# Evaluation Template – September 2026

Below is a template of the evaluation attached to all education activities.

Thank you for participating in this educational activity. The survey takes approximately 3 minutes and provides valuable feedback that helps us improve future learning experiences. Your responses will remain confidential, and results are reviewed only in aggregate. We appreciate your time and feedback. Please complete the following questions and then submit after reviewing your responses. All questions are required. Once you have completed this evaluation you will be able to print your CE certificate.

## Demographics

**Participant Demographics: ***

If other participant, please specify:

## Commercial Bias

Do you feel the activity was free from commercial bias or influence? *

If not free of commercial bias, please explain:

## Impact on Practice

Rate the projected impact of this activity on your knowledge, competence, performance, and patient outcomes: *competence is defined as the ability to apply knowledge, skills, and judgment in practice (knowing how to do something)*

This activity increased my knowledge *

If No, explain

This activity increased my competence. *

If No, Explain

This activity will improve my performance. *

If No, explain

This activity will improve my patient outcomes. *

## Application of Team Based Learning

I am better able to apply the knowledge and/or skills to my practice when in a team environment. *

I am better able to collaborate with a multidisciplinary team. *

I am better able to communicate with other members of a multidisciplinary team as a result of what I learned in this activity. *

I am better able to discuss how teamwork can contribute to continuous and reliable patient care. *

## Format Improvement

For the content presented, how might the format of this activity be improved (select all that apply)? *

- [ ] Format was appropriate; no changes needed
- [ ] Increase interactivity
- [ ] Add a hands-on instructional component
- [ ] Other (describe below)
- [ ] Include more case-based presentations
- [ ] Add breakouts for subtopics
- [ ] Schedule more time for Q and A

If Other, explain

## Commitment to Change

Commitment to Change: Please take a moment to consider making changes in your practice as a result of attending this education.

Please identify how you will change your practice as a result of attending this activity (select all that apply). *

- [ ] This activity validated my current practice, no changes will be made.
- [ ] Change the management and/or treatment of my patients.
- [ ] Create/revise protocols, policies, and/or procedures.
- [ ] Other, please specify below:

If you answered Other above, explain below:

# Professional Development Alignment

Avera values you as an employee and is committed to providing employees with ongoing professional development opportunities.

What were your motivational factors for participating in this educational offering? (select all that apply) *

- [ ] Topic Interest
- [ ] Certfication Renewal Requirements
- [ ] Initial Certification Requirements
- [ ] Job Requirement
- [ ] Professional Growth
- [ ] State License Renewal Requirements

How well did this educational offering meet my professional and personal development goals? *

If your personal objectives were not achieved, please explain:

Avera's Continuing Education opportunities, like this one, contribute to my continued employment at Avera. *

I am better able to apply the learning organization traits to my work. *

I am better able to foster a learning mindset. *

I am better able to embrace a culture of continuous improvement *

How long have you been employed at Avera? *

# Feedback and Future Topics

*Avera values your opinions and feedback.*

For future educational activities, please describe any clinical, educational, practice management, or other topics that maybe beneficial to your continued educational needs. *

Please provide any comments or feedback of this activity: *

Please review your responses above to make sure all required fields (* indicates required) are completed and there are no error messages before continuing.

Submit