Evaluation Form

Preparing for COVID-19 Community Spread – Response Planning Session Workshop – March 9, 2020

Please indicate your level of agreement with the statements listed below

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Agree | Agree | Neutral | Disagree | Strongly Disagree |
| 1. The purpose of the session was clear to me | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |
| 1. The topics covered and discussion were relevant to my work | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |
| 1. The materials distributed were helpful | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |
| 1. The program for the workshop was well spaced within the allotted time | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |
| 1. There were appropriate levels of discussion on issues | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |
| 1. My respective role(s) in a coordinated community response is clear | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |
| 1. I feel better prepared to respond to a potential community spread of COVID-19 | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |

Please rate the quality of the meeting elements listed below

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Excellent | Very Good | Good | Fair | Poor |
| 1. Visuals | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |
| 1. Acoustics | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |
| 1. Meeting space | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |
| 1. Handouts | ⃝ | ⃝ | ⃝ | ⃝ | ⃝ |

We welcome any additional comments, suggestions and feedback you may have

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