

Cardiac Rehabilitation Group Evaluation

This questionnaire will help us to find out whether the group session meets your needs. Please circle the response on the scale that best suits you.

1. How useful did you find the following sessions,

	Not Useful	Useful	Very Useful
Physical Activity Program	1	2	3
Heart function/ Angina/ Heart attacks	1	2	3
Management of symptoms	1	2	3
Relaxation technique	1	2	3
Healthy Eating	1	2	3
Medications	1	2	3
Cardiac risk factor assessment	1	2	3

2. Do you feel that you have a better understanding of your heart condition?

- No, I have learnt nothing new..... 1
- Yes, I have learnt a little..... 2
- Yes, I have learnt a lot..... 3

3. Was most of the information presented

- Too simple..... 1
- Just right..... 2
- Too complicated..... 3

4. Was there any sessions you thought could be covered better?

(please comment)



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5. **Would you recommend the group to another person with a cardiac condition?**

Yes / No

6. **On the whole, did you find the speakers**

Difficult to understand..... 1

About right.....2

Too general 3

7a. **Was the time convenient for you?** Yes / No

b. **If not when?** _____

c. **Was the venue suitable?** Yes / No

8. **Did you feel comfortable in the group** Yes / No

9a. **What did you enjoy about the exercise sessions?**

b. **What did you dislike about the exercise sessions?**

10. **Would you like to make any comments or suggestions for improving the group?**

Did you attend the Tiwi or the Palmerston group?

Palmerston

Tiwi

Date...../...../.....

THANK YOU VERY MUCH FOR YOUR PARTICIPATION 😊