

# Appendix F

## Illinois Oral Health Plan I

### Town Hall Meeting Evaluation Tool

1. The meeting format provided opportunity for input from all participants.  
Not at All 0 1 2 3 4 Very Much
2. The meeting facility was accessible and accommodating for the meeting.  
Not at All 0 1 2 3 4 Very Much
3. The meeting facilitator encouraged participation and input from all participants.  
Not at All 0 1 2 3 4 Very Much
4. The meeting adequately addressed the oral health needs of your community.  
Not at All 0 1 2 3 4 Very Much
5. I felt my voice was clearly heard.  
Not at All 0 1 2 3 4 Very Much
6. I had the opportunity to address the issues I felt are important.  
Not at All 0 1 2 3 4 Very Much
7. The meeting allowed me adequate time to voice my opinion.  
Not at All 0 1 2 3 4 Very Much
8. Please share any additional issues, thoughts, suggestions and recommendations you may have for the Statewide Oral Health Plan.