



**Section for Psychiatric & Substance Abuse Services  
Follow-Up Form**

**Using Technology: Carolinas HealthCare System is  
Increasing Access to Behavioral Health  
February 11, 2016**

1. Is there any information you would like to receive to follow up from the Webcast?
  
2. What remaining /additional questions or comments do you have from the Webcast?
  
3. I can apply what was shared in my organization:      Yes                                      No
  
4. Evaluation:

	Excellent				Poor
A. The Webcast was informative and worthwhile.	5	4	3	2	1
B. The Webcast addressed issues I expected to hear about.	5	4	3	2	1
C. There was ample time on the call to ask questions	5	4	3	2	1

*Please provide your contact information, especially if you wish to receive a reply to a question above.*

Name:

Title:

Institution:

City/State:

Email:

Phone:

**Please return this form to Camille Fernands at 312.278-0619 (fax) or to [cfernands@aha.org](mailto:cfernands@aha.org)**

**Thank You.**