

Evaluation Form for Alli's Journey Comfort Bags

Thank you for taking the time to complete this survey.
If you are returning the survey through email, please bold your answers
and/or insert comments in the space provided.
Please email to: Linda@Allisjourney.ca

Accessibility:

How did you find out about the comfort bag?

1. Nursing Staff
2. Other Hospital Staff
3. Patient
4. Alli's Journey Website
5. OTHER - Please describe:

How easily were you able to obtain a comfort bag?

1. Without any difficulty at all
2. Minor difficulty
3. Was not able to get one!
4. OTHER - Please describe:

Presentation:

Did you find Alli's Journey Comfort Bag visually pleasing?

1. Yes
2. No

If no, please explain:

Is the size of the bag appropriate?

1. Yes
2. No

If no, please explain:

Is this a bag you will use for other purposes?

1. Yes
2. No

Please add any comments you may have regarding the presentation of the bag

Contents:

How useful did you find the contents of the bag?

1. Very useful
2. Somewhat useful
3. Minimally useful

Please suggest other items that you might like to see included in the comfort bag.

How useful did you find the literature included in the bag

1. Very useful
2. Somewhat useful
3. Minimally useful

Is there other pertinent information you would like to see included in the comfort bag?

Additional comments you would like to provide:

**We at Alli's Journey wish to thank you
for taking the time to provide us with your feedback.**