



Simulation exercises: evaluation forms

No.16

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Introduction

A variety of forms are necessary to plan the evaluation, capture the observations and analyse the results.

Each event differs in exercise type, methodology and objectives.

Forms should be objective, simple and specific to the exercise.

Data may be collected during the exercise (e.g. using data collection forms and issue logs) or afterwards (e.g. using self-assessment questionnaires, surveys or evaluator meetings).

Examples of forms used by different organizations are provided.

Evaluation plan – collection methods and tools

A form used to list the collection methods and forms to be used during the exercise being planned.

Exercise Name:					
Location:					
Date/time:					
Evaluation Ref. No.	Acti obje	vity/ ective	Collection method*	Collection tool/form	Comments

^{*}Examples of collection methods include: observation during activities, participant feedback questionnaire.

Evaluation plan - observation checklist for a functional exercise

A form used by each evaluator to indicate where they should locate themselves at different times during the exercise, in order to observe specific actions/decisions.

Exercise name and date:			Evaluator name:	
Objective	Action/decision	Players to observe	Location	Expected time
	to look for	observe		

Example of a data collection form (1a)

A form used by each evaluator to record their observations during the exercise and their analysis after the exercise.

Part A: Observations

Exercise name:	
Exercise location:	
Date/time:	

Objective 1:	Assess the Operations Manual procedures to identify, select and prepare personnel for deployment under the Shared Resources Arrangement		
Performance indicator 1.1:	The operations manual is accessible and supports the ability of countries to identify, select and prepare personnel for deployment		
Observations	Analysis (to be completed after the exercise)		
(based on Q1-7 in checklist in Pa	d on Q1-7 in checklist in Part C)		

Objective 1:	
Performance indicator 1.2:	
Observations	Analysis (to be completed after the exercise)
(based on checklist in Part C)	

Example of a data collection form (1b)

Part B: Observations Summary - summarise observations or record additional information

Evaluator name:		
Contact number:		

Example of a data collection form (1c)

Part C: Checklist

Expected Actions	Manual reference	Time/date	Observations	Analysis
1. Formal request for assistance sent by National Authority of Lead Agency to donor agencies with deadline for response of 5 pm 23 Nov	Appendix 3	12 pm, 22 Nov		
2. Initial response from donor agencies received by recipient Authority		5 pm 23 Nov		
3. Recipient Authority considers donor agency responses and invokes the Shared Resources Arrangement. Donor agencies notified of Recipient Deployment Coordinator (RDC) and requests nomination of Donor Deployment Coordinator (DDC) (Deadline 10 am 25 Nov)	Appendices 4 and 5, and Section 7.1	5 pm, 24 Nov		
4. Donor agencies nominate a DDC and advise recipient Authority	Section 7.1	10 am, 25 Nov		
5. Donor agencies request volunteers and screen personnel for the roles requested.	Section 7.2	Ongoing from 24 Nov		
6. RDC requests DDC nominations and details of personnel (Deadline 5 pm 28 Nov)	Appendix 6			
7. RDC receives nominations and details of personnel from donor agencies		5 pm, 28 Nov		

Example of a data collection form (2)

A form used by each evaluator to record their observations during the exercise.

Exercise name	
Date	
Function/task being exercised	

N.B. Tick relevant box on right (Y= Yes P= Partially N= No)

Ref	Observations Rating					
1	Is there a written procedure for this task?	Υ	Р	N		
	Comment:					
2	Was the procedure followed?	Υ	Р	N		
	Comment:					
3	Did the actual outcomes match the expected outcomes? Please relate to specific outcomes.	Υ	Р	N		
	Comment:					
	General comments:	<u> </u>				
Eval	uator name:					
Cont	act number:					

Example of a data collection form (3a)

A form used by each evaluator to record their observations during the exercise.

Exercise name:							
Exercise loca	tion:						
Date/time:							
Evaluation Ref No.		Observations	Rating				
1	Donning	(putting on) of personal protective equipment	Р	S	М	U	N
	Commer	nt:					
2	Clinical e	examination	Р	S	М	U	N
	Commer	nt:					
3	Ageing o	flesions	Р	S	М	U	N
	Comment:						
4	Sampling P S M			М	U	N	
	Comment:						
5	Epidemi	ological enquiry	Р	S	М	U	N
	Comment:						
6	Doffing (removing) of personal protective equipment			S	М	U	N
	Comment:						
Evaluator na	me						
Contact num	ber						

Key: Performed without Challenge (P)
Performed with Some Challenges (S)
Performed with Major Challenges (M)
Unable to be Performed (U)

Not observed (N)

Example of a data collection form (3b)

Ratin	ngs definitions			
Performed without challenges (P)	The targets and critical tasks associated with the core function were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities.			
	Performance of this activity did not contribute to risks to health and/or safety risks for the public or for responders, and did not impact on biosecurity.			
	The activity was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.			
Performed with some challenges (S)	The targets and critical tasks associated with the core function were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities.			
	Performance of this activity did not contribute to health and/or safety risks for the public or for responders, and did not impact on biosecurity.			
	The activity was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.			
	However, opportunities to enhance effectiveness and/or efficiency were identified.			
Performed with major challenges (M)	The targets and critical tasks associated with the core function were completed in a manner that achieved the objective(s), but some or all of the following were observed:			
	 demonstrated performance had a negative impact on the performance of other activities; 			
	 contributed to additional health and/or safety risks for the public or for responders, or to biosecurity risks; and/or 			
	 was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws. 			
Unable to be performed (U)	The targets and critical tasks associated with the core function were not performed in a manner that achieved the objective(s).			

Example of a data collection form (4)

A form used by each evaluator to record their observations during the exercise.

Exercise na	me:			
Exercise loc	ation:			
Date/time:				
Evaluation Ref No.	Evaluation code*	Inject No.	Evaluation question	Comments
			Theme - Communications	
2	C1	113	Were statements/briefing prepared in time to meet national communication needs?	
Evidence				
3	C2	116	Were messages coordinated on human health/animal health/food safety?	
Evidence				
			Theme - Legislation	
4	L1	203	Was the legal basis for policy decisions clear?	
Evidence		·		
5	L2	210	Were the international reporting requirements to OIE met?	
Evidence				
Evaluator n	ame			
Contact nui	mber			

^{*}Evaluation Code e.g. C=communications, L=legislation. May also include a code for strategic, tactical or operational level.

Example of a data collection form (5a)

This form uses the Observation-Analysis-Judgement-Recommendation (OAJR) methodology. The form is used by each evaluator to record their observations during the exercise and their analysis after the exercise.

Part A: Evaluation checklist

Exercise name:					
Exercise location:					
Date/time:					
1. Evaluation question:	Rating:				
			+/-	+	++
Comment:			+/-		
	☐ Not appli	cable			
2. Evaluation question:	Rating:				
Zi Ziaidaton questioni					
Comment:		_	+ / -	+	++
	☐ Not appli	cable			
3. Evaluation question:	Rating:				
		_	+ / -	+	++
Comment:		<u>-</u>			
	□ Not appli	cable			
4. Evaluation question:	Rating:				
		_	+/-	+	++
Comment:					
	☐ Not appli	cable			
Evaluator name:					
Contact number:					

Example of a data collection form (5b)

Part B: Evaluation log

Exercise name:				
Exercise location:				
Exercise date:				
Key observation the	Observation (I saw/heard)	Analysis (Due to this/as a consequence)	Judgement (In my opinion)	Recommendation (In future I suggest)
e.g. coordination	Response team leaders were not easily identifiable to other personnel working on the site.	Time was lost in trying to find the relevant team leaders on the site.	Team leaders should be easily identifiable.	Team leaders could be provided with different colour clothing or a tabard with their role printed on it.
Evaluator name:				
Contact number:				

Example of a data collection form (5c)

Part C: Final narrative summary

Exercise name:			
Exercise location:			
Date/time:			
Observation: (I saw/heard)			
Analysis:			
(Due to this/as a cons	equence)		
Judgement: (In my opinion)			
Recommendation:			
(In future I suggest)			
Evaluator name:			
Contact number:			

Example of a data collection form (5d)

Comments – any other notable comments, based on your experience.				
Evaluator name:				
Contact number:				

Event response form

A form used by each control team member to record their observations during the exercise.

Exercise name	9						
Exercise locat	ion						
Exercise date							
Inject no.	Time	Received by	Responded by	Objective/		tion	Comments on action taken
from MEL	received			Theme*	Expected (tick)	Not expected (tick)	
Participant na	ime	1	1		1	1	
Signature							
Role							
Contact numb	er						

^{*}Theme e.g. communications, legislation, policy, finance, information management.

Issues log

A form used by participants to record issues in relation to the organization of the exercise (planning, conduct or evaluation).

Exercise name			
Exercise locat	ion		
Exercise date			
Role		Player/Controller/Facilitator/Evaluator/Obs	server
Time	Inject number	Issue	Analysis (to be completed after the exercise)
Participant name			
Signature			
Contact number			

Exercise evaluation questionnaire – participant feedback form

A self-assessment questionnaire used by participants to give feedback after the exercise.

Exercise name	
Exercise date	
Participant name*	
Participant title*	
Agency*	
Role	Player/Controller/Facilitator/Evaluator/Observer

^{*}May not be required

PART A: Feedback on the design and conduct of the exercise

Statement (examples)		A:	ssessmei	nt	
	Strongly disagree	Somewhat disagree	Neither agree or disagree	Somewhat agree	Strongly agree
1. I received adequate information to assist me in preparing for and participating in the exercise.	1	2	3	4	5
2. The exercise resources and logistics were appropriate for this exercise.	1	2	3	4	5
3. I understood my role in the exercise.	1	2	3	4	5
4. The exercise control ran smoothly in a coordinated and structured manner.	1	2	3	4	5
5. The exercise scenario was plausible and realistic.	1	2	3	4	5
6. The control team were knowledgeable about the area of play and kept the exercise on target.	1	2	3	4	5
7. Participation in the exercise was appropriate for someone in my position.	1	2	3	4	5
8. The exercise provided an opportunity for the players to <activity>.</activity>	1	2	3	4	5
9. Players were appropriately and fully engaged during the day.	1	2	3	4	5
10. After this exercise, I believe my agency is better prepared to deal successfully with the scenario that was exercised.	1	2	3	4	5

Please share any	v recommendations v	vou have to im	prove similar	exercises in the future.

Recommendations for improvement in the design and conduct of the exercise	

PART B: Strengths and areas for improvement

Based on the exercise, what are the main (*or top three) strengths and areas for improvement (e.g. in policies, plans, procedures, equipment, training)?

	Strengths and areas for improvement
Strengths	
Areas for	
improvement	

^{*}Can be limited to three (e.g. when the number of participants is very large)

ALTERNATIVE PART B: Recommendations and corrective actions

1.	Based on the exercise today and the tasks identified, list the main (or top three) areas that need improvement.
2.	Identify the corrective actions that should be taken to address the issues identified in 1 above. For each corrective action, indicate if it is a high, medium, or low priority.
3.	Describe the corrective actions that relate to your area of responsibility. Who should be assigned responsibility for each corrective action?
4.	List the relevant equipment, training, policies, plans, and procedures that should be reviewed, revised, or developed. Indicate the priority level for each.

References and further reading

- 1. Australian Department of Agriculture and Water Resources (2017) <u>Biosecurity emergency</u> management: Evaluation and lessons management guide
- 2. Federal Emergency Management Agency (2020) Evaluation templates
- 3. Irish Government Department of Housing, Planning and Local Government (2016) <u>A Framework for Major Emergency Management Guidance Document 4: A Guide to Planning and Staging Exercises</u>
- 4. Netherlands Institute for Physical Safety (2009) EU FloodEx field exercise evaluation report
- 5. Swedish Civil Contingencies Agency (2011) Handbook on evaluation of exercises
- 6. Swedish Civil Contingencies Agency (2017) Exercise guidance method booklet Exercise evaluation
- 7. United Kingdom Animal and Plant Health Agency templates (personal communication)
- 8. World Health Organization (2009) Emergency exercise development Unit 8
- 9. World Health Organization (2017) Simulation exercise toolbox