



## Evaluation

<b>Date:</b>											
<b>1. Your position in the ICU:</b>	(Please circle)										
<b>Nurses</b>	Student	<2yrs	> 2yrs	Senior(Access/CNS/CNE/NUM)							
<b>Doctors</b>	Student	RMO/SRMO	Trainee/AT	Specialist							
Other (please specify)											
<b>2. Were you a participant or an observer?</b>	Participant		Observer								
<b>Please indicate your opinion by circling ONE of the numbers on each line</b>											
<b>3. Will the training be relevant in your day to day work?</b>											
Irrelevant	1	2	3	4	5	6	7	8	9	10	Highly relevant
<b>4. Did the training meet its objectives?</b>											
Met none of the objectives	1	2	3	4	5	6	7	8	9	10	Met all the objectives
<b>5. Were the teaching strategies effective?</b>											
Not at all	1	2	3	4	5	6	7	8	9	10	Very effective
<b>6. Was the teaching of a high standard?</b>											
Poor teaching	1	2	3	4	5	6	7	8	9	10	Excellent teaching
<b>7. Were resources adequate?</b>											
Poor resources	1	2	3	4	5	6	7	8	9	10	Excellent resources
<b>8. Would you recommend we run training like this again?</b>											
Not at all	1	2	3	4	5	6	7	8	9	10	Definitely
<b>9. Overall rating of the training?</b>											
Poor	1	2	3	4	5	6	7	8	9	10	Excellent

10. Anything particularly good about the training?

11. What should we do differently next time?

12. Do you have any ideas for new scenarios?

Please make further comments overleaf if necessary. Many thanks for your help!