

**Participant**

**Feedback Form**

**Dialysis Facility Tabletop Exercise**

**Earthquake**

# Participant Feedback Form

Thank you for participating in this exercise. Your observations, comments, and input are greatly appreciated, and provide invaluable insight that will better prepare our community against threats and hazards. Any comments provided will be treated in a sensitive manner and all personal information will remain confidential. Please keep comments concise, specific, and constructive.

## Part I: General Information

Please enter your responses in the form field or check box after the appropriate selection.

Name:

Agency/Organization Affiliation:

Position Title:

Years of Experience in Present Position:

Exercise Role: [ ]  Player [ ]  Facilitator [ ]  Observer [ ]  Evaluator

Number of Exercises Previously Participated in: [ ]  0 [ ]  1-5 [ ]  5-10 [ ]  15+

## Part II: Exercise Design

Please rate, on a scale of 1 to 5, your overall assessment of the exercise relative to the statements provided, with 1 indicating strong disagreement and 5 indicating strong agreement.

| **Assessment Factor** | **Strongly****Disagree** | **Strongly Agree** |
| --- | --- | --- |
| Pre-exercise briefings were informative and provided the necessary information for my role in the exercise. | 1 | 2 | 3 | 4 | 5 |
| The exercise scenario was plausible and realistic. | 1 | 2 | 3 | 4 | 5 |
| Exercise participants included the right people in terms of level of seniority or experience and mix of disciplines.  | 1 | 2 | 3 | 4 | 5 |
| Participants were actively involved in the exercise. | 1 | 2 | 3 | 4 | 5 |
| Exercise participation was appropriate for someone in my field with my level of experience/training. | 1 | 2 | 3 | 4 | 5 |
| The exercise increased my understanding about, and familiarity with, the capabilities and resources of other participating organizations.  | 1 | 2 | 3 | 4 | 5 |
| The exercise provided the opportunity to address significant decisions in support of critical mission areas. | 1 | 2 | 3 | 4 | 5 |
| After this exercise, I am better prepared to deal with the capabilities and hazards addressed. | 1 | 2 | 3 | 4 | 5 |

## Part III: Participant Feedback

1. **I observed the following strengths during this exercise:**

| **Strengths** | **Core Capability** |
| --- | --- |
|
|  | Facilities  |
|  | Human Resources Policies  |
|  | Continuity of Operations Plans  |
|  | Emergency Operations Plans |
|  | Policies and Procedures |

1. **I observed the following areas for improvement during this exercise:**

| **Areas for Improvement** | **Core Capability** |
| --- | --- |
|
|  | Facilities  |
|  | Human Resources Policies  |
|  | Continuity of Operations Plans  |
|  | Emergency Operations Plans |
|  | Policies and Procedures |

1. **What specific training opportunities helped you (or could have helped you) prepare for this exercise? Please provide specific course names if applicable.**

| **Training** | **Completed Prior to Exercise? (Y/N)** |
| --- | --- |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

1. **Which exercise materials were most useful? Please identify any additional materials or resources that would be useful for future exercises.**
2. **Please provide any recommendations on how this exercise or future exercises could be improved or enhanced.**