



COVID19 L&D Drills Evaluation Form

Name _____ Profession: _____

Please evaluate:	Excellent	Above Average	Average	Below Average	Poor
Overall Course	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Drills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Quality of Debriefings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please rate the following:	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
I learned things that will help me better care for a pregnant woman on labor and delivery with suspected COVID19					
I can better apply strategies to escalate care for a pregnant woman with suspected COVID19 according to my institutional guidelines					
I gained skills regarding how to keep myself and my colleagues safe by limiting exposure while caring for a patient with suspected COVID19					
I know where my PPE equipment is on my unit					
I learned valuable team organization skills to help our communication and coordination					
This activity met stated objectives**					
This activity will have an impact on how I practice**					

Please note anything we did well or that we should change:

Thank you so much for participating! Stay safe and healthy!