# Care Conference Evaluation for Team Members

Your feedback helps us improve our Care Conferences! Please note that responses will be combined and shared as a summary only - no individual responses will be reported. Completed evaluations can be returned to FirstName LastName.

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

*regarding the Care Conferences you have attended.*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Strongly Disagree | Somewhat Disagree | Neutral | 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 Care Conferences. |  |  |  |  |  |
| Resident goals of care are always identified. |  |  |  |  |  |
| Resident strengths are identified. |  |  |  |  |  |
| I’d 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. Are there other team members you’d like to see attending Care Conferences?

5. Would you like to see changes made to the current Care Conference forms?

1. Any additional comments you’d like to add?

Thanks for your feedback!