



Section for Psychiatric & Substance Abuse Services
Follow-Up Form

***Improving Care & Reducing Costs for Behavioral Health Patients:
Middlesex Hospital's Role in a Community Partnership
December 2, 2015***

1. Is there any information you would like to receive to follow up from the Webcast?

2. What remaining /additional questions or comments do you have from the Webcast?

3. I can apply what was shared in my organization: Yes No

4. Evaluation:

	Excellent				Poor
A. The Webcast was informative and worthwhile.	5	4	3	2	1
B. The Webcast addressed issues I expected to hear about.	5	4	3	2	1
C. There was ample time on the call to ask questions	5	4	3	2	1

Please provide your contact information, especially if you wish to receive a reply to a question above.

Name:

Title:

Institution:

City/State:

Email:

Phone:

Please return this form to Camille Fernands at 312.278-0619 (fax) or to cfernands@aha.org

Thank You.