- Katie Mendell
- Mental Health First Aid
- 5/29/19 8am - 4pm

CA BOCES Evaluation Summary Form
Regional Professional Development

Use this form as a cover sheet for participant evaluations at the end of each regional professional development event. This form should serve as a summary of participant evaluations.

Satisfaction:

1. To what extent did the participants indicate you addressed the stated outcomes?	1	2	3	4	(5)
2. To what extent was the information meaningful to the participants?	1	2	3	4	(5)
3. To what extent did the participants indicate you promoted a positive learning environment?	1	2	3	4	(5)
4. To what extent did the participants predict it would impact student learning?	1	2	3	(4)	5
5. To what extent did the participants say they would recommend this learning opportunity?	1	2	3	4	(5)

Learning:

What were some of the major comments and takeaways from participants regarding what they learned?

- ALGEE action plan
- facts + myths about mental health
- mental health signs + symptoms vs. typical adolescence
- asking the direct suicide question during crisis

What did participants indicate they still need to support further learning or application of their learning?

- practice utilizing action plan (ALGEE)
- help connecting students in crisis to professional help

What did the participants indicate they plan to do as a result of their learning?

- approach students in crisis using ALGEE action plan
- Explore resources + provide to students in their districts

YOUTH MENTAL HEALTH FIRST AID®

Youth Mental Health First Aid Course Evaluation Form

Location of the course: CABOCED A/B Dates of course: 5/29/19
Instructor(s): Katie Mendell

I. Overall Course Evaluation

		Strongly Disagree	*Disagree*	*Uncertain*	*Agree*	*Strongly Agree*
1.	Course goals were clearly communicated.	1	2	3	4	(5)
2.	Course goals & objectives were achieved.	1	2	3	4	(5)
3.	Course content was practical and easy to understand.	1	2	3	4	(5)
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	(5)

II. A. Presenter Evaluation:

		Strongly Disagree	*Disagree*	*Uncertain*	*Agree*	*Strongly Agree*
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	(5)
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
8.	Feedback for <u>this</u> Instructor?					

III. B. Presenter Evaluation:

		Strongly Disagree	*Disagree*	*Uncertain*	*Agree*	*Strongly Agree*
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	(5)
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
12.	Feedback for <u>this</u> Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	(5)
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	(5)
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	(5)
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	(5)
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	(5)
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	(5)
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	(5)

21. What is your overall response to this course?
Mental Health First Aid Provides an organized training to help educators address/assist students struggling with MH concerns.

22. What do you consider to be the strengths of the course?
Great Presenter! She made the participants feel comfortable asking questions. Provided a nice combination of content/activities!

23. What do you consider to be the weaknesses of the course?
I would like to have a Powerpoint/agenda for the day. A lot of information to cover & I'd like to know when I can find the info. to be covered for the day.

24. Was there any issue/topic you expected this course to cover which it did not address?
N/A

25. Why did you attend this course? (circle all that apply)			
(a.)	My employer asked/assigned me	(d.)	Other professional development *(specify profession)*
(b.)	Personal Interest	e.	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- [X] At work (please describe your work position): Curriculum Instruction
- [ ] As a parent/guardian
- [ ] As a family member
- [ ] As a peer/friend
- [ ] As a volunteer/mentor
- [ ] Other (please describe): _____

27. Would you recommend this course to others? X Yes ___ No

28. What is your gender? ___ Male X Female

29. How do you describe your race/ethnicity? (Please circle all that apply)

a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
(d.)	Caucasian or White		

30. What is your age?

a.	16-24 years	**(b.)**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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YOUTH MENTAL HEALTH FIRST AID® USA

Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean Boces Dates of course: 5/29/19
Instructor(s): Katie Mendal

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	(4)	5
2.	Course goals & objectives were achieved.	1	2	3	(4)	5
3.	Course content was practical and easy to understand.	1	2	3	4	(5)
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	(5)

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	(4)	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	(4)	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
8.	Feedback for this Instructor?					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	(4)	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	(4)	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
12.	Feedback for this Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

this was review of material I've been trained in previously

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	(5)
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	(5)
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	(5)
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	(5)
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	(5)
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	(5)
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	(5)

21. What is your overall response to this course?

helpful for teachers, support STAFF, admin

22. What do you consider to be the strengths of the course?

lots of opportunity for practice & movement.

23. What do you consider to be the weaknesses of the course?

N/A

24. Was there any issue/topic you expected this course to cover which it did not address?

N/A

25. Why did you attend this course? (circle all that apply)

a.	My employer asked/assigned me	**d.**	Other professional development *(specify profession)*
b.	Personal Interest	**e.**	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☑ At work (please describe your work position): Counselor
- ☑ As a parent/guardian
- ☑ As a family member
- ☑ As a peer/friend
- ☐ As a volunteer/mentor
- ☐ Other (please describe): _____

27. Would you recommend this course to others? ✓ Yes ___ No

28. What is your gender? ___ Male ✓ Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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YOUTH MENTAL HEALTH FIRST AID USA

Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean BOCES Dates of course: 5/29/19
Instructor(s): Kate Mendell

I. Overall Course Evaluation

		Strongly Disagree	*Disagree*	*Uncertain*	*Agree*	*Strongly Agree*
1.	Course goals were clearly communicated.	1	2	3	(4)	5
2.	Course goals & objectives were achieved.	1	2	~~3~~	(4)	5
3.	Course content was practical and easy to understand.	1	2	3	4	(5)
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	5

II. A. Presenter Evaluation:

		Strongly Disagree	*Disagree*	*Uncertain*	*Agree*	*Strongly Agree*
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	(5)
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
8.	Feedback for <u>this</u> Instructor? Kate is a great addition to the ISS team!					

III. B. Presenter Evaluation:

		Strongly Disagree	*Disagree*	*Uncertain*	*Agree*	*Strongly Agree*
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for <u>this</u> Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	(5)
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	(4)	~~3~~ 5
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	(4)	5
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	(4)	5
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	(5)
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	(5)
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	(4)	5

21. What is your overall response to this course?
The 1st half moves slowly & more time could be spent on working through ALGEE

22. What do you consider to be the strengths of the course?
Interesting info on each mental health need.

23. What do you consider to be the weaknesses of the course?
Too much emphasis on background info - could be consolidated.

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)			
a.	My employer asked/assigned me	d.	Other professional development *(specify profession)*
b.	Personal Interest	e.	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- [X] At work (please describe your work position): Teacher
- [ ] As a parent/guardian
- [ ] As a family member
- [ ] As a peer/friend
- [ ] As a volunteer/mentor
- [ ] Other (please describe): _____

27. Would you recommend this course to others? X Yes ___ No

28. What is your gender? ___ Male X Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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YOUTH MENTAL HEALTH FIRST AID® USA

Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean CTE Center Dates of course: 5/29/19
Instructor(s): Katie Mendell

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	4	5
2.	Course goals & objectives were achieved.	1	2	3	4	5
3.	Course content was practical and easy to understand.	1	2	3	4	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
8.	Feedback for this Instructor?					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for this Instructor? you are doing great!					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	(5)
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	(5)
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	(5)
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	(5)
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	(5)
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	(5)
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	(5)

21. What is your overall response to this course?

22. What do you consider to be the strengths of the course?

23. What do you consider to be the weaknesses of the course?

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)

a.	My employer asked/assigned me	**d.**	Other professional development *(specify profession)* and interest - refreshing
b.	Personal Interest	**e.**	Community or volunteer interest *(please specify)*
c.	Other:		

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YOUTH MENTAL HEALTH FIRST AID®

Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- [x] At work (please describe your work position): _____
- [ ] As a parent/guardian
- [ ] As a family member
- [ ] As a peer/friend
- [ ] As a volunteer/mentor
- [ ] Other (please describe): _____

27. Would you recommend this course to others? X Yes ___ No

28. What is your gender? ___ Male X Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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YOUTH MENTAL HEALTH FIRST AID® USA

Youth Mental Health First Aid Course Evaluation Form

Location of the course: CABOCES OCEAN Dates of course: 5/29/19
Instructor(s): _____

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	4	5
2.	Course goals & objectives were achieved.	1	2	3	4	5
3.	Course content was practical and easy to understand.	1	2	3	4	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
8.	Feedback for this Instructor? THANK YOU! NICE JOB					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for this Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	(5)
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	(5)
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	(5)
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	(5)
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	(5)
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	(5)
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	(5)

21. What is your overall response to this course?

VERY HAPPY W/ INFO + INSTRUCTION

22. What do you consider to be the strengths of the course?

FLOW + FREQUENT BREAKS TO STAY ENERGIZED WHILE GOING OVER DIFFICULT MATERIAL

23. What do you consider to be the weaknesses of the course?

VIDEOS ARE A NICE BREAK - MORE PLEASE!

24. Was there any issue/topic you expected this course to cover which it did not address?

N-A.

25. Why did you attend this course? (circle all that apply)			
a.	My employer asked/assigned me	**d.**	Other professional development *(specify profession)*
b.	Personal Interest	**e.**	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☑ At work (please describe your work position): TEACHER
- ☐ As a parent/guardian
- ☑ As a family member
- ☑ As a peer/friend
- ☑ As a volunteer/mentor
- ☐ Other (please describe): _____

27. Would you recommend this course to others? ✓ Yes ___ No

28. What is your gender? ✓ Male ___ Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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YOUTH MENTAL HEALTH FIRST AID® USA

Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean BOCES Dates of course: 5/29/19

Instructor(s): Kati Mendel

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	(4)	5
2.	Course goals & objectives were achieved.	1	2	3	(4)	5
3.	Course content was practical and easy to understand.	1	2	3	(4)	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	(4)	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	(4)	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	(4)	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	(4)	5
8.	Feedback for this Instructor?					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for this Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

I've been trained in suicide assessment, screening etc previously

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	5
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	5
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	5
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	5
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	5
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	5
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	5
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	5

21. What is your overall response to this course?

good for teachers, coaches etc.

22. What do you consider to be the strengths of the course?

23. What do you consider to be the weaknesses of the course?

Not for counselors!

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)

a.	My employer asked/assigned me	**d.**	Other professional development *(specify profession)*
b.	Personal Interest	**e.**	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☐ At work (please describe your work position): _____
- ☐ As a parent/guardian
- ☐ As a family member
- ☐ As a peer/friend
- ☐ As a volunteer/mentor
- ☒ Other (please describe): know what teachers should + should not do.

27. Would you recommend this course to others? X Yes ___ No but not counselors

28. What is your gender? ___ Male X Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
(d.)	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**(c.)**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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YOUTH MENTAL HEALTH FIRST AID USA

Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean, NY Dates of course: 5.29.19

Instructor(s): Kate Menael

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	X	5
2.	Course goals & objectives were achieved.	1	2	3	X	5
3.	Course content was practical and easy to understand.	1	2	3	4	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
8.	Feedback for this Instructor? I liked the papers on the wall activities					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for this Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	(5)
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	(5)
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	(5)
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	(5)
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	(5)
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	(5)
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	(5)

21. What is your overall response to this course?

very informative

22. What do you consider to be the strengths of the course?

Learning about ALGEE

23. What do you consider to be the weaknesses of the course?

N/A

24. Was there any issue/topic you expected this course to cover which it did not address?

No.

25. Why did you attend this course? (circle all that apply)

a.	My employer asked/assigned me ✓	**d.**	Other professional development *(specify profession)* ✓
b.	Personal Interest ✓	**e.**	Community or volunteer interest *(please specify)* ✓
c.	Other: Mollie Lapp suggested it to us.		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☑ At work (please describe your work position): Counselor
- ☑ As a parent/guardian
- ☑ As a family member
- ☑ As a peer/friend
- ☑ As a volunteer/mentor
- ☐ Other (please describe): _____

27. Would you recommend this course to others? ✓ Yes ___ No

28. What is your gender? ___ Male ✓ Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White ✓		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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Youth Mental Health First Aid Course Evaluation Form

Location of the course: OLEAN BOCES Dates of course: 5/28/2019
Instructor(s): KATIE MEMMEL

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	4	(5)
2.	Course goals & objectives were achieved.	1	2	3	4	(5)
3.	Course content was practical and easy to understand.	1	2	3	4	(5)
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	(5)

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	(5)
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
8.	Feedback for this Instructor?					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	(5)
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
12.	Feedback for this Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	(5)
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	(5)
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	(5)
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	(5)
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	(5)
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	(5)
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	(5)

21. What is your overall response to this course? VERY IMPORTANT TRAINING FOR SCHOOL STAFF TO EXPERIENCE. THIS TRAINING PROVIDES TOOLS TO SUPPORT STUDENTS

22. What do you consider to be the strengths of the course? WHEN THEY ARE VULNERABLE & STRUGGLING.

23. What do you consider to be the weaknesses of the course?

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)

(a.)	My employer asked/assigned me	(d.)	Other professional development *(specify profession)* SCHOOL SOCIAL WORKER
(b.)	Personal Interest	e.	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☐ At work (please describe your work position): _____
- ☐ As a parent/guardian
- ☐ As a family member
- ☐ As a peer/friend
- ☐ As a volunteer/mentor
- ☐ Other (please describe): _____

27. Would you recommend this course to others? ___Yes ___No

28. What is your gender? ____ Male ____ Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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YOUTH MENTAL HEALTH FIRST AID USA

Youth Mental Health First Aid Course Evaluation Form

Location of the course: Clean BOCES Dates of course: 5/29/19
Instructor(s): Katie Mendell

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	4	(5)
2.	Course goals & objectives were achieved.	1	2	3	4	(5)
3.	Course content was practical and easy to understand.	1	2	3	4	(5)
4.	There was adequate opportunity to practice the skills learned.	1	2	3	(4)	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	(5)
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
8.	Feedback for <u>this</u> Instructor?					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for <u>this</u> Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	(4)	5
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	(4)	5
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	(4)	5
16.	Actively and compassionately listen to a young person in distress.	1	2	3	(4)	5
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	(4)	5
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	(4)	5
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	(4)	5
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	(4)	5

21. What is your overall response to this course?
I felt that this was insightful

22. What do you consider to be the strengths of the course?
the info was informative. I liked the book

23. What do you consider to be the weaknesses of the course?
I would like to have handouts

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)

a.	My employer asked/assigned me	d.	Other professional development *(specify profession)*
(b.)	Personal Interest	e.	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☒ At work (please describe your work position): _____
- ☒ As a parent/guardian
- ☒ As a family member
- ☐ As a peer/friend
- ☐ As a volunteer/mentor
- ☐ Other (please describe): _____

27. Would you recommend this course to others? ☒ Yes ☐ No

28. What is your gender? ☐ Male ☒ Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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Youth Mental Health First Aid Course Evaluation Form

Location of the course: CA BOCES Dates of course: May 29, 2019
Instructor(s): Katie Mendell

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	4	5
2.	Course goals & objectives were achieved.	1	2	3	4	5
3.	Course content was practical and easy to understand.	1	2	3	4	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
8.	Feedback for this Instructor? Thank you for honoring our time and condensing info when appropriate.					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for this Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	(4)	5
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	(4)	5
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	(4)	5
16.	Actively and compassionately listen to a young person in distress.	1	2	3	(4)	5
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	(4)	5
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	(4)	5
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	(4)	5
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	(4)	5

21. What is your overall response to this course?
helpful

22. What do you consider to be the strengths of the course?
realistic information

23. What do you consider to be the weaknesses of the course?
overwhelming amount of info. to be learned

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)			
a.	My employer asked/assigned me	**d.**	Other professional development *(specify profession)*
(**b.**)	Personal Interest	**e.**	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☒ At work (please describe your work position): Teacher
- ☐ As a parent/guardian
- ☐ As a family member
- ☐ As a peer/friend
- ☐ As a volunteer/mentor
- ☐ Other (please describe): _____

27. Would you recommend this course to others? X Yes ___ No

28. What is your gender? ___ Male X Female

29. How do you describe your race/ethnicity? (Please circle all that apply)

a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
(d.)	Caucasian or White		

30. What is your age?

a.	16-24 years	**b.**	25-44 years	**(c.)**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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YOUTH MENTAL HEALTH FIRST AID®

Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean Bocces Dates of course: _____
Instructor(s): Katie Mendell

I. Overall Course Evaluation

		Strongly Disagree	*Disagree*	*Uncertain*	*Agree*	*Strongly Agree*
1.	Course goals were clearly communicated.	1	2	3	4	5
2.	Course goals & objectives were achieved.	1	2	3	4	5
3.	Course content was practical and easy to understand.	1	2	3	4	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	5

II. A. Presenter Evaluation:

		Strongly Disagree	*Disagree*	*Uncertain*	*Agree*	*Strongly Agree*
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
8.	Feedback for <u>this</u> Instructor?					

III. B. Presenter Evaluation:

		Strongly Disagree	*Disagree*	*Uncertain*	*Agree*	*Strongly Agree*
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for <u>this</u> Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	(4)	5
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	(4)	5
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	(4)	5
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	(5)
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	(4)	5
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	(4)	5
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	(4)	5

21. What is your overall response to this course?

22. What do you consider to be the strengths of the course?

23. What do you consider to be the weaknesses of the course?

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)

a.	My employer asked/assigned me	**d.**	Other professional development *(specify profession)*
b.	Personal Interest	**e.**	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- [x] At work (please describe your work position): _____
- [ ] As a parent/guardian
- [ ] As a family member
- [ ] As a peer/friend
- [ ] As a volunteer/mentor
- [ ] Other (please describe): _____

27. Would you recommend this course to others? X Yes ___ No

28. What is your gender? ____ Male X Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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Youth Mental Health First Aid Course Evaluation Form

Location of the course: Otsego Boces Dates of course: 5/29/19
Instructor(s): Kate Mendell

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	4	(5)
2.	Course goals & objectives were achieved.	1	2	3	4	(5)
3.	Course content was practical and easy to understand.	1	2	3	4	(5)
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	(5)

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	(5)
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
8.	Feedback for this Instructor? she was wonderful knowledgeable					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for this Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	(4)	5
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	(5)
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	(5)
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	(5)
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	(5)
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	(5)
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	(4)	5

21. What is your overall response to this course?

very informative

22. What do you consider to be the strengths of the course?

Learning to offer help to young people in crisis with the correct verbage

23. What do you consider to be the weaknesses of the course?

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)			
(a.)	My employer asked/assigned me	(d.)	Other professional development *(specify profession)*
(b.)	Personal Interest	e.	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☐ At work (please describe your work position): _____
- ☐ As a parent/guardian
- ☐ As a family member
- ☐ As a peer/friend
- ☐ As a volunteer/mentor
- ☐ Other (please describe): _____

27. Would you recommend this course to others? ___Yes ___No

28. What is your gender? ____ Male ____ Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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YOUTH MENTAL HEALTH FIRST AID® USA

Youth Mental Health First Aid Course Evaluation Form

Location of the course: CABOCES - Main Center Windfall Rd Dates of course: 5-29-19
Instructor(s): Katie Mendell

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	4	(5)
2.	Course goals & objectives were achieved.	1	2	3	4	(5)
3.	Course content was practical and easy to understand.	1	2	3	(4)	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	(4)	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	(4)	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	(4)	5
8.	Feedback for this Instructor? Katie presented complex information from the point of view of having experience w/ the content and the complexity of the many issues involved w/ mental health.					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	(4)	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
12.	Feedback for this Instructor? I really liked how you handled the statement about teachers needing more information about the backgrounds of students and families. We don't need all the information to treat our students as people.					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3 Getting better		5
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	(4)	5
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	(4)	5
16.	Actively and compassionately listen to a young person in distress.	1	2	3	(4)	5
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	(4)	5
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	(4)	5
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	(4)	5
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	(4)	5

21. What is your overall response to this course?
I am grateful to have been able to take this course.

22. What do you consider to be the strengths of the course?
The presenter who has experience w/ content and the book participants get to take w/ them.

23. What do you consider to be the weaknesses of the course?
very deep content — perhaps split course into a 2 day workshop.

24. Was there any issue/topic you expected this course to cover which it did not address?
no

25. Why did you attend this course? (circle all that apply)			
a.	My employer asked/assigned me	(d.)	Other professional development *(specify profession)*
(b.)	Personal Interest	e.	Community or volunteer interest *(please specify)*
c.	Other: I wanted to learn the content so that I could consider it as an offering for teacher and support staff PD.		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☒ At work (please describe your work position): School administrator
- ☒ As a parent/guardian
- ☒ As a family member
- ☒ As a peer/friend
- ☐ As a volunteer/mentor
- ☐ Other (please describe): _____

27. Would you recommend this course to others? ☒ Yes ___ No

28. What is your gender? ____ Male ☒ Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean BOCES Dates of course: 5-29-19
Instructor(s): Katie Mendell

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	4	5
2.	Course goals & objectives were achieved.	1	2	3	4	5
3.	Course content was practical and easy to understand.	1	2	3	4	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
8.	Feedback for <u>this</u> Instructor? Very knowledgeable.					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for <u>this</u> Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	5
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	5
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	5
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	5
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	5
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	5
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	5
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	5

21. What is your overall response to this course?

Good course.

22. What do you consider to be the strengths of the course?

Emphasis on deciphering b/w "normal" & "at-risk" behavior.

23. What do you consider to be the weaknesses of the course?

Didn't go into too much detail on how to get youth to professional.

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)			
a.	My employer asked/assigned me	**d.**	Other professional development *(specify profession)*
b.	Personal Interest	**e.**	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- ☑ At work (please describe your work position): Counselor
- ☑ As a parent/guardian
- ☐ As a family member
- ☒ As a peer/friend
- ☐ As a volunteer/mentor
- ☐ Other (please describe): _____

27. Would you recommend this course to others? ✓ Yes ___ No

28. What is your gender? ___ Male ✓ Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean CTE Dates of course: 5/29/19
Instructor(s): Katie Mendell

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	(4)	5
2.	Course goals & objectives were achieved.	1	2	3	(4)	5
3.	Course content was practical and easy to understand.	1	2	3	(4)	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	(4)	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	(5)
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	(4)	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	(4)	5
8.	Feedback for this Instructor?					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	(4)	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	(4)	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for this Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	(4)	5
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	(4)	5
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	(3)	4	5
16.	Actively and compassionately listen to a young person in distress.	1	2	3	(4)	5
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	(4)	5
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	(3)	4	5
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	(4)	5
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	(4)	5

21. What is your overall response to this course?

Positive

22. What do you consider to be the strengths of the course?

Concrete steps

23. What do you consider to be the weaknesses of the course?

Jumps around

24. Was there any issue/topic you expected this course to cover which it did not address?

25. Why did you attend this course? (circle all that apply)

(a.)	My employer asked/assigned me	**d.**	Other professional development *(specify profession)*
b.	Personal Interest	**e.**	Community or volunteer interest *(please specify)*
c.	Other:		

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26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- [x] At work (please describe your work position): teacher
- [ ] As a parent/guardian
- [ ] As a family member
- [ ] As a peer/friend
- [ ] As a volunteer/mentor
- [ ] Other (please describe): _____

27. Would you recommend this course to others? X Yes ___ No

28. What is your gender? ____ Male X Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
(d.)	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**(d.)**	61-80 years	**e.**	81 years or older

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Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean BOCES Dates of course: 5/29/19
Instructor(s): Katie Mindell

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	4	5
2.	Course goals & objectives were achieved.	1	2	3	4	5
3.	Course content was practical and easy to understand.	1	2	3	4	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	4	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
8.	Feedback for this Instructor? N/A					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	4	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	5
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	5
12.	Feedback for this Instructor? N/A					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	(4)	5
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	(4)	5
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	(4)	5
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	(5)
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	(4)	5
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	(4)	5
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	(4)	5
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	(5)

21. What is your overall response to this course?

Very informative

22. What do you consider to be the strengths of the course?

A lot of great info, with other bits to break it up

23. What do you consider to be the weaknesses of the course?

-The length

24. Was there any issue/topic you expected this course to cover which it did not address?

No.

25. Why did you attend this course? (circle all that apply)

(a.)	My employer asked/assigned me	d.	Other professional development *(specify profession)*
b.	Personal Interest	e.	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- [x] At work (please describe your work position): Teacher
- [ ] As a parent/guardian
- [ ] As a family member
- [ ] As a peer/friend
- [x] As a volunteer/mentor
- [ ] Other (please describe): _____

27. Would you recommend this course to others? X Yes ___No

28. What is your gender? X Male ____ Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
(d)	Caucasian or White		

30. What is your age?									
(a)	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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Youth Mental Health First Aid Course Evaluation Form

Location of the course: Olean BOCES Dates of course: 5/29/19
Instructor(s): Katie Mendell

I. Overall Course Evaluation

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
1.	Course goals were clearly communicated.	1	2	3	(4)	5
2.	Course goals & objectives were achieved.	1	2	3	(4)	5
3.	Course content was practical and easy to understand.	1	2	3	(4)	5
4.	There was adequate opportunity to practice the skills learned.	1	2	3	(4)	5

II. A. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
5.	The Instructor's presentation skills were engaging and approachable.	1	2	3	(4)	5
6.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
7.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
8.	Feedback for <u>this</u> Instructor?					

III. B. Presenter Evaluation:

		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
9.	The Instructor's presentation skills were engaging and approachable.	1	2	3	(4)	5
10.	The Instructor demonstrated knowledge of the material presented.	1	2	3	4	(5)
11.	The Instructor facilitated activities and discussion in a clear and effective manner.	1	2	3	4	(5)
12.	Feedback for <u>this</u> Instructor?					

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Youth Mental Health First Aid Course Evaluation Form

IV. Practical Application

As a result of this training, I feel more confident that I can...		Strongly Disagree	Disagree	Uncertain	Agree	Strongly Agree
13.	Recognize the signs that a young person may be dealing with a mental health challenge or crisis.	1	2	3	4	(5)
14.	Reach out to a young person who may be dealing with a mental health challenge.	1	2	3	4	(5)
15.	Ask a young person whether s/he is considering killing her/himself.	1	2	3	4	(5)
16.	Actively and compassionately listen to a young person in distress.	1	2	3	4	(5)
17.	Offer a distressed young person basic "first aid" level information and reassurance about mental health problems.	1	2	3	4	(5)
18.	Assist a young person who may be dealing with a mental health problem or crisis to seek professional help.	1	2	3	4	(5)
19.	Assist a young person who may be dealing with a mental health problem or crisis to connect with appropriate community, peer and personal supports.	1	2	3	4	(5)
20.	Be aware of my own views and feelings about mental health problems and disorders.	1	2	3	4	(5)

21. What is your overall response to this course?

Great Course

22. What do you consider to be the strengths of the course?

* The knowledge of the instructor

23. What do you consider to be the weaknesses of the course?

length of time in one day.

24. Was there any issue/topic you expected this course to cover which it did not address?

How to address Students after a classmate dies from Suicide.

25. Why did you attend this course? (circle all that apply)			
(a.)	My employer asked/assigned me	(d.)	Other professional development *(specify profession)* Teacher
(b.)	Personal Interest	e.	Community or volunteer interest *(please specify)*
c.	Other:		

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Youth Mental Health First Aid Course Evaluation Form

26. In what role do you see your Mental Health First Aid training being of use? (Check all that apply):

- [x] At work (please describe your work position): _____
- [x] As a parent/guardian
- [x] As a family member
- [x] As a peer/friend
- [ ] As a volunteer/mentor
- [ ] Other (please describe): _____

27. Would you recommend this course to others? [x] Yes ___ No

28. What is your gender? ___ Male [x] Female

29. How do you describe your race/ethnicity? (Please circle all that apply)			
a.	American Indian or Alaskan Native	**e.**	Hispanic or Latino origin
b.	Asian	**f.**	Native Hawaiian or other Pacific Islander
c.	Black or African American	**g.**	Other:
d.	Caucasian or White		

30. What is your age?									
a.	16-24 years	**b.**	25-44 years	**c.**	45-60 years	**d.**	61-80 years	**e.**	81 years or older

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