EMERGENCY PREPAREDNESS ACTUAL EVENT-TEST-DRILL EVALUATION FORM

Sun Parlor Home:

Emergency Procedure/Code tested:

Date/Time: Start:	Stop:
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Description of Actual Event/Drill/Exercise/Scenario being tested (*example: Annual full scale exercise for Code Black Bomb Threat/suspicious package; drill to include test of building lockdown procedure, fan out list. Taking place on day shift; tabletop follow ups w/evening and night shifts.* **OR** *Documenting actual event Code Blue Medical Emergency.*):

Participants

Name or Position	Role	Name or Position	Role

Fan Out List used:

□ Yes □ No

XVIII-C-10.00(a)

Partner/Agency Name	Role	Feedback Provided	Declined to Provide Feedback

(External) Community Resources – Partners Used or Contacted in Exercise Plan

What areas of the Emergency Preparedness Plan implementation worked well?
What areas of the Emergency Preparedness Plan require Improvement? (complete Action
Plan)

Debrief	Completed By:		Date		Time
Posted fo review	r team member	Discussion at tear meeting	n member	Other	:

Action Plan	Resp. Party	Completion & Date

Emergency Procedure/Code Tested:

Date:

Signatures

Team Members (Names) Participating	Signatures