**Role Play Evaluation**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Strongly agree** | **Agree** | **Neither agree or disagree** | **Disagree** | **Strongly disagree** |
| This role-play was useful to my work.  |  |  |  |  |  |
| The leader of the role-play explained the project in an easy to understand manner. |  |  |  |  |  |
| This situation was realistic. |  |  |  |  |  |
| I felt safe during the role-play. |  |  |  |  |  |
| This role-play will help me when talking with a doctor’s office or emergency personnel. |  |  |  |  |  |
| Practicing role-plays could help me in my work. |  |  |  |  |  |
| I am confident in using SBAR when making a call in an urgent/emergency situation.  |  |  |  |  |  |

Do not write your name on this page.

Thank you for taking the time to give your valuable feedback! Your thoughts are very important on how helpful, or not, this role play is for caregivers in assisted living or residential care facilities.