

## MEETING EFFECTIVENESS INVENTORY (MEI)

Please answer the following questions about this meeting. Feel free to add comments.

TYPE OF MEETING: (circle one) Consortium Work Group

NAME OF WORK GROUP: \_\_\_\_\_

DATE OF MEETING: \_\_\_\_\_ NAME: \_\_\_\_\_

1. CLARITY OF GOALS FOR MEETING:

Poor (e.g., unclear, diffuse, conflicting unacceptable)	Fair	Satisfactory	Good	Excellent (e.g., clear, shared by all, endorsed with with enthusiasm)
1	2	3	4	5

Comment: \_\_\_\_\_

2. GENERAL LEVEL OF PARTICIPATION IN THE MEETING:

Poor (e.g., people seemed bored or distracted, lack of verbal participation)	Fair	Satisfactory	Good	Excellent (e.g., all paid attention, all participated in the discussion)
1	2	3	4	5

Comment: \_\_\_\_\_

3. WHO CHAIRED THE MEETING?

- Chairperson
- Vice chairperson
- Staff
- Committee member



8. **PROBLEM SOLVING/CONFLICT:**

<b>Problems/conflict not resolved</b>	<b>No conflict</b>	<b>Problem/conflicts resolved</b>
<b>1</b>	<b>2</b>	<b>3</b>

9. PLEASE CHECK WHY CONFLICTS/PROBLEMS WERE NOT RESOLVED:

- Conflict avoided, not discussed
- Members argued with one another
- Other (specify): \_\_\_\_\_
- No conflict - N/A

10. **ORGANIZATION OF MEETING:**

Poor (e.g., chaotic, poorly organized)	Fair	Satisfactory	Good	Excellent (e.g., well organized, went smoothly)
1	2	3	4	5

Comment: \_\_\_\_\_

11. **PRODUCTIVITY OF THE MEETING:**

Poor ( not much accomplished, wasted time)	Fair	Satisfactory	Good	Excellent (much accomplished good use of time)
1	2	3	4	5

Comment: \_\_\_\_\_