



Evaluation Tool for Drowsy Driving Campaign

My agency is a:

- Hospital
- EMS-local government
- Commercial ambulance company
- Other

I am (select any):

- A nurse at a hospital
- An administrator at my agency
- An EMS provider
- A health education or media person at my agency
- Other

My agency conducted the drowsy driving campaign when?

(Date or days of campaign):

The components of the campaign that we used were (select any that you used)

- Press release
- Social media messages
- Photo library
- Table tents
- Hot cup holders with campaign logo
- Exhibit/display using the drowsy driving stand up banner
- Exhibit or display not using the drowsy driving stand up banner
- Article on drowsy driving for staff
- Article on drowsy driving for the public
- Suggested activities list
- Referral to the website
- Other: (please describe)

Which element of the campaign do you think worked the best to educate on this subject?

Which element of the campaign worked least effectively to educate on the subject?

If you used the table tents, where specifically did you use these? (select any)

Our agency's cafeteria tables

Coffee shop

Staff break room tables

Other

I didn't use them.

If you used the table tents, how many days did you use them?

How effective do you think the campaign was at reaching its intended audience?

(Scale of 1-5, with 1 being least effective and 5=most effective).

What would you recommend be added, deleted, or changed to the campaign materials to make the campaign more effective?

How likely are you to conduct this drowsy driving awareness and prevention campaign again at your agency? (1= least likely and 5=most likely):

Your name:

Your agency:

*Thank you for your interest and commitment to promoting safety
through participation in this campaign!*