***Intergenerational Questionnaire***

***for visiting children***

***Date of visit:*** **School:**

***Project:*** e.g. Digital Heroes

1. ***How does visiting Sycamore Ward make you feel?***



1. ***Do you enjoy working with the patients?***
2. ***What do you like/ dislike about your visits?***
3. ***Do you have any worries about your visits?***
4. ***What are your favourite activities to do during your visits?***
5. ***How do you think your visits are helping the patients?***

**Thank you**

**Sycamore Ward ☺**