**MMF Sample Retrospective Pre + Post Survey Template**

**Outcome(s) to Measure** [*to develop your Pre + Post Survey, first list the outcomes/indicators you plan to measure]*:

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**Indicators for Outcomes, or How You Will Recognize Indicators When They Have Been Achieved:**

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*The Outcomes and Indicators you list above now become the items for your survey. The survey you give to participants begins with the content that follows.*

Please read the items below, and rate yourself on each item for two points in time: how you were **BEFORE** you began this program and how you believe you are **NOW.** Please use the following scale:

1=This was/is not true for me at all. 2=This was/is somewhat true for me.

3=This was/is mostly true for me. 4=This was/is definitely true for me.

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome Area 1: (For example)**  **Knowledge/Awareness** | **BEFORE** | | | | **NOW** | | | |
| 1. I have an in-depth knowledge of the risk factors for….. | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| 1. I understand how to recognize the signs and symptoms of…. | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| 1. I am aware of the prevalence of….in my community. | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| **Outcome Area 2: (For example)**  **Attitudes** | **BEFORE** | | | | **NOW** | | | |
| 1. I believe there is little I can do to prevent …. | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| 1. Those who experience…. tend to overcome their issues on their own. | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| 1. Screening for …. Is an important aspect of each client encounter. | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Outcome Area 3: (For example)**  **Skills/Behavior** | **BEFORE** | | | | **NOW** | | | |
| 1. I know when it is appropriate to use …. with my clients. | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| 1. I have used …. with my clients. | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |
| 1. I frequently refer to ….. when encountering this issue. | 1 | 2 | 3 | 4 | 1 | 2 | 3 | 4 |