## mme supported by HSC Public Health Agency TOOL 19 - HEALTH LITERACY WORKSHOP EVALUATION Venue: ......Date: ..... 1. What was your/your group's (delete as appropriate) knowledge of Health Literacy before the workshop? Please circle. **(** 2 3 😐 4 5 Not much Some Average Very Good Excellent Please comment: 2. Following the training, how do you rate your awareness and understanding of Health Literacy after the workshop? Please circle. з 😐 2 4 5 Not much Average Very Good Some Excellent Please comment: 3. How confident were you/your group in this topic before the workshop? Please circle. 2 3 4 5 Not much Average Very Good Excellent Some Please comment: 4. After this workshop, how confident do you / your group now feel on this topic? 4 2 з 😐 5 **R** 1 Not much Some Average Very Good Excellent Please comment: iii ĆWSAI Northern www.healthallianceni.com

5. Was this workshop beneficial? Yes 🗋 No 🛄

If No, how can this workshop be improved in the future?

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6. Would you recommend this training to others?



Other comments:







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