



## Grampians Region HACC Program Foot Care Project Post Training Evaluation Tool City of Ballarat – July 2014



To assist us with ensuring that the training we deliver is appropriate and meets your needs please complete this short quiz after you have finished your training and return it to your supervisor.

<u>1</u>	2	3	4	5
Not at all confide	nt	moderately		very confident
Comment:				
		bout using the foot screer		
	•	II) to 5 (very confident)	iilig tool with c	ilents
Circle a maniber jr	om i not at a	, ( ,		
1	2	3	4	5
1	2		4	<u>5</u> very confident
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1 Not at all confide Comment:	2 ent	3 moderately		very confident
1 Not at all confide Comment:	2 ent ou think the	3 moderately		very confident
1 Not at all confide Comment: How useful do ye Circle a number f	2 ent ou think the	moderately  screening tool is to use w t all) to 5 (very useful)	ith clients?	very confident
1 Not at all confide Comment: How useful do ye Circle a number f	2 ent ou think the from 1(not a	3 moderately screening tool is to use w	ith clients?	very confident

- 4. Please circle whether the following activities fit (YES) or do not fit (NO) into your role as a community care worker.
  - Discussing foot health and foot care YES/NO/DON'T KNOW
  - Cutting toe nails YES/NO/DON'T KNOW
  - Assisting the client to set up equipment so they can cut their own nails YES/NO/DON'T KNOW
  - Advising clients on treatment for their feet YES/NO/DON'T KNOW

Adapted from work developed by Northern Grampians Foot Care Project, Ballarat District Nursing and Healthcare, Ballarat Community Health and City of Ballarat, 2013/14

1	2	3	4	<u>5</u>
ot at all c	onfident	moderately		ry confident
omment:				
	_	ald you refer a client to a post	odiatrist?	
<ul><li>Persor</li></ul>	who can cut thei	r own toe nails YES/NO/[	OON'T KNOW	
		s causing irritation YES/NO	D/DON'T KNOW	
		ES/NO/DON'T KNOW	VES /NO /DO	WT (410)4
		their feet/legs when walkin YES/NO/DON'T KNOW	g YES/NO/DOI	N'T KNOW
			ession are appre	ciated and will inform the
Your thou	_	k on how to improve this se		
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