**TB Screening RTE Data Collection Tool**

**What do you understand about TB and its risk?**

**How did you find out about the screening/health promotion event?**

**Did you have any concerns /difficulties before attending the screening?**

**Do you feel the CXR /blood test were explained to you well?**

**Is there anything we could have done differently to encourage you or your friends to participate?**

**Do you feel comfortable with the next steps?**

**Other services available**

**Which of the wider services / facilities available were helpful to you? (Prompt – service list:**

* Vaccination team [ ]
* Substance misuse services [ ]
* Smoking cessation advice [ ]
* Housing, hostel, and employment advice [ ]
* Sexual health service [ ]
* Specialist Neighbourhood Practitioners – Engagement team [ ]
* Sexual Health Charity [ ]

**Of the wider services/facilities available do you wish any of these could have been provided in a better way?**

 **Are there any other services that you would have liked to have been here today?**