



Jewish Outdoor Escape 2022

# LEADER DEBRIEF FORM

<b>Activity:</b>	<b>Transportation:</b>
<b>Leader:</b>	<b>Co-Leader:</b>
<b>Driver 1:</b>	<b>Driver 2:</b>
<b># Radios:</b>	<b>First Aid Kit #:</b>

Check the appropriate boxes if there were any problems with or you:

**Activity:**

- ☐ **Getting Lost**
- ☐ Bad directions
- ☐ Inadequate time
- ☐ Keeping to schedule
- ☐ Cut hike short

**MOCA provided Equipment:**

- ☐ First Aid kit supply level
- ☐ **First Aid Kit used**
- ☐ Radios

**Participant:**

- ☐ Sick/Injured
- ☐ Exhausted
- ☐ Out of water/food
- ☐ Behavior

**Transportation:**

- ☐ **Getting lost**
- ☐ Driver
- ☐ Late/Did not come

**Vendor Issues**

- ☐ **Broken Equipment**
- ☐ Price difference
- ☐ Other

**Miscellaneous:**

- ☐ No shows
- ☐ Added Attendees
- ☐ **Opened the medical envelope**
- ☐ Other issues

**An incident report is required for the items listed in red unless a waiver is obtained.**

The rest of this form is for comments.

- Please provide a brief assessment of how well the activity went.
- Briefly describe all problem areas. (We will ask for more details if needed.)
  - Do not name a troublesome participant here: Save that for the incident report.
- Please list anything used from the first aid kit, so they are resupplied. Please try to resupply used items yourself.
- Use the other side or a separate sheet if more room is needed.