

Community Program Quality Survey Template

All questions are optional. Follow each question's directions.

Write your answers to the open questions in the space provided.

Think about the named program cycle. Answer from your own experience. Do not include private case information, clinical details, benefit records, or identifying information about other participants.

1. How much of the named program did you take part in?

- ☐ All activities
- ☐ Most activities
- ☐ Some activities
- ☐ One activity
- ☐ Registered but did not attend
- ☐ Another level of participation
- ☐ Prefer not to say

2. How clear was the information about what the program offered?

- ☐ Very unclear
- ☐ Unclear
- ☐ Neither unclear nor clear
- ☐ Clear
- ☐ Very clear
- ☐ Not sure

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3. How well did the program activities fit what you hoped to do or learn?

- ☐ Not at all well
- ☐ Slightly well
- ☐ Moderately well
- ☐ Very well
- ☐ Extremely well
- ☐ Not sure

4. How easy was it for you to take part in the program?

- ☐ Very difficult
- ☐ Difficult
- ☐ Neither difficult nor easy
- ☐ Easy
- ☐ Very easy
- ☐ I did not attend
- ☐ Prefer not to say

5. How helpful was the support or facilitation during the program?

- ☐ Not at all helpful
- ☐ Slightly helpful
- ☐ Moderately helpful
- ☐ Very helpful
- ☐ Extremely helpful
- ☐ I did not use support
- ☐ Not sure

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6. How useful was the program for the activity, decision, or goal it was intended to support?

- ☐ Not at all useful
- ☐ Slightly useful
- ☐ Moderately useful
- ☐ Very useful
- ☐ Extremely useful
- ☐ Too early to tell
- ☐ Not sure

7. What is one change that would make the next program cycle easier or more useful?
