

**Feedback Form Promoting Positive Mental Health Training Session for South Gloucestershire Council Staff**

The information provided on this evaluation form will be used so that further relevant information can be send to you as requested following the training.  Your answers to the questions on this form will be used to monitor performance, improve quality and used to evaluate the quality of this training resource. We will not include your name or job title or other personally identifiable data in such reports.  The data collected will be kept securely in line with data protection legislation. Hard copies will be destroyed once the data has been added to the evaluation database which will only be accessible by a small number of identified officers within the Public Health and Wellbeing Division with the exception of question Q5, if you request support from a Community Connector. The evaluation database of information provided will be destroyed within 18 months of receiving it apart from non-identifiable information used within the completed reports.

Name:

Job title:

Division:

Team: Date of session:

**Q2. Has this session helped you to feel…,**

1. Better equipped you to look after your mental well-being?

□ **Yes** □ **No**

1. More aware of what support is available in your local community?

□ **Yes** □ **No**

1. More aware of the support available to staff

□ **Yes** □ **No**

**Q1. What have you most enjoyed or found helpful about this session?**

**Q3: Please rate how this session has impacted your levels of understanding & confidence about mental health.**

 **Please use this scale: 1 = no difference, 2 = small increase, 3 = large increase in my:**

|  |  |
| --- | --- |
| My Current Level of…. | My Rating: 1 - 3 |
| Understanding about mental health issues |  |
| Awareness of local resources and services |  |
| Confidence to respond to a mental health issue |  |

**Q4: If you would you like to be emailed a link to the website of the South Gloucestershire Wellbeing College which includes details of available courses and activities, please provide either your work or personal email address:**

 **Q5: Would you like a Community Connector to contact you to create a wellbeing plan? If yes please provide the contact details you would like them to contact you on:**

  **Q6. Requesting further information:**

6a: If you would like to find out more about the mental health and emotional wellbeing advice and support services that are available, tick this box □

6b: If you would like to get involved in a range of local opportunities to help improve mental health in South Gloucestershire, please tick this box □

Please give your email address (work or personal) in the box below if you haven’t already provided it on the form.

 **Any further comments you would like to add:**

**Please return this completed form to:**

**publichealthtraining@southglos.gov.uk**

**Thank you for your feedback ☺**