



New York–Reducing  
Avoidable Hospitalizations



## The Conversation Project and NY-RAH: Championing the Conversation Project

### Participant Survey and Event Evaluation

#### About You

1. Prior to today's session, had you had the conversation?

- a. No.
- b. No, but I have thought about it.
- c. Yes, but at a very general level.
- d. Yes. The conversations have included enough detail that I feel confident my loved ones know my wishes.

2. Do you personally plan to have the conversation in the next month?

- a. No. This is not a priority for me at this time.
- b. No. I know what I want, but do not feel comfortable talking with others at this time.
- c. Yes, but at a very general level.
- d. Yes. I plan to have a conversation with others so that loved ones feel confident they know my wishes.
- e. Yes. I've already had these conversations, but plan to revisit the conversation with my loved ones.

3. If you plan to have the conversation, do you feel prepared?

- a. Yes
- b. Unsure
- c. No

#### About Today

4. What were the highlights of today's sessions? What did you find most helpful?

5. Will you be able to try these ideas within your organization during the next month?

a. **Yes** (I will definitely try the ideas I learned during the next month)

b. **Maybe** (I would like to try the new ideas I learned during the next month but doubt that I will have time)

c. **Probably not** (I seriously doubt we will try the new ideas I learned)

6. What topics were you expecting to be covered, which may not have been discussed? Were there any topics discussed today that you have additional questions about or would like to have clarified?

7. Indicate whether the balance between presentations, discussion, and exercises was conducive to your style of learning.

8. Do you have any advice for the event organizers?

Optional:

Name \_\_\_\_\_

Organization \_\_\_\_\_