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| **Please help us to learn for our Bring Dementia Out innovation. What you tell us will help to inform the impact of this innovation on people affected by dementia and others.**  Comments will be used by Alzheimer’s Society for evaluation purposes. We value all feedback on what is working well and how things could be better. Constructive criticism is welcomed!  **Are you happy for your comments to be used in our reporting or publicity materials to help promote Bring Dementia Out? Yes** **No**  **If you would prefer for your comments to remain anonymous, please do not put your name at the end of this form.** |

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| 1. **What were you hoping to achieve by coming along today?** |
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| 1. **How did the session match your expectations?** |
| Exceeded  Met  Not met  Not sure  **Please explain why:** |

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| 1. **Which of the Bring Dementia Out resources did you find most useful?** |
| Video  Bring Dementia Out booklet  Bring Dementia Out poster  Online hub (webpage)  **Please explain why:** |

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| 1. **What action(s) will you take to help Bring Dementia Out?** | |
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| 1. **How did you find out about today’s session?** |
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| **6) What best describes you?** |
| Health and social care professional (may include GPs, care homes, hospitals, and other organisations, such as charities)  Part of LGBT+ communities  Person affected by dementia - you are living with dementia or supporting someone who is (carer, partner, friend or relative)    Other (please specify) |

**Name, role and contact (optional): ………………………………………………………………  
  
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**Location: ………………………………………………………………………………………………**