

Quality Care: Pre-service training Participant evaluation form

Thank you for giving us your feedback on this training. It will assist with continuous improvement.

Date of training:	
Location:	
Training provided by:	

1. What did you hope to achieve when you came to this course?

.....

.....

.....

.....

2. How well did this course help you to do this?

Not at all	A little	Satisfactorily	Very well	Completely					
1	2	3	4	5	6	7	8	9	10

Comments

.....

.....

.....

.....

3. One of the aims of this training has been to give you an awareness of the experiences that children and young people have before they come to a placement with you.

How well did this course do that?

Not at all	A little	Satisfactorily	Very well	Completely					
1	2	3	4	5	6	7	8	9	10

Comments

.....

.....

.....

.....

4. The experiences children and young people have will mean that they have special care needs when they come to live with you.

How well did the course help you understand those special needs?

Not at all	A little	Satisfactorily	Very well	Completely					
1	2	3	4	5	6	7	8	9	10

Comments

.....

.....

.....

.....

5. Another aim of this training was to describe how you will work with other people in meeting a child or young person's needs. There is a partnership between the child, their birth parents, foster carers and workers, and each has certain roles and responsibilities.

How well did the course help you understand what those roles and responsibilities are?

Not at all	A little	Satisfactorily	Very well	Completely					
1	2	3	4	5	6	7	8	9	10

Comments

.....

.....

.....

.....

6. Another aim of this training was to provide carers with a knowledge of the standards required in caring for children and young people?

How well did the course help you understand what those roles and responsibilities are?

Not at all	A little	Satisfactorily	Very well	Completely					
1	2	3	4	5	6	7	8	9	10

Comments

.....

.....

.....

.....



7. What did you like best about this training?

.....
.....
.....
.....

8. Is there any information that you think you may need that was not covered?

.....
.....
.....
.....

9. Do you have any comments on the way the material was presented to you?

.....
.....
.....
.....

10. What is your overall evaluation of this training?

Poor	Not very good			Good	Very good			Excellent	
1	2	3	4	5	6	7	8	9	10