

Workshop Sessions
11:00 a.m. – 12:00 noon

31. Sex Offenders' Perceptions of Their Grooming Behaviors

Please indicate your rating of the presentation in the categories below by circling the appropriate number, using a scale of 1 (low) through 5 (high)

	HIGH	Neutral	LOW		
I. Content / Relevancy/ Teaching Methods:					
a) Content was appropriate for intended audience	5	4	3	2	1
b) Content was consistent with stated learning objectives	5	4	3	2	1
c) Content included recent studies/findings/literature on topic	5	4	3	2	1
d) Teaching methods were appropriate and effective for subject matter	5	4	3	2	1
e) This program is appropriate to my education, experience, and skills level	5	4	3	2	1
f) Cultural, racial, ethnic, socio-economic, and gender differences were considered	5	4	3	2	1
g) Visual aids, handouts, and oral presentations clarified content and were useful	5	4	3	2	1
h) Information could be applied to practice and enhanced my professional expertise	5	4	3	2	1
i) I did not perceive any commercial bias or conflict of interest	5	4	3	2	1
j) Information could contribute to achieving personal and professional goals	5	4	3	2	1
k) Timeline of course adhered to the advertised time, and CE credits offered	5	4	3	2	1
l) I would recommend this program to others	5	4	3	2	1

II. Learning Objectives: Learning Objectives were met:					
1. Demonstrate a comprehensive understanding of grooming behaviors and patterns of individuals that have caused sexual harm	5	4	3	2	1
2. Describe limitations in treatment of individuals that commit sexual crimes without a comprehensive understanding of their grooming behaviors	5	4	3	2	1
3. Analyze how treatment of grooming behaviors is a form of prevention work	5	4	3	2	1

III. Faculty: Tracy Leet, LCSW / Doyle Pruitt, Ph.D. / Molly Wolf, Ph.D.					
a) Knowledgeable in content areas	5	4	3	2	1
b) Presented the subject matter clearly and clarified content	5	4	3	2	1
c) Responsive to participants and to their questions	5	4	3	2	1
d) Used technology effectively	5	4	3	2	1
e) Reviewed limitations to material presented	5	4	3	2	1
f) Described severe and most common risks, including risk of medications	5	4	3	2	1

	<i>HIGH</i>	<i>Neutral</i>	<i>LOW</i>		
IV. Overall Rating:					
a) Visual and technology aids were up-to-date and adequately administered	5	4	3	2	1
b) Conference facility was adequate and location was suitable for training	5	4	3	2	1
c) This session met or exceeded my expectations	5	4	3	2	1
d) How much did you learn as a result of this CE program	a great deal		some	very little	
e) How useful was the content of this CE program for your practice and other professional development	extremely useful			not useful	

V. Logistics/ Technology/ Administration:					
a) Conference facility was adequate and location was suitable for training/ learning	5	4	3	2	1
b) Visual and technology aids were up-to-date and adequately administered	5	4	3	2	1
c) Course/ training registration went smoothly	5	4	3	2	1
d) Instructions for requesting accommodations for a disability were clear	5	4	3	2	1
e) Questions or concerns were addressed effectively and in a timely manner	5	4	3	2	1
f) Registration went smoothly and the event was well managed	5	4	3	2	1

VI. Comments About This Training: _____
