

CHECKLIST FOR MODULE 1 DELIVERY

<u>Instructions to the Facilitators and Assistant Facilitators:</u>

Please complete this checklist at the end of each session to provide us with feedback on what was covered and how the session went. This feedback will help us assess if the sessions can be delivered as planned and identify potential challenges and improvements.

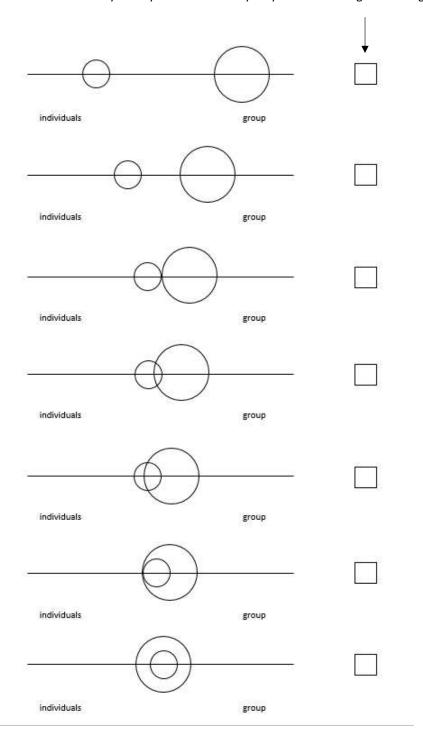
Date & time of the session:
Session number:
Venue:
Facilitators' names:
Session duration (as delivered):
Number of participants attending:

Activities	Delivered	Comment
	(Please tick if	(If partly or not delivered,
	delivered)	please explain why)
1. Introductions / icebreaker		
activity		
2. Hopes and fears		
3. Ground rules		
4. What are health and		
wellbeing?		
5. What influences health and		
wellbeing?		
6. The resilience game		
7. Conclusion		
Time for informal interaction (e.g.		
tea break)		

Reflections on the session

Please indicate which picture best describes your perception of how well connected, in general, the attendees of today's session appeared to be (tick the box on the right of the picture).

For example, the first picture would suggest that there was very little connection between individuals – that they did not come together as a group at all. Whereas the final picture would suggest that individuals were very closely connected – they very much came together as a group.



kenections on th	e session cont.			
<u>Please circle one</u>				
In your opinion, l	how well did too	day's session go?		
Not well at all 1	2	3	4	Very well 5
How engaged we	ere the participa	nts in today's session?		
Not well at all 1	2	3	4	Very well 5
Do you have any (For example, relocation of activition of activities o	ated to how the	eflections? group worked together, p	participants' enga	gement, session