

LTR FOR LIVING WITH MCI FAMILY MEMBER PARTICIPANT FEEDBACK

We would appreciate your feedback about the Learning the Ropes program. Please place a mark in the box corresponding to your opinion about the following:

	Strongly Agree	Agree	Somewhat Agree	Disagree	Strongly Disagree
① The information was clearly presented.					
② The participant workbook was useful to me.					
③ I feel better able to cope with my relative's mild cognitive impairment.					
④ My MCI relative is using the memory strategies taught in the program daily.					
⑤ My MCI relative's everyday memory function has improved through his or her use of the memory strategies taught in the program.					
⑥ As a result of participating in this program my MCI relative is making more time to engage in recreational activities she or he enjoys.					
⑦ I would recommend this program to a friend.					
⑧ The separate sessions for close family were helpful to me. [answer only if this program component was offered]					

What memory strategy, or strategies, taught did you find to be the most helpful to your MCI relative?

DATE:



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As a result of your participation in this program did you make any changes regarding healthy lifestyle habits, such as improvements in your diet, level of physical activity, amount of participation in socially or cognitively engaging activities, or stress management?

YES NO

If yes, what improvement(s) did you make? Please briefly describe.

Additional comments / feedback about the program.

DATE:

