

Code Inspection for Healthier Homes

Post-Course Evaluation

Thank you for attending the *Code Inspection for Healthier Homes* course. Your input is critical in determining how this course may impact your work and how the course might be improved. This evaluation should take 10 minutes or less to complete and is required in order for you to receive your certificate of completion.

Student name (please print clearly)¹: _____

Date of course: _____ **City and state of course:** _____

SECTION A. OVERALL IMPRESSION OF COURSE

1. Overall, how would you rate this course?

Exceptional Very good Good Average Below average Poor

2. Did the course meet your expectations? Yes No Somewhat

3. Would you recommend this course to a colleague? Yes No Maybe

4. Can you incorporate concepts learned during the course into your daily work right away?

Yes, all or almost all of it Yes, much of it Yes, some of it No, not at all

5. Was there enough time for discussion, questions and interactive exercises? Yes No Not sure

6. Please rate the overall quality of the course materials. *Course materials include PowerPoints, video clips, student binders, case studies, exercises, and demonstrations.*

Exceptional Very good Good Average Below average Poor

SECTION B. PRESENTERS

Questions 11-16: Please rate your presenter(s) on each of the following qualities of his/her/their presentation. *If you had more than one presenter, please provide an overall rating for each item and enter comments about individual trainers under additional comments (question 16).*

7. Well-prepared Exceptional Very good Good Average Below average Poor

8. Knowledgeable Exceptional Very good Good Average Below average Poor

9. Enthusiastic Exceptional Very good Good Average Below average Poor

10. Easy to understand Exceptional Very good Good Average Below average Poor

¹ Your name is required so that we can generate your certificate of completion.

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11. Pace of instruction Exceptional Very good Good Average Below average Poor

12. Additional comments about presenters:

SECTION C. HEALTHY HOMES SKILLS AND KNOWLEDGE

13. Think about your current ability to put healthy homes principles into practice (e.g., identifying problems, educating residents). Which, if any, of the following healthy homes principles are you very or extremely confident about your ability to put that principle into practice? (select all that apply)

- Keep it Dry
- Keep it Clean
- Keep it Pest-Free
- Keep it Ventilated
- Keep it Safe
- Keep it Contaminant-Free
- Keep it Maintained
- I don't feel extremely or very confident about any of the healthy homes principles yet

14. This course focuses on the connection between resident health and housing conditions and the role of enforcement strategies in protecting resident health. Are you very or extremely confident about your ability to identify/describe any of the following? (select all that apply)

- The connection between resident health and housing conditions
- The prevalence of common housing maintenance problems
- Health-related provisions of your local codes and model codes
- Strengths and weaknesses of various enforcement strategies on resident health
- I don't feel very or extremely confident about any of these yet

SECTION D. ADDITIONAL QUESTIONS

15. Do you anticipate any of the following barriers to integrating healthy homes information into your practice? (select all that apply)

- Insufficient funding
- Inadequate management support
- Limited resident interest
- Need more information to use practices
- Lack of time
- No rules or codes to use
- Unsure of how to use information for action
- No barriers anticipated
- I do not plan to integrate healthy homes information into my practice
- Other

16. What do you think your agency or organization would need to incorporate a comprehensive healthy homes approach into its work? (select all that apply)

- We already incorporate a healthy homes approach into our work
- Funding
- Agency/organization authority/better codes
- Political will/management or executive support
- More awareness of how healthy homes is related to our mission and activities
- Partnerships with other organizations
- Infrastructure for delivering services
- More training

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None

Other

Unsure

17. What additional information do you need to help you in your work?

18. What did you like best about the training?

19. What did you like least about the training?

20. What issues should have been covered that were not?