# Care Conference Evaluation for Team Members

Please help us evaluate our care conferences so we can make improvements. It should take no longer than five to ten minutes to complete. The responses will be combined and shared as a summary only. No individual responses will be reported. Please return your evaluation to FirstName LastName.

*Please indicate your level of agreement with the following statements*

*regarding the care conferences you have attended.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Somewhat Disagree | Neither Agree or Disagree | Somewhat Agree | Strongly Agree |
| The care conference checklist provides enough information about how to prepare for the conference. |  |  |  |  |  |
| There is adequate time to review care and discuss care needs. |  |  |  |  |  |
| The appropriate team members attend and contribute to the care conference. |  |  |  |  |  |
| Resident goals of care are always identified. |  |  |  |  |  |
| Resident strengths are identified. |  |  |  |  |  |
| I would like to see other assessment tools used to identify the resident’s current status (CAPs, Frailty scale, etc.). |  |  |  |  |  |
| I believe the resident/family members found the meeting useful. |  |  |  |  |  |

1. What is working well in our care conferences?
2. What could be improved in our care conferences?
3. Would you like to see other team members attend care conferences?

5. Would you like to see changes made to the current care conference forms?

1. Additional comments:

**Thank you for participating!**