

Instructions for Receiving Continuing Education Certificate

1. Complete Continuing Education Contact Information form and training evaluation form.
2. Email the forms to Anna Wilson at awilson@dnlcc.org or fax to ATTN: Anna Wilson at (843) 720-7106
3. A Continuing Education certificate will be emailed to the email address provided.

Continuing Education Contact Information

Name: _____
Agency: _____
Title: _____
Email: _____
Phone: _____
Fax: _____



**Introduction to Evidence Based Treatment Planning
Training Evaluation
January 20, 2010
The Dee Norton Lowcountry Children's Center**

Please rate the following questions on a scale of **1 = Poor** to **5 = Excellent**

___ 1. This training was helpful in understanding the role of our CAC in the application of the new NCA mental health standard.

___ 2. I have a good understanding of the evidence based treatment planning (EBTP) model and how the use of the EBTP model can benefit the MDT members.

___ 3. I now have a better understanding of the need for using assessment in the treatment planning process

___ 4. I now have an understanding of the importance of providing on site or by referral, trauma-specific treatment for the children and families we serve.

___ 5. The have a clear understanding of the importance of having a child's caregiver involved in child's trauma treatment.

___ 6. I understand the MDT roles and responsibilities in the development of evidence based treatment plan.

___ 7. I understand the potential benefits of using the evidence based treatment planning process for the children and families we serve.

___ 8. The videoconferencing method of training was effective.

I am interested in participating in future training regarding the implementation of the new NCA Mental Health standard. Circle **YES** or **NO**. If YES, please provide feedback on specific topics of interest.

Please offer any comments, observations, and suggestions regarding both the content of the training and the method of delivery.
