

Product Evaluation Form

*Thank you for taking part in the Posey Wireless Toilet Sensor product evaluation.
The following are questions about your experience using the wireless toilet sensor.*

RESPONDENT INFORMATION

Facility Name: _____ Unit: _____

Staff Member Name: _____ Today's Date: _____

*FOR EACH ELEMENT EVALUATED, RATE YOUR PERCEPTION OF THIS PRODUCT FROM STRONGLY AGREE TO STRONGLY DISAGREE.
PLEASE COMMENT TO SUPPORT YOUR RATING.*

PRODUCT PERFORMANCE	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	NOT APPLICABLE	COMMENTS
The wireless toilet sensor was easy to pair to the alarm						
The wireless toilet sensor was easy to place on the toilet						
The wireless toilet sensor was easy to test						
The instructions printed on the wireless toilet sensor were easy to read and understand						
The wireless toilet sensor improved my workflow						
The wireless toilet sensor was easy to integrate into my current falls management practices and protocols						
The QR code on the wireless toilet sensor was easy to access and utilize						
The instructions for use were clear and helpful						
The in-service training for the wireless toilet sensor was clear and helpful						
The wireless toilet sensor was easy to troubleshoot (if applicable)						
The wireless toilet sensor is better than my current solution (if applicable)						
I would like to see this product implemented at my facility						

ADDITIONAL FEEDBACK

1. Do you use any accessories with patient toileting? ☐ Yes ☐ No

If so, what accessories do you use?

2. The wireless toilet sensor was easy to use with accessories:

☐ Strongly Agree ☐ Agree ☐ Disagree ☐ Strongly Disagree ☐ Not Applicable

3. Is there anything else you would have liked to know before using the wireless toilet sensor with patients?

OTHER COMMENTS

If you have additional feedback after the pilot,
please contact your Sales Representative.

