## **Participant Feedback Survey**



We extend our gratitude for your active involvement and valuable feedback during this tabletop exercise (TTX). Your observations, comments, and input are highly valued, offering crucial insight to enhance our emergency response. Your comments will be handled confidentially and with care. Kindly ensure that your comments are clear, specific, and constructive.

| Position Title: |  |  |  |  |
|-----------------|--|--|--|--|
|                 |  |  |  |  |
| Evaluator       |  |  |  |  |
|                 |  |  |  |  |

## **Exercise Design**

Please assess the exercise according to the provided statements, utilizing a scale of 1-5, where 1 signifies strong disagreement and 5 signifies strong agreement.

| Assessment   | N/A | Strongly<br>Disagree |   |   |   | Strongly<br>Agree |
|--|-----|----------------------|---|---|---|-------------------|
| The exercise scenario was feasible and closely aligned with real-world situations.   | 0   | 1                    | 2 | 3 | 4 | 5                 |
| The exercise objectives were clearly communicated and achievable.  | 0   | 1                    | 2 | 3 | 4 | 5                 |
| The briefings prior to the exercise were instructive and equipped me with the necessary information needed for my role during the TTX. | 0   | 1                    | 2 | 3 | 4 | 5                 |
| Engagement from participants was evident throughout the exercise.  | 0   | 1                    | 2 | 3 | 4 | 5                 |
| Rate your level of engagement and participation during the exercise.   | 0   | 1                    | 2 | 3 | 4 | 5                 |
| The resources provided were sufficient for responding to the exercise scenario.  | 0   | 1                    | 2 | 3 | 4 | 5                 |
| The exercise encouraged teamwork and communication among participants from distinct roles and/or departments.                          | 0   | 1                    | 2 | 3 | 4 | 5                 |
| I am now more confident in my ability to respond effectively to a real-world scenario.   | 0   | 1                    | 2 | 3 | 4 | 5                 |

<sup>\*</sup>Optional: Providing this information allows additional data gathering and opportunities for follow-up but is not required.

## Recommendations

| 1. | What do you feel was most successful?  |
|----|--|
|    |  |
| 2. | What changes would you make to improve this exercise?  |
|    |  |
| 3. | Did you encounter any challenges or obstacles that impacted your ability to participate effectively?   |
|    |  |
| 4. | Which specific training experiences aided your preparation prior to this exercise, or which training could have potentially been beneficial? |
|    |  |
| 5. | Please provide recommendations for improving this exercise, as well as recommendations for future exercises.                                 |
|    |  |
|    |  |
| 6. | What plans, policies, or standard work should be updated?  |
|    |  |
|    |  |