

Evaluation Sheet

Thank you for attending today's training/briefing session.

Please complete both sides of this sheet and leave it in the folder at the front of the room, your responses will help us evaluate and improve the training and briefings that we offer.

If you have further comments in relation to today's session please contact Sandy Youngson on 020 8795 7438 or e-mail daat.training@brentpct.nhs.uk

Title of Session:- _____

Venue:- _____ **Date:-** _____

Name:- _____ **Organisation:-** _____
(Optional) (Optional)

Please mark your answer to each question by completely filling the box with ink, eg Thank You.

1. Have you attended training administered by Brent DAAT or Brent PCT Health Promotion Department before a. Yes b. No

2. How would you rate your knowledge of the topic before this session?

- a. Limited b. Adequate c. Good d. Very Good e. Specialist

Comment:-
(Optional)

3. How would you rate your knowledge of the topic now?

- a. Limited b. Adequate c. Good d. Very Good e. Specialist

Comment:-
(Optional)

4. Did this session meet its aims and objectives?

- a. Not at all b. Partially c. Not sure d. Mostly e. Yes

Comment:-
(Optional)

5. Will the learning you have done today be useful in your work?

- a. Not at all b. Partially c. Not sure d. Mostly e. Yes

Comment:-
(Optional)

P.T.O

6. Will the learning you have done today be useful to you personally?

- a. Not at all b. Partially c. Not sure d. Mostly e. Yes

Comment:-
(Optional)

7. How do you rate the delivery of the session?

- a. Poor b. Adequate c. Good d. Very Good e. Excellent

Comment:-
(Optional)

8. How do you rate the administration of the session?

- a. Poor b. Adequate c. Good d. Very Good e. Excellent

Comment:-
(Optional)

9. If you had any special requirements in order to access or participate in this session, where they met?

- a. Not at all b. Partially c. Not sure d. Mostly e. Yes

Comment:-
(Optional)

Did you inform the trainer of you requirements prior to the session? f. Yes g. No

10. What did you gain most from this session?

11. What would have made this Session even better?

12. On what other issues would you be interested in receiving Training?

13. Any other comments?

Please place your completed evaluation in the folder provided at the front of the room.

Thank you