



RPSGB Branch Meeting Report Form

The RPSGB evaluates its activities to ensure that it continues to meet the needs of its members. Following an RPSGB Branch meeting, Branch Secretaries are kindly requested to complete this form based on the collated feedback forms received from members.

We appreciate your time in collating and returning this data.

Please return the completed form to the Membership unit at the RPSGB.

BRANCH

DATE OF MEETING

VENUE

NUMBER OF ATTENDEES

NAME OF SPEAKER

NUMBER OF FEEDBACK FORMS RECEIVED

TITLE OF TALK

(include RPSGB speakers and Members of Council)

1. What were the set objectives of the meeting?					
2. Did the objectives of those that provided feedback match the set objectives of the meeting?					
<input type="checkbox"/> Yes <input type="checkbox"/> No					
If no, please give details:					
3. Please indicate the number of respondents and the extent to which they agreed/disagreed with the statements below:					
i. My objectives were met	Strongly disagree	Disagree	Undecided	Agree	Strongly agree
ii. This meeting contributed towards my continuing professional development	Strongly	Disagree	Undecided	Agree	Strongly agree
iii. The presentation was relevant to my practice	Strongly disagree	Disagree	Undecided	Agree	Strongly agree
4. How did the attendees rate the quality of the presentation?	Extremely poor	Below average	Average	Good	Extremely good
5. How did the attendees rate the venue and refreshments?	Extremely poor	Below average	Average	Good	Extremely good
6. Of the attendees, how many came from the various practice areas?:					
		Community.....	Hospital.....	Academic.....	
		Primary care.....	Industrial.....	Other.....	

