based Model: Advanced
5. Self-Assessment Monitoring
6. Strength-Based Intervention Plans

Webinar Trainings

7. Webinar: Idaho Alternate Assessment 2006 Administration
8. Webinar: Idaho Alternate Assessment 2006 Updates
9. Webinar: Inclusive Education
10. Webinar: Monitoring Progress
11. Webinar: Personal and Social Assessment Options for Transition
12. Webinar: Teaching Literacy
13. Webinar: Vocational and Occupational Assessment Options for Transition

Regarding the above 13 trainings, for a summary to be developed and included in this report, (a) there must have been two or more face-to-face trainings with the same title conducted or (b) the training was conducted via webinar format. Also note, that in contrast to past years, for the 2005-2006 evaluation year the Results Based Model Core (5-day) training was evaluated at the end of day five only (as opposed to after each day of training). Therefore, due to only one 5-day series (Idaho Falls) finishing within the dates of the reporting period, no Results Based Model (RBM) Core training summaries are included in this report. Summaries for RBM Core 5-day series can be requested from the Idaho Training Clearinghouse.

All open-ended questions have been qualitatively analyzed for common categories. Throughout the report, numbers that appear in parentheses denote the frequency of responses for that identified category.

Idaho Training Clearinghouse (ITC): 2006 Annual Training Evaluation Report

Training Sign-in Sheets Received (arranged by title)						
ISDE-Special Education Section 2005-2006 Database						
Begin Date: April 1, 2005						
End Date: March 31, 2006						
				Date		
				Received		Notes*
				Sign-in		
	Training Title	Location	Region	Training Date	Date Received Sign-in	
1	AIMSweb	Boise	Southwest	02/03/06	02/23/06	
2	Idaho Alternate Assessment 2006	Post Falls	North	02/27/06	02/28/06	
3	Idaho Special Education Electronic Forms	Moscow	North	10/04/05	10/06/05	
4	Idaho Special Education Electronic Forms	Coeur d'Alene	North	10/10/05	10/14/05	
5	Idaho Special Education Electronic Forms	Pocatello	Southeast	10/14/05	10/14/05	
6	IDEA Overview	Dayton	Southeast	08/22/05	10/04/05 HCSum	
7	IEP Training	St. Anthony	Southeast	02/09/06	02/13/06	
8	Improving Outcomes	Boise	Southwest	02/07/06	02/23/06	
9	Interim Special Education Manual	Marsh Valley	Southeast	09/23/05	11/09/05	
10	Interim Special Education Manual	Pocatello	Southeast	09/23/05	09/28/05	
11	Interim Special Education Manual	Idaho Falls	Southeast	09/26/05	09/28/05	
12	Interim Special Education Manual	Boise	Southwest	09/26/05	10/19/05	
13	Interim Special Education Manual	Twin Falls	Southeast	09/27/05	09/28/05	
14	Interim Special Education Manual	Nampa	Southwest	09/27/05	10/19/05	
15	Interim Special Education Manual	Coeur d'Alene	North	09/28/05	09/29/05	
16	Interim Special Education Manual	Moscow	North	09/29/05	10/04/05	
17	Interim Special Education Manual	Nampa	Southwest	10/11/05	10/19/05	
18	Interim Special Education Manual Forms	Boise	Southwest	11/15/05	11/15/05	
19	New Teacher Workshop	Twin Falls	Southeast	09/15/05	12/21/05 HCSum	
20	New Teacher Workshop	Pocatello	Southeast	09/22/05	09/28/05	
21	POSSE	Pocatello	Southeast	11/29/05	12/01/05	
22	POSSE	Idaho Falls	Southeast	11/30/05	12/01/05	
23	POSSE	Boise	Southwest	12/05/05	12/05/05	
24	POSSE	Coeur d'Alene	North	12/07/05	12/08/05	
25	RBM Advanced	Pocatello	Southeast	02/15/06	02/16/06	
26	RBM Advanced	Boise	Southwest	02/24/06	02/27/06	
27	RBM Advanced	Moscow	North	03/09/06	03/09/06	
28	RBM Core Days 1-5	Idaho Falls	Southeast	03/03/06	03/07/06	
29	Referral Process	Dubois	Southeast	01/06/06	01/10/06	
30	Research Based Interventions	Plummer	North	11/15/05	11/17/05	
31	Results Based Model: Core Day 1	Coeur d'Alene	North	11/29/05	11/30/05	
32	Self-assessment/Monitoring	Twin Falls	Southeast	10/04/05	10/11/05	
33	Self-assessment/Monitoring	Pocatello	Southeast	10/11/05	10/12/05	
34	Self-assessment/Monitoring	Coeur d'Alene	North	10/14/05	10/17/05	
35	Self-assessment/Monitoring	Boise	Southwest	10/31/05	11/02/05	
36	Strength Based Intervention Plans	Pocatello	Southeast	11/15/05	11/15/05	
37	Strength Based Intervention Plans	Moscow	North	12/09/05	12/15/05	
38	Strength Based Intervention Plans	Twin Falls	Southeast	01/24/06	01/25/06	
39	Transition Workshop	Plummer	North	09/07/05	10/04/05 HCSum	
40	Transition Workshop	Nampa	Southwest	01/17/06	01/26/06	
41	Webinar: IAA Administration	n/a	n/a	02/28/06	03/02/06	
42	Webinar: IAA Updates	n/a	n/a	03/08/06	03/09/06	
43	Webinar: Inclusive Education	n/a	n/a	02/09/06	02/08/06	
44	Webinar: Monitoring Progress	n/a	n/a	12/08/05	12/12/05	
45	Webinar: Personal & Social Assessment	n/a	n/a	03/23/06	03/29/06	
46	Webinar: Teaching Literacy	n/a	n/a	10/12/05	10/12/05	
47	Webinar: Voc & Occ Assessment Options	n/a	n/a	02/15/06	02/15/06	
*HCSum=Hard Copy (Old Version) Post Summary Received						

Respondents and Response Rate: Post

The table below is a summary of all responses on the post evaluation survey question regarding the position category of respondents.

Position Category	Face-to-Face Trainings		Webinar Trainings	
	Response Total	Response Percent	Response Total	Response Percent
Special Educator	259	36.3%	70	55.6%
Related Service Personnel	163	22.8%	18	14.3%
School Administrator	142	19.9%	20	15.9%
General Educator	86	12.0%	2	1.6%
Paraprofessional	24	3.4%	5	4.0%
Title 1 Teacher	17	2.4%		
Other/None of the Above	10	1.4%	9	7.1%
Parent of a Child With Disability	6	0.8%	2	1.6%
Advocate	5	0.7%		
Family Service Provider	2	0.3%		
Medical/Health Professional	0	0.0%		
Foster Parent	0	0.0%		
Surrogate Parent	0	0.0%		
Other Relative	0	0.0%		
Total Respondents	714		126	

The table below is a summary of all responses on the post evaluation optional survey question regarding the ethnic group of respondents.

Ethnic Group	Face-to-Face Trainings	
	Response Total	Response Percent
White	613	93.9%
Other/Unknown	19	2.9%
Hispanic/Latino	12	1.8%
Asian	3	0.5%
Native Hawaiian/Other Pacific Islander	3	0.5%
American Indian/Native Alaskan	2	0.3%
Black/African American	1	0.2%
Total Respondents	653	

The table below is a summary of the response rate data for all of the post evaluation surveys combined.

	Face-to-Face Trainings	Webinar Trainings	All Trainings
Total Number of Participant Email Addresses:	1,606	350	1,956
Total Number of Invalid Email Addresses:	255	41	296
Total Number of Emails Sent:	1,351	309	1,660
Total Respondents:	714	128	842
Overall Response Rate:	52.8%	41.4%	50.7%
Average Increase in Response Rate After 1-week Reminder:	73.0%	49.1%	

Respondents and Response Rate: Follow-up

The table below is a summary of all responses on the follow-up evaluation survey question regarding the position category of respondents.

Position Category	Face-to-Face Trainings		Webinar Trainings	
	Response Total	Response Percent	Response Total	Response Percent
Educator	454	66.0%	75	70.1%
School Administrator	115	16.7%	11	10.3%
None of the Above	74	10.8%	9	8.4%
Paraprofessional	31	4.5%	11	10.3%
Agency	8	1.2%	1	0.9%
Parent	6	0.9%	0	0.0%
Total Respondents	688		107	

The table below is a summary of the response rate data for all of the follow-up evaluation surveys combined.

	Face-to-Face Trainings	Webinar Trainings	All Trainings
Total Number of Participant Email Addresses:	1,729	334	2,063
Total Number of Invalid Email Addresses:	251	41	292
Total Number of Emails Sent:	1,478	293	1,771
Total Respondents:	688	107	795
Overall Response Rate:	48.2%	36.5%	44.9%
Average Increase in Response Rate After 1-week Reminder:	42.5%	87.2%	

How Learn of Trainings

The table below is a summary of all responses on the following **post** evaluation survey question regarding **face-to-face** trainings.

Question: How did you learn of this training? *(Select all that apply.)*

Method	Response Total	Response Percent
Administrator or colleague (word of mouth)	476	67.0%
Email announcement	179	25.2%
Flyer/brochure	118	16.6%
Announcement at another conference	36	5.1%
Idaho Training Clearinghouse online training calendar	10	1.4%
Total Respondents	710	

Improvement of Trainings

The table below is a summary of all responses on the following **post** evaluation survey question regarding **face-to-face** trainings.

Question: The following conditions would have improved or increased the effectiveness of this training. (Select all that apply.)

Condition	Response Total	Response Percent
Include or provide more specific examples , samples, and/or real-life scenarios	237	41.7%
Have other colleagues/staff/team members attend the training	155	27.3%
Allow more time for training (e.g., more time on certain topics, cover less material, make training longer, add additional sessions)	154	27.1%
Have administration attend the training	138	24.3%
Include or provide more opportunities to share/network with others (e.g., small group activities, breakout sessions)	133	23.4%
Provide experienced coaches/mentors to support implementation after training	112	19.7%
Improve organization/quality of training materials /handouts/manuals	106	18.7%
Include or provide more application/interactive opportunities (e.g., hands-on activities, role playing, case studies, video demonstrations)	100	17.6%
Increase pace of training (e.g., fewer breaks, shorter session, stay on task, reduce repetition)	85	15.0%
Include or provide more resources/references	70	12.3%
Improve physical environment/food/sound	62	10.9%
Improve organization/quality of overheads/PowerPoint slides	63	11.1%
Prepare attendees as to what to bring to the training	45	7.9%
Total Respondents	568	

Advantages of Webinar Trainings

The table below is a summary of all responses on the following **post** evaluation survey question regarding **webinar** trainings.

Question: Please indicate the advantages to using this form of technology for training.
(Select all that apply.)

Advantage	Response Total	Response Percent
Not required to travel	117	93.6%
No or low cost for participation	111	88.8%
Does not require a great amount of time away from school	104	83.2%
More staff and consultants can participate	92	73.6%
Other, please specify: <ul style="list-style-type: none"> • Ability to discuss with others (e.g., team members) the application of materials (or specific examples) during the presentation (2) • Ability to review a recording of the presentation (1) • Ability to multi-task while listening (1) • Relaxed setting conducive to learning (1) • Fewer to no interruptions by others (1) • Ability to ask questions anonymously (1) • Flexibility as to location for participation (1) 	8	6.4%
Total Respondents	125	

Disadvantages of Webinar Trainings

The table below is a summary of all responses on the following **post** evaluation survey question regarding **webinar** trainings.

Question: Please indicate the disadvantages to using this form of technology for training.
(Select all that apply.)

Disadvantage	Response Total	Response Percent
Lack of face-to-face interaction with presenters	60	53.1%
Training is primarily lecture, rather than activity based	46	40.7%
Difficult to ask questions during the webinar	35	31.0%
Lack of face-to-face interaction with participants	34	30.1%
Difficult to sit and attend to the content without being able to interact with others	27	23.9%
Limited time to focus on the content	19	16.8%
Other, please specify: <ul style="list-style-type: none"> • Difficulty hearing and/or noise distractions due to participants' phone lines not being muted (6) • Difficulty logging into and/or staying connected to the system (3) • Technical difficulties within the system causing a delayed start time (3) • Too long for the amount and type of information covered (2) • Inability to access from school computer because of firewalls (2) • Individual computer problems (e.g., computer freezing) (1) 	17	15.0%
Total Respondents	113	

Application of Trainings

The tables below are a summary of all responses on the following **follow-up** evaluation survey question regarding the application of training content regarding **face-to-face** trainings vs. **webinar** trainings.

As a result of this training/webinar, I learned a new skill or acquired needed information.				
	Face-to-Face Trainings		Webinar Trainings	
	Response Total	Response Percent	Response Total	Response Percent
Yes	640	93.0%	91	85.0%
No	48	7.0%	16	15.0%
Total Respondents	688		107	

I have had an opportunity to apply what I learned from this training/webinar in my professional/personal setting.				
	Face-to-Face Trainings		Webinar Trainings	
	Response Total	Response Percent	Response Total	Response Percent
Yes	598	86.9%	74	69.2%
No	90	13.1%	33	30.8%
Total Respondents	688		107	

As a result of this training/webinar, I have positively changed my professional/personal practices.				
	Face-to-Face Trainings		Webinar Trainings	
	Response Total	Response Percent	Response Total	Response Percent
Yes	530	77.0%	75	70.1%
No	158	23.0%	32	29.9%
Total Respondents	688		107	

Resources for Implementation

The table below is a summary of all responses on the following **follow-up** evaluation survey question regarding **face-to-face** trainings vs. **webinar** trainings.

Question: The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training/webinar into my professional/personal practices. (Select all that apply.)

Condition	Face-to-Face Trainings		Webinar Trainings	
	Response Total	Response Percent	Response Total	Response Percent
Opportunity/time to apply and/or practice the new skill	413	63.3%	70	67.3%
Opportunity/time to collaborate and share ideas with others	322	49.4%	49	47.1%
Planning time for integrating the new skill into daily practices	269	41.3%	52	50.0%
Further training , follow-up, and/or ongoing support	265	40.6%	34	32.7%
Support from school and/or district administration	193	29.6%	20	19.2%
Other staff/colleagues attending this training	158	24.2%	11	10.6%
Additional funding/financial resources	112	17.2%	8	7.7%
Support from Individualized Education Program (IEP) team	109	16.7%	7	6.7%
Total Respondents	652		104	

Potential Influence of Online Materials

The table below is a summary of all responses on the following **follow-up** evaluation survey question regarding **face-to-face** trainings vs. **webinar** trainings.

Question: Rate the influence of the following items on your potential success in applying the skills/information from this training/webinar to your professional/personal setting.

Online learning community to network and share ideas with others.						
	Extremely Low Influence	Low Influence	Average Influence	High Influence	Extremely High Influence	Response Total
Face-to-Face Trainings	16.9% (114)	27.3% (184)	40.7% (274)	12.2% (82)	2.8% (19)	673
Webinar Trainings	8.8% (9)	12.7% (13)	40.2% (41)	33.3% (34)	4.9% (5)	102

Online access to training materials (e.g., handouts, PowerPoint slides).						
	Extremely Low Influence	Low Influence	Average Influence	High Influence	Extremely High Influence	Response Total
Face-to-Face Trainings	8.0% (54)	14.9% (100)	40.1% (270)	28.5% (192)	8.5% (57)	673
Webinar Trainings	4.9% (5)	5.9% (6)	32.4% (33)	42.2% (43)	14.7% (15)	102

Online access to resources (e.g., website links, examples).						
	Extremely Low Influence	Low Influence	Average Influence	High Influence	Extremely High Influence	Response Total
Face-to-Face Trainings	6.4% (43)	11.9% (80)	38.8% (261)	32.1% (216)	10.8% (73)	673
Webinar Trainings	4.9% (5)	6.9% (7)	37.3% (38)	36.3% (37)	14.7% (15)	102

Potential Use of Online Materials

The table below is a summary of all responses on the following **follow-up** evaluation survey question regarding **face-to-face** trainings vs. **webinar** trainings.

Question: Rate the likelihood that you would access/use the following items to support your application of the skills/information from this training/webinar to your professional/personal setting.

Online learning community to network and share ideas with others.						
	Extremely Low Likelihood	Low Likelihood	Average Likelihood	High Likelihood	Extremely High Likelihood	Response Total
Face-to-Face Trainings	15.8% (106)	25.0% (168)	38.0% (256)	16.8% (113)	4.5% (30)	673
Webinar Trainings	11.8% (12)	15.7% (16)	36.3% (37)	31.4% (32)	4.9% (5)	102

Online access to training materials (e.g., handouts, PowerPoint slides).						
	Extremely Low Likelihood	Low Likelihood	Average Likelihood	High Likelihood	Extremely High Likelihood	Response Total
Face-to-Face Trainings	7.6% (51)	12.0% (100)	37.6% (253)	30.6% (206)	12.2% (82)	673
Webinar Trainings	3.9% (4)	6.9% (7)	30.4% (31)	41.2% (42)	17.6% (18)	102

Online access to resources (e.g., website links, examples).						
	Extremely Low Likelihood	Low Likelihood	Average Likelihood	High Likelihood	Extremely High Likelihood	Response Total
Face-to-Face Trainings	5.5% (37)	8.9% (60)	35.4% (238)	36.1% (243)	14.1% (95)	673
Webinar Trainings	5.9% (6)	3.9% (4)	29.4% (30)	45.1% (46)	15.7% (16)	102

Future Trainings Needs

The table below is a summary of all responses on the following **post** and **follow-up** evaluation survey question regarding **face-to-face** trainings and **webinar** trainings combined. (Note, the following question was not asked on the post webinar training evaluation survey.)

Question: What other training opportunities do you need to be successful in providing services to students with disabilities or meeting the needs of your child with a disability?
(Select all that apply.)

Content Area	POST		FOLLOW-UP	
	Response Total	Response Percent	Response Total	Response Percent
Behavior/Social/Emotional Management	268	45.1%	351	49.3%
Autism/Aspergers Syndrome	186	31.3%	263	36.9%
Assessments/Data Collection	169	28.5%	224	31.5%
Results Based Model	152	25.6%	236	33.1%
Differentiation of Instruction	117	19.7%	160	22.5%
Individualized Education Program (IEP)	102	17.2%	81	11.4%
Idaho Alternate Assessment (IAA)	94	15.8%	115	16.2%
Curriculum Development/Selection/Implementation	90	15.2%	133	18.7%
Time Management	81	13.6%	119	16.7%
Assistive Technology	80	13.5%	124	17.4%
Secondary Transition	79	13.3%	110	15.4%
Paraprofessional Training	78	13.1%	118	16.6%
Family Involvement	75	12.6%	113	15.9%
Teaming and Collaboration	73	12.3%	106	14.9%
English Language Learners (ELL)/Limited-English Proficient (LEP)	70	11.8%	113	15.9%
Conflict Management	66	11.1%	134	18.8%
Idaho State Standards	59	9.9%	78	11.0%
No Child Left Behind Act (NCLB)	58	9.8%	72	10.1%
Idaho Standards Achievement Test (ISAT)	54	9.1%	84	11.8%
Early Childhood/Preschool Education	49	8.2%	72	10.1%
Technology Use in the Classroom	46	7.7%	62	8.7%
Individuals with Disabilities Education Act (IDEA)	44	7.4%	51	7.2%
Recruitment/Retention of Teachers	40	6.7%	46	6.5%
Speech & Language Pathology (SLP)	38	6.4%	70	9.8%
Early Literacy	29	4.9%	72	10.1%
Total Respondents	594		712	

Future Trainings Needs, Cont.

The table below is a summary of all responses on the following **follow-up** evaluation survey question regarding **face-to-face** trainings and **webinar** trainings combined.

Question: Rate your current need for training in providing the following to students with disabilities.

Scientifically-based curricula/interventions in reading/language arts.				
Not Needed (I do not use this or am currently satisfactorily trained.)	Somewhat Needed (I need some additional training.)	Adequate (I frequently use this and current training is adequate.)	Urgently Needed (Currently this is not being done well because training is unavailable/inadequate.)	Response Total
19.7% (152)	31.6% (244)	31.0% (239)	17.7% (137)	772

Scientifically-based curricula/interventions in math.				
Not Needed (I do not use this or am currently satisfactorily trained.)	Somewhat Needed (I need some additional training.)	Adequate (I frequently use this and current training is adequate.)	Urgently Needed (Currently this is not being done well because training is unavailable/inadequate.)	Response Total
20.9% (161)	32.6% (252)	19.4% (150)	27.1% (209)	772

Scientifically-based curricula/interventions in positive behavioral supports.				
Not Needed (I do not use this or am currently satisfactorily trained.)	Somewhat Needed (I need some additional training.)	Adequate (I frequently use this and current training is adequate.)	Urgently Needed (Currently this is not being done well because training is unavailable/inadequate.)	Response Total
11.3% (87)	37.7% (291)	22.9% (177)	28.1% (217)	772

Post Evaluation Summary – Annual Report 2006

Training Title: Idaho Special Education Electronic Forms

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	49
Number of Invalid Email Addresses:	8
Total Number of Emails Sent:	41

Total Number of Survey Responses:	37
Response Rate:	90.2%

Are you a: (Frequency of responses.)

_____	Parent of a child with disability	_____	1	Title 1 teacher
_____	Other relative	_____	17	School administrator
_____	Surrogate parent	_____		Family service provider
_____	Foster parent	_____		Medical/health professional
_____	Advocate	_____	7	Related service personnel
_____	9	_____	1	Paraprofessional
_____	2	_____		Other/None of the above

Averages of all responses.	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The training objectives were clear .			4.49		
2. The training objectives were met .			4.35		
3. The presenter was knowledgeable about the topic.			4.78		
4. The training will enable me to include parents in the educational process of their children.			3.51		
5. Overall, this training will positively influence my professional and/or personal practices.			4.24		
	None (1)	Basic (2)	Good (3)	Sound (4)	Expert (5)
6. My level of knowledge/skill on this topic before this training was:			3.03		
7. My level of knowledge/skill on this topic after this training is:			3.78		

8. **The following conditions would have improved or increased the effectiveness of this training:** (Frequency of responses.)

- _____ 1 **Increase pace** of training (e.g., fewer breaks, shorter session, stay on task, reduce repetition)
- _____ 5 Allow **more time** for training (e.g., more time on certain topics, cover less material, make training longer, add additional sessions)
- _____ 6 Include or provide more **specific examples**, samples, and/or real-life scenarios
- _____ 1 Include or provide more **opportunities to share/network** with others (e.g., small group activities, breakout sessions)
- _____ 6 Include or provide more **application/interactive opportunities** (e.g., hands-on activities, role playing, case studies, video demonstrations)
- _____ 2 Improve **organization/quality of training materials**/handouts/manuals
- _____ Improve **organization/quality of overheads/PowerPoint slides**
- _____ Include or provide **more resources/references**
- _____ 5 Have **other colleagues/staff/team members attend** the training
- _____ Have **administration attend** the training
- _____ 2 Provide experienced **coaches/mentors** to support implementation after training
- _____ 2 Prepare attendees as to **what to bring to the training**
- _____ 1 Improve **physical environment/food/sound**

9. **Additional comments:** (Frequency of responses in parentheses.)

- General positive, appreciative comments about the training and trainer (7)
- Experienced difficulty using program due to computer specifications (3)
- Request for step-by-step pre-written guide/manual to the program (2)
- Suggestion to have assistants to circulate the room to answer questions and guide participants (2)
- Suggestion to build in application exercises (1)
- Program was easy to install and use (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: Idaho Special Education Electronic Forms **Reporting Period:** April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	47
Number of Invalid Email Addresses:	7
Total Number of Emails Sent:	40

Total Number of Survey Responses:	23
Response Rate:	57.5%

Select the category you represent: *(Frequency of responses.)*

- 13 Educator
- 6 School administrator
- 1 Paraprofessional
- Agency
- Parent
- 3 Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	22	95.7%
No	1	4.3%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	18	78.3%
No	5	21.7%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	16	69.6%
No	7	30.4%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices (select all that apply): *(Frequency of responses.)*

- 14 **Opportunity/time to apply** and/or practice the new skill
- 4 **Planning time** for integrating the new skill into daily practices
- 3 **Support from** school and/or district **administration**
- 1 **Support from** Individualized Education Program (**IEP**) team
- 5 **Opportunity/time to collaborate** and share ideas with others
- 2 **Further training**, follow-up, and/or ongoing support
- 3 **Other staff/colleagues attending** this training
- 1 **Additional funding**/financial resources

5. Additional comments: *(Frequency of responses in parentheses.)*

<ul style="list-style-type: none"> • General appreciation for resources/information gained (2) • Positive comment about presenter (knowledgeable, helpful) (1) • Suggestion to have assistants at training to circulate around the room (1) • Need power standards (1)
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Post Evaluation Summary – Annual Report 2006

Training Title: Interim Idaho Special Education Manual

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	847
Number of Invalid Email Addresses:	122
Total Number of Emails Sent:	725

Total Number of Survey Responses:	364
Response Rate:	50.2%

Are you a: *(Frequency of responses.)*

<u>5</u> Parent of a child with disability	<u>4</u> Title 1 teacher
<u> </u> Other relative	<u>73</u> School administrator
<u> </u> Surrogate parent	<u>2</u> Family service provider
<u> </u> Foster parent	<u> </u> Medical/health professional
<u>5</u> Advocate	<u>93</u> Related service personnel
<u>155</u> Special educator	<u>2</u> Paraprofessional
<u>25</u> General educator	<u> </u> Other/None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The training objectives were clear .			4.08		
2. The training objectives were met .			3.95		
3. The presenter was knowledgeable about the topic.			4.06		
4. The training will enable me to include parents in the educational process of their children.			3.67		
5. Overall, this training will positively influence my professional and/or personal practices.			3.83		
	None (1)	Basic (2)	Good (3)	Sound (4)	Expert (5)
6. My level of knowledge/skill on this topic before this training was:			3.28		
7. My level of knowledge/skill on this topic after this training is:			3.69		

8. **The following conditions would have improved or increased the effectiveness of this training:** *(Frequency of responses.)*

- 36 **Increase pace** of training (e.g., fewer breaks, shorter session, stay on task, reduce repetition)
- 90 Allow **more time** for training (e.g., more time on certain topics, cover less material, make training longer, add additional sessions)
- 141 Include or provide more **specific examples**, samples, and/or real-life scenarios
- 62 Include or provide more **opportunities to share/network** with others (e.g., small group activities, breakout sessions)
- 29 Include or provide more **application/interactive opportunities** (e.g., hands-on activities, role playing, case studies, video demonstrations)
- 48 Improve **organization/quality of training materials**/handouts/manuals
- 44 Improve **organization/quality of overheads/PowerPoint slides**
- 27 Include or provide **more resources/references**
- 67 Have **other colleagues/staff/team members attend** the training
- 74 Have **administration attend** the training
- 48 Provide experienced **coaches/mentors** to support implementation after training
- 29 Prepare attendees as to **what to bring to the training**
- 36 Improve **physical environment/food/sound**

Interim Idaho Special Education Manual, Cont.

9. Additional comments: *(Frequency of responses in parentheses.)*

- General positive, appreciative comments about training (20)
- Some presenters were well-prepared and/or organized (10)
- Some presenters were not well-prepared and/or organized (7)
- Difficult to follow at times due to order of slides, need to highlight changes (7)
- Suggestion to already have highlighted (underline, italic, bold, etc.) changes in the manual (6)
- Needed more time to cover the material/ask questions (6)
- Inconsistency among presenters styles (5)
- Suggestion to include page numbers on PowerPoint slides (5)
- Need more training on IEPs (writing, standards, research) (5)
- Concerned with paperwork requirement of special education teachers (4)
- Too many people for the size of the room (3)
- Would have appreciated distribution of manual/materials prior to training (3)
- Suggestion to allow questions during presentation (3)
- Inconsistencies/conflicting information in the manual hampered implementation (3)
- General appreciation for handouts/materials/forms (2)
- Liked having questions asked at end, all at once (2)
- Would appreciate training on how best to use materials/forms in the manual (2)
- Suggestion to allow for breakout sessions or smaller groups (2)
- Concerned that 504 part of manual was not addressed (1)
- Suggestion to provide sample IEP using new forms (1)
- Need training on least restrictive environment (1)
- Would be beneficial if regular education teachers attended training (1)
- Suggestion to include school psychologists in the manual revision process (1)
- Concerned with number of participants needed to sign-off on IEP (1)
- Suggestion to provide graphic/checklist of IEP changes (1)
- Suggestion to provide follow-up training on the manual (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: Interim Idaho Special Education Manual

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	833
Number of Invalid Email Addresses:	137
Total Number of Emails Sent:	696

Total Number of Survey Responses:	347
Response Rate:	49.9%

Select the category you represent: *(Frequency of responses.)*

<u>236</u>	Educator
<u>57</u>	School administrator
<u>5</u>	Paraprofessional
<u>6</u>	Agency
<u>6</u>	Parent
<u>37</u>	Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	326	93.9%
No	21	6.1%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	319	91.9%
No	28	8.1%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	270	77.8%
No	77	22.2%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices *(select all that apply): (Frequency of responses.)*

<u>204</u>	Opportunity/time to apply and/or practice the new skill
<u>126</u>	Planning time for integrating the new skill into daily practices
<u>106</u>	Support from school and/or district administration
<u>65</u>	Support from Individualized Education Program (IEP) team
<u>143</u>	Opportunity/time to collaborate and share ideas with others
<u>132</u>	Further training , follow-up, and/or ongoing support
<u>69</u>	Other staff/colleagues attending this training
<u>46</u>	Additional funding /financial resources

Interim Idaho Special Education Manual, Cont.

5. **Additional comments:** (Frequency of responses in parentheses.)

- General positive, appreciative comments about training (9)
- Confusing/frustrating/left with more questions than answers (5)
- Concerned with having enough time and staff to implement (4)
- Need training on how best to use materials/forms in manual (3)
- Concerned that district hasn't received copies of manual (3)
- Concerned school districts not providing substitutes and therefore teachers are not being trained (2)
- Need follow-up training/support in RBM (2)
- Concerned parents are not being included in the process (1)
- Suggestion to include page numbers on PowerPoint slides (1)
- Would like opportunity to network with other early childhood special educators (1)
- Suggestion to integrate and align different state initiatives (1)
- Need general educators trained in IDEA (1)
- Need additional funding to allow for paraeducators to assist in the classroom (1)
- Too much information in a short time (1)
- Need more time to collaborate and plan in order to implement (1)
- Need database management system for IEP process (1)
- Need more training on/for:
 - Transition planning (1)
 - Follow-up on manual (1)
 - Excent Terra (1)
 - Paraprofessionals (1)
 - Reading (1)
 - Research-based interventions in math (1)
 - Idaho Early Learning Standards (1)
 - Research-based interventions (in general) (1)
 - Retention of teachers (1)

Post Evaluation Summary – Annual Report 2006

Training Title: POSSE

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	34
Number of Invalid Email Addresses:	4
Total Number of Emails Sent:	30

Total Number of Survey Responses:	17
Response Rate:	56.7%

Are you a: *(Frequency of responses.)*

_____	Parent of a child with disability	_____	Title 1 teacher
_____	Other relative	<u>2</u>	School administrator
_____	Surrogate parent	_____	Family service provider
_____	Foster parent	_____	Medical/health professional
_____	Advocate	<u>2</u>	Related service personnel
<u>7</u>	Special educator	<u>4</u>	Paraprofessional
<u>1</u>	General educator	_____	Other/None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The training objectives were clear .			3.82		
2. The training objectives were met .			3.88		
3. The presenter was knowledgeable about the topic.			4.35		
4. The training will enable me to include parents in the educational process of their children.			3.65		
5. Overall, this training will positively influence my professional and/or personal practices.			4.06		
	None (1)	Basic (2)	Good (3)	Sound (4)	Expert (5)
6. My level of knowledge/skill on this topic before this training was:			2.35		
7. My level of knowledge/skill on this topic after this training is:			3.47		

8. **The following conditions would have improved or increased the effectiveness of this training:** *(Frequency of responses.)*

- 4 **Increase pace** of training (e.g., fewer breaks, shorter session, stay on task, reduce repetition)
- 2 Allow **more time** for training (e.g., more time on certain topics, cover less material, make training longer, add additional sessions)
- 1 Include or provide more **specific examples**, samples, and/or real-life scenarios
- 2 Include or provide more **opportunities to share/network** with others (e.g., small group activities, breakout sessions)
- 3 Include or provide more **application/interactive opportunities** (e.g., hands-on activities, role playing, case studies, video demonstrations)
- 2 Improve **organization/quality of training materials**/handouts/manuals
- _____ Improve **organization/quality of overheads/PowerPoint slides**
- _____ Include or provide **more resources/references**
- 7 Have **other colleagues/staff/team members attend** the training
- 1 Have **administration attend** the training
- 2 Provide experienced **coaches/mentors** to support implementation after training
- 6 Prepare attendees as to **what to bring to the training**
- 1 Improve **physical environment/food/sound**

9. **Additional comments:** *(Frequency of responses in parentheses.)*

<ul style="list-style-type: none"> • General positive, appreciative comments about training (2) • Suggestion to put POSSE program on Internet for download (1) • Request for follow-up training after time to implement (1) • Need more training in RBM (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: POSSE

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	34
Number of Invalid Email Addresses:	3
Total Number of Emails Sent:	31

Total Number of Survey Responses:	18
Response Rate:	58.1%

Select the category you represent: *(Frequency of responses.)*

- 11 Educator
- 2 School administrator
- 4 Paraprofessional
- Agency
- Parent
- 1 Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	17	94.4%
No	1	5.6%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	7	38.9%
No	11	61.1%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	10	55.6%
No	8	44.4%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices *(select all that apply): (Frequency of responses.)*

- 14 **Opportunity/time to apply** and/or practice the new skill
- 7 **Planning time** for integrating the new skill into daily practices
- 6 **Support from** school and/or district **administration**
- 1 **Support from** Individualized Education Program (**IEP**) team
- 9 **Opportunity/time to collaborate** and share ideas with others
- 9 **Further training**, follow-up, and/or ongoing support
- 2 **Other staff/colleagues attending** this training
- 5 **Additional funding**/financial resources

5. **Additional comments:** *(Frequency of responses in parentheses.)*

- Need more training options/dates in RBM (2)
- Suggestion to include information re: costs and technical requirements (1)
- Suggestion re: RBM process needing additional funding to allow for assistants in the classroom (1)
- Need more training in DIBELS and POSSE (1)

Post Evaluation Summary – Annual Report 2006

Training Title: Results Based Model: Advanced

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	201
Number of Invalid Email Addresses:	24
Total Number of Emails Sent:	174

Total Number of Survey Responses:	91
Response Rate:	51.4%

Are you a: *(Frequency of responses.)*

_____ Parent of a child with disability	9	Title 1 teacher
_____ Other relative	17	School administrator
_____ Surrogate parent		Family service provider
_____ Foster parent		Medical/health professional
_____ Advocate	23	Related service personnel
18 Special educator	5	Paraprofessional
18 General educator	1	Other/None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The training objectives were clear .			4.02		
2. The training objectives were met .			3.96		
3. The presenter was knowledgeable about the topic.			4.32		
4. The training will enable me to include parents in the educational process of their children.			3.75		
5. Overall, this training will positively influence my professional and/or personal practices.			4.16		
	None (1)	Basic (2)	Good (3)	Sound (4)	Expert (5)
6. My level of knowledge/skill on this topic before this training was:			2.97		
7. My level of knowledge/skill on this topic after this training is:			3.64		

8. The following conditions would have improved or increased the effectiveness of this training: *(Frequency of responses.)*

- _____ 9 **Increase pace** of training (e.g., fewer breaks, shorter session, stay on task, reduce repetition)
- 17 Allow **more time** for training (e.g., more time on certain topics, cover less material, make training longer, add additional sessions)
- 30 Include or provide more **specific examples**, samples, and/or real-life scenarios
- 25 Include or provide more **opportunities to share/network** with others (e.g., small group activities, breakout sessions)
- 17 Include or provide more **application/interactive opportunities** (e.g., hands-on activities, role playing, case studies, video demonstrations)
- 13 Improve **organization/quality of training materials**/handouts/manuals
- 7 Improve **organization/quality of overheads/PowerPoint slides**
- 25 Include or provide **more resources/references**
- 29 Have **other colleagues/staff/team members attend** the training
- 20 Have **administration attend** the training
- 29 Provide experienced **coaches/mentors** to support implementation after training
- _____ Prepare attendees as to **what to bring to the training**
- 3 Improve **physical environment/food/sound**

Results Based Model: Advanced, Cont.

9. Additional comments: *(Frequency of responses in parentheses.)*

- General positive, appreciative comments about training (9)
- Content was repetitive of CORE training (6)
- Suggestion to provide more specific intervention ideas (4)
- Would like more information specific to and time to meet with SLPs (3)
- Training was problematic due to fill-in or no-show presenters (3)
- Suggestion to provide coach/mentor to observe/assist school teams (2)
- Suggestion to draft a parallel process for OT and other related service personnel (2)
- Suggestion to provide more time during training to practice (1)
- Appreciated the breakout session format (1)
- Appreciated of more user-friendly forms (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: Results Based Model: Advanced

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	200
Number of Invalid Email Addresses:	20
Total Number of Emails Sent:	180

Total Number of Survey Responses:	75
Response Rate:	41.7%

Select the category you represent: *(Frequency of responses.)*

- 47 Educator
- 13 School administrator
- 7 Paraprofessional
- Agency
- Parent
- 8 Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	69	92.0%
No	6	8.0%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	63	84.0%
No	12	16.0%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	59	78.7%
No	16	21.3%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices *(select all that apply): (Frequency of responses.)*

- 45 **Opportunity/time to apply** and/or practice the new skill
- 37 **Planning time** for integrating the new skill into daily practices
- 25 **Support from school and/or district administration**
- 11 **Support from Individualized Education Program (IEP) team**
- 47 **Opportunity/time to collaborate** and share ideas with others
- 29 **Further training**, follow-up, and/or ongoing support
- 29 **Other staff/colleagues attending** this training
- 22 **Additional funding/financial resources**

5. **Additional comments:** *(Frequency of responses in parentheses.)*

- General positive, appreciative comments about training and/or presenter (4)
- Material was repetitive of CORE training (3)
- Suggestion re: RBM process needing additional funding to allow for assistants in the classroom (2)
- Need training on IEP forms and forms from new manual (1)
- Need RBM training specific to SLPs (1)
- Concern re: lack of administrative support on discipline issues (1)
- Need more training in positive behavior supports (1)
- Suggestion to streamline, organize manual (1)

Post Evaluation Summary – Annual Report 2006

Training Title: Self-Assessment/Monitoring **Reporting Period:** April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	81
Number of Invalid Email Addresses:	15
Total Number of Emails Sent:	66

Total Number of Survey Responses:	39
Response Rate:	59.1%

Are you a: *(Frequency of responses.)*

<table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">1</td><td>Parent of a child with disability</td></tr> <tr><td style="text-align: center;">_____</td><td>Other relative</td></tr> <tr><td style="text-align: center;">_____</td><td>Surrogate parent</td></tr> <tr><td style="text-align: center;">_____</td><td>Foster parent</td></tr> <tr><td style="text-align: center;">_____</td><td>Advocate</td></tr> <tr><td style="text-align: center;">13</td><td>Special educator</td></tr> <tr><td style="text-align: center;">2</td><td>General educator</td></tr> </table>	1	Parent of a child with disability	_____	Other relative	_____	Surrogate parent	_____	Foster parent	_____	Advocate	13	Special educator	2	General educator	<table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px; text-align: center;">_____</td><td>Title 1 teacher</td></tr> <tr><td style="text-align: center;">12</td><td>School administrator</td></tr> <tr><td style="text-align: center;">_____</td><td>Family service provider</td></tr> <tr><td style="text-align: center;">_____</td><td>Medical/health professional</td></tr> <tr><td style="text-align: center;">10</td><td>Related service personnel</td></tr> <tr><td style="text-align: center;">1</td><td>Paraprofessional</td></tr> <tr><td style="text-align: center;">_____</td><td>Other/None of the above</td></tr> </table>	_____	Title 1 teacher	12	School administrator	_____	Family service provider	_____	Medical/health professional	10	Related service personnel	1	Paraprofessional	_____	Other/None of the above
1	Parent of a child with disability																												
_____	Other relative																												
_____	Surrogate parent																												
_____	Foster parent																												
_____	Advocate																												
13	Special educator																												
2	General educator																												
_____	Title 1 teacher																												
12	School administrator																												
_____	Family service provider																												
_____	Medical/health professional																												
10	Related service personnel																												
1	Paraprofessional																												
_____	Other/None of the above																												

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The training objectives were clear .			3.87		
2. The training objectives were met .			3.67		
3. The presenter was knowledgeable about the topic.			3.90		
4. The training will enable me to include parents in the educational process of their children.			3.54		
5. Overall, this training will positively influence my professional and/or personal practices.			3.64		
	None (1)	Basic (2)	Good (3)	Sound (4)	Expert (5)
6. My level of knowledge/skill on this topic before this training was:			2.74		
7. My level of knowledge/skill on this topic after this training is:			3.31		

8. The following conditions would have improved or increased the effectiveness of this training: *(Frequency of responses.)*

- 2 **Increase pace** of training (e.g., fewer breaks, shorter session, stay on task, reduce repetition)
- 8 Allow **more time** for training (e.g., more time on certain topics, cover less material, make training longer, add additional sessions)
- 7 Include or provide more **specific examples**, samples, and/or real-life scenarios
- 7 Include or provide more **opportunities to share/network** with others (e.g., small group activities, breakout sessions)
- 6 Include or provide more **application/interactive opportunities** (e.g., hands-on activities, role playing, case studies, video demonstrations)
- 11 Improve **organization/quality of training materials**/handouts/manuals
- 2 Improve **organization/quality of overheads/PowerPoint slides**
- 3 Include or provide **more resources/references**
- 4 Have **other colleagues/staff/team members attend** the training
- 2 Have **administration attend** the training
- 2 Provide experienced **coaches/mentors** to support implementation after training
- 5 Prepare attendees as to **what to bring to the training**
- 4 Improve **physical environment/food/sound**

9. Additional comments: *(Frequency of responses in parentheses.)*

- General positive, appreciate comments about training (4)
- Suggestion to provide time during training to complete paperwork (1)
- Process hampered by not having current/all data at the training (1)
- Suggestion to have assistants to circulate and answer questions among teams present (1)
- Need more time for school team to work together on this information (1)
- Room arrangement made it difficult to hear (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: Self-Assessment/Monitoring

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	81
Number of Invalid Email Addresses:	15
Total Number of Emails Sent:	66

Total Number of Survey Responses:	27
Response Rate:	40.9%

Select the category you represent: *(Frequency of responses.)*

- 13 Educator
- 12 School administrator
- Paraprofessional
- Agency
- Parent
- 2 Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	25	92.6%
No	2	7.4%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	24	88.9%
No	3	11.1%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	19	70.4%
No	8	29.6%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices *(select all that apply): (Frequency of responses.)*

- 19 **Opportunity/time to apply** and/or practice the new skill
- 11 **Planning time** for integrating the new skill into daily practices
- 9 **Support from school and/or district administration**
- 5 **Support from Individualized Education Program (IEP) team**
- 12 **Opportunity/time to collaborate** and share ideas with others
- 10 **Further training**, follow-up, and/or ongoing support
- 3 **Other staff/colleagues attending** this training
- 5 **Additional funding/financial resources**

5. **Additional comments:** *(Frequency of responses in parentheses.)*

- Timing of training was not conducive to full attendance (1)

Post Evaluation Summary – Annual Report 2006

Training Title: Strength-Based Intervention Plans

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	148
Number of Invalid Email Addresses:	42
Total Number of Emails Sent:	106

Total Number of Survey Responses:	58
Response Rate:	54.7%

Are you a: *(Frequency of responses.)*

_____	Parent of a child with disability	1	Title 1 teacher
_____	Other relative	6	School administrator
_____	Surrogate parent	_____	Family service provider
_____	Foster parent	_____	Medical/health professional
_____	Advocate	12	Related service personnel
_____ 16	Special educator	6	Paraprofessional
_____ 13	General educator	4	Other/None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The training objectives were clear .			4.24		
2. The training objectives were met .			4.12		
3. The presenter was knowledgeable about the topic.			4.55		
4. The training will enable me to include parents in the educational process of their children.			4.02		
5. Overall, this training will positively influence my professional and/or personal practices.			4.28		
	None (1)	Basic (2)	Good (3)	Sound (4)	Expert (5)
6. My level of knowledge/skill on this topic before this training was:			2.97		
7. My level of knowledge/skill on this topic after this training is:			3.84		

8. **The following conditions would have improved or increased the effectiveness of this training:** *(Frequency of responses.)*

_____ 9	Increase pace of training (e.g., fewer breaks, shorter session, stay on task, reduce repetition)
_____ 16	Allow more time for training (e.g., more time on certain topics, cover less material, make training longer, add additional sessions)
_____ 11	Include or provide more specific examples , samples, and/or real-life scenarios
_____ 12	Include or provide more opportunities to share/network with others (e.g., small group activities, breakout sessions)
_____ 12	Include or provide more application/interactive opportunities (e.g., hands-on activities, role playing, case studies, video demonstrations)
_____ 4	Improve organization/quality of training materials /handouts/manuals
_____ 3	Improve organization/quality of overheads/PowerPoint slides
_____ 8	Include or provide more resources/references
_____ 29	Have other colleagues/staff/team members attend the training
_____ 26	Have administration attend the training
_____ 13	Provide experienced coaches/mentors to support implementation after training
_____	Prepare attendees as to what to bring to the training
_____ 2	Improve physical environment/food/sound

Strength-Based Intervention Plans, Cont.

9. Additional comments: *(Frequency of responses in parentheses.)*

- General positive, appreciative comments about training and/or trainer (17)
- Suggestion to include examples/information for secondary schools (3)
- Concern with style/manner of presenter (3)
- Have already applied/implemented material (1)
- Need training on occupational therapy (1)
- Suggestion to provide college credit for attendance (1)
- Suggestion to include list of acronyms and meanings (1)
- Suggestion to allow participants to share success stories (1)
- Content did not warrant two-day training (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: Strength-Based Intervention Plans

Reporting Period: April 1, 2005 – March 31, 2006

Number of Participant Email Addresses:	148
Number of Invalid Email Addresses:	42
Total Number of Emails Sent:	106

Total Number of Survey Responses:	56
Response Rate:	52.8%

Select the category you represent: *(Frequency of responses.)*

- 37 Educator
- 5 School administrator
- 6 Paraprofessional
- Agency
- Parent
- 8 Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	53	94.6%
No	3	5.4%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	49	87.5%
No	7	12.5%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	47	83.9%
No	9	16.1%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices *(select all that apply): (Frequency of responses.)*

- 23 **Opportunity/time to apply** and/or practice the new skill
- 23 **Planning time** for integrating the new skill into daily practices
- 15 **Support from** school and/or district **administration**
- 6 **Support from** Individualized Education Program (**IEP**) **team**
- 31 **Opportunity/time to collaborate** and share ideas with others
- 18 **Further training**, follow-up, and/or ongoing support
- 18 **Other staff/colleagues attending** this training
- 4 **Additional funding**/financial resources

5. **Additional comments:** *(Frequency of responses in parentheses.)*

- General positive, appreciate comments about training (4)
- Have already applied/implemented material (2)
- Need more training on PBS/challenging behaviors (2)
- Suggestion to focus more on strategies that can be readily incorporated into the classroom (1)
- Suggestion for standards and definition expansion re: occupational therapists (1)
- Need more time to collaborate and plan in order to implement (1)

Post Evaluation Summary – Annual Report 2006

Training Title: Webinar: Administration of the 2006 Idaho Alternate Assessment for First-Timers **Training Date:** February 28, 2006

Number of Participant Email Addresses:	33
Number of Invalid Email Addresses:	2
Total Number of Emails Sent:	31

Total Number of Survey Responses:	12
Response Rate:	38.7%

Indicate your current position: *(Frequency of responses.)*

- 7 Special education teacher
- General education teacher
- 4 Administrator
- 1 Support personnel (e.g., occupational therapist)
- Other/None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The instructions for participating in the webinar were clear .			3.42		
2. Handouts for the webinar were easily downloaded from the email attachment.			4.25		
3. The length of the webinar was adequate .			3.83		
4. There was enough time designated for questions .			4.08		
5. The presenter was well prepared .			4.58		
6. The content of the presentation was relevant to my needs .			4.50		
7. The media examples and handouts were clear and useful .			4.27		
8. I gained new knowledge .			4.33		
9. I learned enough to implement new strategies with my students.			3.75		
10. The training reinforced or refined my present skills .			3.92		
11. I feel confident that I have the knowledge to share this information with others .			4.00		

12. **Additional comments:** *(Frequency of responses in parentheses.)*

- Positive comment about webinar format of delivering information/training (1)
- Suggestion to include time/opportunity for participants to access the IAA system on the Internet (1)
- Suggestion to send reminder with time and date of webinar (1)
- Time of webinar (after school) conflicts with other commitments (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: Webinar: Administration of the 2006 Idaho Alternate Assessment for First-Timers **Training Date:** February 28, 2006

Number of Participant Email Addresses:	33
Number of Invalid Email Addresses:	3
Total Number of Emails Sent:	30

Total Number of Survey Responses:	15
Response Rate:	50.0%

Select the category you represent: *(Frequency of responses.)*

- 8 Educator
- 6 School/district administrator
- Paraprofessional
- 1 Support personnel
- Agency
- Parent
- Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	13	86.7%
No	2	13.3%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	13	86.7%
No	2	13.3%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	14	93.3%
No	1	6.7%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices (select all that apply): *(Frequency of responses.)*

- 13 **Opportunity/time to apply** and/or practice the new skill
- 8 **Planning time** for integrating the new skill into daily practices
- 2 **Support from school and/or district administration**
- Support from Individualized Education Program (IEP) team**
- 6 **Opportunity/time to collaborate** and share ideas with others
- 4 **Further training**, follow-up, and/or ongoing support
- Other staff/colleagues attending** this training
- 2 **Additional funding/financial resources**

5. Additional comments: *(Frequency of responses in parentheses.)*

<ul style="list-style-type: none"> • Suggestion to provide/allow access to actual test during webinar training (1) • Need training on eligibility for developmental delays (1)
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Post Evaluation Summary – Annual Report 2006

Training Title: Webinar: 2006 Idaho Alternate Assessment Updates – What's New and Old **Training Date:** March 8, 2006

Number of Participant Email Addresses:	55
Number of Invalid Email Addresses:	8
Total Number of Emails Sent:	47

Total Number of Survey Responses:	29
Response Rate:	61.7%

Indicate your current position: *(Frequency of responses.)*

<u>19</u>	Special education teacher
<u> </u>	General education teacher
<u>6</u>	Administrator
<u>2</u>	Support personnel (e.g., occupational therapist)
<u>2</u>	Other/None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The instructions for participating in the webinar were clear .			4.14		
2. Handouts for the webinar were easily downloaded from the email attachment.			4.10		
3. The length of the webinar was adequate .			3.66		
4. There was enough time designated for questions .			3.86		
5. The presenter was well prepared .			4.38		
6. The content of the presentation was relevant to my needs .			4.31		
7. The media examples and handouts were clear and useful .			3.93		
8. I gained new knowledge .			3.97		
9. I learned enough to implement new strategies with my students.			3.76		
10. The training reinforced or refined my present skills .			3.93		
11. I feel confident that I have the knowledge to share this information with others .			4.10		

12. **Additional comments:** *(Frequency of responses in parentheses.)*

<ul style="list-style-type: none"> • Concern about time needed and ability (due to schools' firewalls) to access needed technology pre-requirements (4) • General positive, appreciative comments about the training (3) • Positive comments about webinar format of delivering information/training (3) • Suggestion to have handouts consistent with presentation slides (2) • Experienced difficulty with RealPlayer requirement for webinar (2) • Not enough new information for 2-hour session (2) • Suggestion to develop step-by-step instructions for non-savvy Internet users (1) • Process hampered by participants not muting phones (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: Webinar: 2006 Idaho Alternate Assessment Updates – What’s New and Old

Training Date: March 8, 2006

Number of Participant Email Addresses:	55
Number of Invalid Email Addresses:	8
Total Number of Emails Sent:	47

Total Number of Survey Responses:	24
Response Rate:	51.1%

Select the category you represent: *(Frequency of responses.)*

- 17 Educator
- 2 School/district administrator
- Paraprofessional
- 1 Support personnel
- Agency
- Parent
- 4 Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	21	87.5%
No	3	12.5%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	17	70.8%
No	7	29.2%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	15	62.5%
No	9	37.5%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices (select all that apply): *(Frequency of responses.)*

- 19 **Opportunity/time to apply** and/or practice the new skill
- 10 **Planning time** for integrating the new skill into daily practices
- 5 **Support from** school and/or district **administration**
- 1 **Support from** Individualized Education Program (**IEP**) **team**
- 9 **Opportunity/time to collaborate** and share ideas with others
- 7 **Further training**, follow-up, and/or ongoing support
- 2 **Other staff/colleagues attending** this training
- 2 **Additional funding/financial resources**

5. Additional comments: *(Frequency of responses in parentheses.)*

- General positive, appreciate comments about training (2)
- Suggestion to provide webinar information at a level paraeducators could understand (1)
- Need paraprofessionals trained in PBS (1)
- Suggestion to reinstate cap for self-contained classes (1)
- Concern about amount of paperwork required of special education teachers (1)
- Content was repetitive of first IAA webinar (1)

Post Evaluation Summary – Annual Report 2006

Training Title: Webinar: Inclusive Education – Lessons Learned **Training Date:** February 9, 2006

Number of Participant Email Addresses:	61
Number of Invalid Email Addresses:	6
Total Number of Emails Sent:	55

Total Number of Survey Responses:	12
Response Rate:	21.8%

Indicate your current position: *(Frequency of responses.)*

- 5 Special education teacher
- 1 General education teacher
- 1 Administrator
- 2 Support personnel (e.g., occupational therapist)
- 3 Other/None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The instructions for participating in the webinar were clear .			4.17		
2. Handouts for the webinar were easily downloaded from the email attachment.			4.33		
3. The length of the webinar was adequate .			4.00		
4. There was enough time designated for questions .			3.92		
5. The presenter was well prepared .			4.17		
6. The content of the presentation was relevant to my needs .			3.75		
7. The media examples and handouts were clear and useful .			3.50		
8. I gained new knowledge .			3.67		
9. I learned enough to implement new strategies with my students.			3.33		
10. The training reinforced or refined my present skills .			3.58		
11. I feel confident that I have the knowledge to share this information with others .			3.50		

12. **Additional comments:** *(Frequency of responses in parentheses.)*

- Experienced technical difficulties that hampered viewing/learning (3)
- General positive comments about trainer and information provided (2)
- Positive comment about webinar format of delivering information/training (1)
- Information not relevant to the reality of self-contained classrooms (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: Webinar: Inclusive Education – Lessons Learned **Training Date:** February 9, 2006

Number of Participant Email Addresses:	60
Number of Invalid Email Addresses:	6
Total Number of Emails Sent:	54

Total Number of Survey Responses:	10
Response Rate:	18.5%

Select the category you represent: *(Frequency of responses.)*

- 7 Educator
- School/district administrator
- 1 Paraprofessional
- Support personnel
- Agency
- Parent
- 2 Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	8	80.0%
No	2	20.0%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	6	60.0%
No	4	40.0%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	7	70.0%
No	3	30.0%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices (select all that apply): *(Frequency of responses.)*

- 5 **Opportunity/time to apply** and/or practice the new skill
- 4 **Planning time** for integrating the new skill into daily practices
- 5 **Support from** school and/or district **administration**
- 3 **Support from** Individualized Education Program (**IEP**) **team**
- 4 **Opportunity/time to collaborate** and share ideas with others
- 5 **Further training**, follow-up, and/or ongoing support
- 1 **Other staff/colleagues attending** this training
- 1 **Additional funding**/financial resources

5. Additional comments: *(Frequency of responses in parentheses.)*

<ul style="list-style-type: none"> • Experienced technical difficulties that hampered viewing/learning (1) • Appreciative of the information provided (1) • Information not relevant to the reality of self-contained classrooms (1)

Post Evaluation Summary – Annual Report 2006

Training Title: Webinar: Strategies for Monitoring Progress **Training Date:** December 8, 2005

Number of Participant Email Addresses:	46
Number of Invalid Email Addresses:	11
Total Number of Emails Sent:	35

Total Number of Survey Responses:	21
Response Rate:	60.0%

Indicate your current position: *(Frequency of responses.)*

- 5 Special education teacher
- General education teacher
- 4 Administrator
- 2 Support personnel (e.g., occupational therapist)
- 10 Other/None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The instructions for participating in the webinar were clear .			4.33		
2. Handouts for the webinar were easily downloaded from the email attachment.			4.62		
3. The length of the webinar was adequate .			4.14		
4. There was enough time designated for questions .			4.24		
5. The presenter was well prepared .			4.25		
6. The content of the presentation was relevant to my needs .			3.70		
7. The media examples and handouts were clear and useful .			3.90		
8. I gained new knowledge .			3.75		
9. I learned enough to implement new strategies with my students.			3.25		
10. The training reinforced or refined my present skills .			3.75		
11. I feel confident that I have the knowledge to share this information with others .			3.25		

12. **Additional comments:** *(Frequency of responses in parentheses.)*

- General appreciation for training/webinar format (5)
- Need more training on data collecting/recording (2)
- Experienced technical difficulties that hampered viewing/learning (1)
- Need training/webinar on IAA (1)

Follow-up Evaluation Summary – Annual Report 2006

Training Title: Webinar: Strategies for Monitoring Progress Training Date: December 8, 2005

Number of Participant Email Addresses:	46
Number of Invalid Email Addresses:	11
Total Number of Emails Sent:	35

Total Number of Survey Responses:	14
Response Rate:	40.0%

Select the category you represent: *(Frequency of responses.)*

- 7 Educator
- 2 School/district administrator
- 2 Paraprofessional
- Support personnel
- 1 Agency
- Parent
- 2 Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	11	78.6%
No	3	21.4%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	7	50.0%
No	7	50.0%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	6	42.9%
No	8	57.1%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices *(select all that apply): (Frequency of responses.)*

- 4 **Opportunity/time to apply** and/or practice the new skill
- 4 **Planning time** for integrating the new skill into daily practices
- 1 **Support from school and/or district administration**
- Support from Individualized Education Program (IEP) team**
- 7 **Opportunity/time to collaborate** and share ideas with others
- 6 **Further training**, follow-up, and/or ongoing support
- 3 **Other staff/colleagues attending** this training
- Additional funding/financial resources**

5. **Additional comments:** *(Frequency of responses in parentheses.)*

<ul style="list-style-type: none"> • General positive comments about webinar format for delivering information/training (2) • Experienced technical difficulties that hampered viewing/learning (1) • Need training on writing goals linked with IAA standards (1) • Need training on writing measurable goals (1) • Need demonstration of data collection models (1)
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Post Evaluation Summary – Annual Report 2006

Training Title: Webinar: Personal and Social Assessment
Options for Transition Planning **Training Date:** March 23, 2006

Number of Participant Email Addresses:	12
Number of Invalid Email Addresses:	1
Total Number of Emails Sent:	11

Total Number of Survey Responses:	5
Response Rate:	45.5%

Indicate your current position: *(Frequency of responses.)*

<u> 3 </u> Educator	<u> </u> Vocational rehabilitation representative
<u> </u> School/district administrator	<u> 1 </u> Community agency representative
<u> </u> School counselor	<u> 1 </u> Parent
<u> </u> Support personnel	<u> </u> Youth
<u> </u> Paraprofessional	<u> </u> None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The instructions for participating in the webinar were clear .			4.20		
2. Handouts for the webinar were easily downloaded from the email attachment.			4.50		
3. The length of the webinar was adequate .			3.40		
4. There was enough time designated for questions .			4.00		
5. The presenter was well prepared .			4.20		
6. The content of the presentation was relevant to my needs .			3.80		
7. The media examples and handouts were clear and useful .			4.00		
8. I gained new knowledge .			3.60		
9. I learned enough to implement new strategies with my students.			3.40		
10. The training reinforced or refined my present skills .			3.80		
11. I feel confident that I have the knowledge to share this information with others .			3.60		

12. **Additional comments:** *(Frequency of responses in parentheses.)*

- General appreciation for training/webinar format (3)

Post Evaluation Summary – Annual Report 2006

Training Title: Webinar: Teaching Literacy Skills to Students with Severe and Multiple Disabilities **Training Date:** October 12, 2005

Number of Participant Email Addresses:	101
Number of Invalid Email Addresses:	8
Total Number of Emails Sent:	93

Total Number of Survey Responses:	37
Response Rate:	39.8%

Indicate your current position: *(Frequency of responses.)*

<u> 21</u>	Special education teacher
<u> 1</u>	General education teacher
<u> 4</u>	Administrator
<u> 5</u>	Support personnel (e.g., occupational therapist)
<u> 6</u>	Other/None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The instructions for participating in the webinar were clear .			3.73		
2. Handouts for the webinar were easily downloaded from the email attachment.			3.97		
3. The length of the webinar was adequate .			3.76		
4. There was enough time designated for questions .			3.68		
5. The presenter was well prepared .			4.16		
6. The content of the presentation was relevant to my needs .			3.84		
7. The media examples and handouts were clear and useful .			3.65		
8. I gained new knowledge .			3.89		
9. I learned enough to implement new strategies with my students.			3.65		
10. The training reinforced or refined my present skills .			3.86		
11. I feel confident that I have the knowledge to share this information with others .			3.65		

12. Additional comments: *(Frequency of responses in parentheses.)*

<ul style="list-style-type: none"> • General positive, appreciative comments about training and/or trainer (4) • Suggestion to provide copies/handouts of examples covered in presentation (3) • General positive comments about webinar format for delivering information/training (2) • Suggestion to include option to view presenter during webinar (2) • Suggestion to provide bibliography/references/resource list in handouts (2) • Suggestion to allow for option of showing video clips (2) • Suggestion to change time so paraprofessionals could attend (1) • Suggestion for more interactive format (e.g., include option for instant messaging, discussion board) (1) • Experienced technical difficulties that hampered viewing/learning (1) • Suggestion to break training into two 1-hour sessions (1)
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Follow-up Evaluation Summary – Annual Report 2006

Training Title: Webinar: Teaching Literacy Skills to Students with Severe and Multiple Disabilities **Training Date:** October 12, 2005

Number of Participant Email Addresses:	98
Number of Invalid Email Addresses:	10
Total Number of Emails Sent:	88

Total Number of Survey Responses:	25
Response Rate:	28.4%

Select the category you represent: *(Frequency of responses.)*

- 19 Educator
- School/district administrator
- 6 Paraprofessional
- Support personnel
- Agency
- Parent
- Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	21	84.0%
No	4	16.0%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	17	68.0%
No	8	32.0%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	17	68.0%
No	8	32.0%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices (select all that apply): *(Frequency of responses.)*

- 16 **Opportunity/time to apply** and/or practice the new skill
- 14 **Planning time** for integrating the new skill into daily practices
- 1 **Support from** school and/or district **administration**
- 1 **Support from** Individualized Education Program (**IEP**) **team**
- 12 **Opportunity/time to collaborate** and share ideas with others
- 8 **Further training**, follow-up, and/or ongoing support
- 1 **Other staff/colleagues attending** this training
- Additional funding/financial resources**

5. Additional comments: *(Frequency of responses in parentheses.)*

<ul style="list-style-type: none"> • General positive comments about webinar format for delivering information/training (2) • Need time to collaborate and plan in order to implement (2) • Suggestion to provide access to webinars at user's convenience (1)

Post Evaluation Summary – Annual Report 2006

Training Title: Webinar: Vocational and Occupational Assessment Options for Transition Planning **Training Date:** February 15, 2006

Number of Participant Email Addresses:	42
Number of Invalid Email Addresses:	5
Total Number of Emails Sent:	37

Total Number of Survey Responses:	12
Response Rate:	32.4%

Indicate your current position: (Frequency of responses.)

<u>10</u> Educator	<u> </u> Vocational rehabilitation representative
<u>1</u> School/district administrator	<u> </u> Community agency representative
<u> </u> School counselor	<u>1</u> Parent
<u> </u> Support personnel	<u> </u> Youth
<u> </u> Paraprofessional	<u> </u> None of the above

<i>Averages of all responses.</i>	Strongly Disagree (1)	Disagree (2)	Neutral (3)	Agree (4)	Strongly Agree (5)
1. The instructions for participating in the webinar were clear .			4.08		
2. Handouts for the webinar were easily downloaded from the email attachment.			3.90		
3. The length of the webinar was adequate .			4.17		
4. There was enough time designated for questions .			4.33		
5. The presenter was well prepared .			4.58		
6. The content of the presentation was relevant to my needs .			4.00		
7. The media examples and handouts were clear and useful .			4.08		
8. I gained new knowledge .			4.08		
9. I learned enough to implement new strategies with my students.			3.50		
10. The training reinforced or refined my present skills .			4.08		
11. I feel confident that I have the knowledge to share this information with others .			3.67		

12. **Additional comments:** (Frequency of responses in parentheses.)

<ul style="list-style-type: none"> • General positive comments about webinar format for delivering information/training (4) • Suggestion to have more interactive and visually stimulating interface during presentation (1)
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Follow-up Evaluation Summary – Annual Report 2006

Training Title: Webinar: Vocational and Occupational Assessment
Options for Transition Planning **Training Date:** February 15, 2006

Number of Participant Email Addresses:	42
Number of Invalid Email Addresses:	3
Total Number of Emails Sent:	39

Total Number of Survey Responses:	9
Response Rate:	23.1%

Select the category you represent: *(Frequency of responses.)*

- 8 Educator
- 1 School/district administrator
- Paraprofessional
- Support personnel
- Agency
- Parent
- Other/None of the above

1. As a result of this training, I learned a new skill or acquired needed information.

Answer	Response Total	Response Percent
Yes	7	77.8%
No	2	22.8%

2. I have had an opportunity to apply what I learned from this training in my professional/personal setting.

Answer	Response Total	Response Percent
Yes	5	55.6%
No	4	44.4%

3. As a result of this training, I have positively changed my professional/personal practices.

Answer	Response Total	Response Percent
Yes	6	66.7%
No	3	33.3%

4. The following conditions are needed for me to incorporate (or further incorporate) the skills/information from this training into my professional/personal practices (select all that apply): *(Frequency of responses.)*

- 7 **Opportunity/time to apply** and/or practice the new skill
- 5 **Planning time** for integrating the new skill into daily practices
- 1 **Support from school and/or district administration**
- Support from Individualized Education Program (IEP) team**
- 3 **Opportunity/time to collaborate** and share ideas with others
- 3 **Further training**, follow-up, and/or ongoing support
- Other staff/colleagues attending** this training
- 2 **Additional funding/financial resources**

5. Additional comments: *(Frequency of responses in parentheses.)*

<ul style="list-style-type: none"> • Need training in writing IEPs in sensible terms (1)
