

**Stepping back from stepping in**

Session title

**Why and What of Reablement**

Organisation	
Name	
Role	
Date	

*Please mark a 'tick' in the box which matches your response to the following statements.*

- 1. I have a better understanding of the ageing process and how to lessen the impact.**  
Strongly agree  Agree  Unsure  Disagree  Strongly disagree
- 2. I understand the importance of encouraging clients to participate in their daily activities.**  
Strongly agree  Agree  Unsure  Disagree  Strongly disagree
- 3. I understand how reablement can assist a client to achieve their goal/s.**  
Strongly agree  Agree  Unsure  Disagree  Strongly disagree
- 4. I have a better understanding of the role I play to assist clients to achieve their goal/s.**  
Strongly agree  Agree  Unsure  Disagree  Strongly disagree

*Please provide any additional comments or feedback below:*

---

---

---

---

---

---