**Emergencies – Rehearsal Evaluation**

Emergency Scenario

Emergency Procedure Implemented

Rehearsal Date

**Evaluation Participants** <insert individual names or name of group/team/area>

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**What went well?**

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**What could be improved/might be done differently?**

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**What actions will we take?**

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| --- | --- | --- |
| *Action* | *Person responsible* | *By <insert date>* |
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