

Supplementary Materials 11

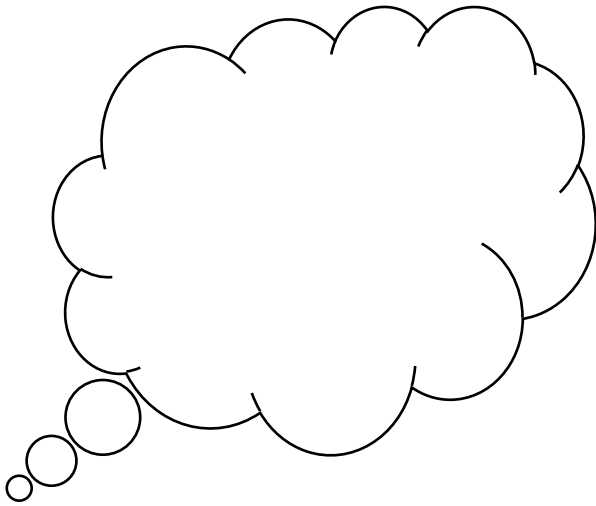
PLANNING CARDS FEEDBACK FORM

Please add your individual participant number. You created this when you filled in the first questionnaire about you and your family.

This should be the family carer's initials and day of birth e.g. if your name was John Smith and your birthday was on the 15th of March, this would be JS15.

Please write this here:





This form is for you to tell us what you think about the planning cards you just used.



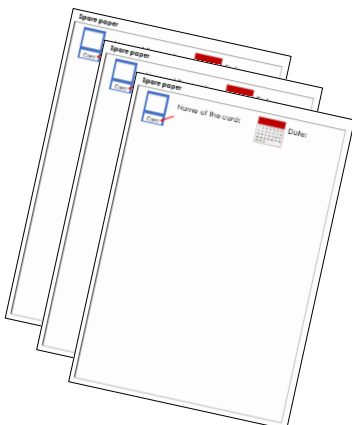
We will ask you some questions about each card that you looked at.



Please use this form every time you use the cards.



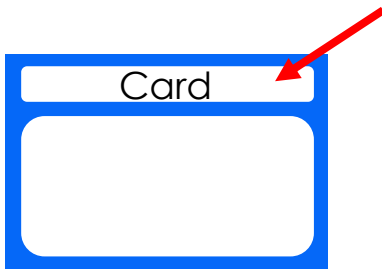
Please tell us about every card you used.



There is more paper at the back in case you run out of space.




What date did you use the cards?



Which cards did you look at?



Did you use the cards or the online version?

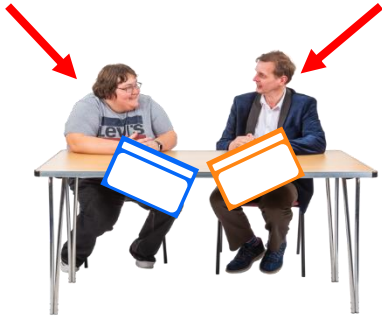
 Tick the one you used:



Cards



Online (computer,
phone or tablet)



Who was there?



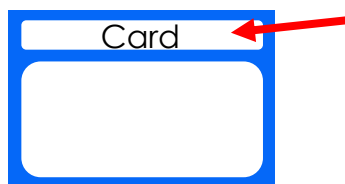
Did you write down what you talked about?

Yes

No

Did you write in the booklet or somewhere else?

These next questions are to help you to tell us about each card you looked at. If you looked at a lot of cards and can't remember them all, you can just tell us about some of them.



Name of the card:



Who chose the card?

Why did they choose it?



What did you think was good or bad about the card?

What would you change about it?



How did it make you feel?

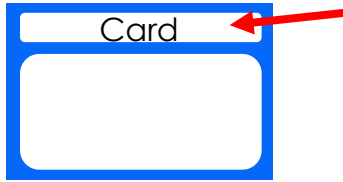


What did it make you think about?

Did it make you think about any plans for now or for the future?



Is there anything else you want to tell us
about using this card?



Name of the card:



Who chose the card?

Why did they choose it?



What did you think was good or bad about the card?

What would you change about it?



How did it make you feel?



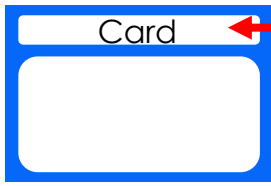
What did it make you think about?

Did it make you think about any plans for now or for the future?



Is there anything else you want to tell us
about using this card?

Spare paper



Card

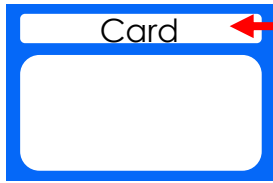
← Name of the card:



Thu	Fri	Sat	Sun	Mon	Tue	Wed
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Date:

Spare paper



Card

Name of the card:



Thu	Fri	Sat	Sun	Mon	Tue	Wed
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

Date: