Lancashire Fire and Rescue Service

Road Sense / Wasted Lives



To be completed by Service Personnel prior to the visit:

| Name or Type of Session | | Session Date: | | | | |
|--|----------|-----------------|--|--|--|--|
| Delivered by (Name and | | | | | | |
| Service | | Station Number | | | | |
| Number) | | | | | | |
| Watch (if | | CFS Team | | | | |
| applicable) | | (if applicable) | | | | |
| School\Organisation Name and Address (including Postcode): | | | | | | |
| | <u> </u> | | | | | |
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To be completed by the school/organisation following the visit:

We have recently updated all our Road Safety packages and value your honest feedback on the session.

| Staff Contact Name | | | Position | Position | | Contact Telephone Number | | |
|---|---------------------|--------|------------------|---|-----------|--------------------------|--|--|
| | | | | | | | | |
| Please indicate if we can contact you in the future regarding follow up to this session Y / N | | | | | | | | |
| Number in Audience | | | Age/Y | | ear Group | | | |
| | | | | | | | | |
| Length of Session | Less than 1 hour | 1 hour | More than 1 hour | Number of LFRS staff involved in delivery | | | | |

| Please tick as appropriate | 1 Outstanding/ Very Good | 2 Good | 3 Satisfactory | 4 Inadequate |
|--|--------------------------------|-----------|-------------------|-----------------|
| Was the content age appropriate? | | | | |
| Did the content match what you expected? | | | | |
| Was the audience attention maintained? | | | | |
| How were any questions answered? | | | | |
| Was the delivery style appropriate? | | | | |

| Please comment | upon and | circle as | appropriate: |
|----------------|----------|-----------|--------------|
|----------------|----------|-----------|--------------|

| | 1 Outstanding/ Very Good | 2 Good | 3 Satisfactory | 4 Inadequate |
|--|--------------------------------|-----------|-------------------|-----------------|
| How will the session contribute to the school's overall safety programme? | | | | |
| | 1 | 2 | 3 | 4 |
| How might you follow up the session? | | | | |
| | 1 | 2 | 3 | 4 |
| Do you think this session will positively influence the behaviour of the children regarding road safety? | | | | |

| Please add any other comments you wish to make such as: Your impression of the overall effectiveness of the session, including the delivery, content as difficulties encountered. | nd | any |
|---|----|-----|
| difficulties effcountered. | | |
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Additional Support

If you require any additional support or resources, please visit the Lancashire County Council Safer Schools Moodle website: www.saferschools.lancsngfl.ac.uk

Equality and Diversity

Lancashire Fire and Rescue Service aims to deliver its education sessions in a non discriminatory way to every participant, including those from 'protected groups' as defined by the Equality Act 2010. If you feel this was not the case, please comment below. We will contact you for more details. For more information about The Equality Act 2010 and 'protected groups' please go to http://www.equalityhumanrights.com

If NO, please comment:

Thank you for spending time completing this form. Lancashire Fire and Rescue Service (LFRS) is committed to a cycle of continuous improvement and quality assurance and your feedback is important to us as part of this process. LFRS is committed to the fair and secure processing of personal information. We will use the information collected to improve our service delivery through sharing of this information with our partners and organisations acting on our behalf. If you object to this, please tick the box. \Box

Please keep the original for your records and return a photocopy of this form to:

Prevention Support – Road Safety, Lancashire Fire and Rescue Service Headquarters, Garstang Road, Fulwood, Preston, PR2 3LH Or

Email this form to: preventionsupport@lancsfirerescue.org.uk