

VI. MEETING EVALUATION

Caseworker Name: _____

Date: _____

Please indicate if you are (please check one):

Birth Parent _____

Foster Parent _____

Please give a numeric score to the following 6 questions

1=Strongly disagree

2=Disagree

3=Somewhat Agree

4=Agree

5=Strongly Agree

1. The meeting I attended provided me with helpful information. Score _____

2. I had a chance to share information. Score _____

3. The meeting was focused on the child. Score _____

4. The meeting lessened any anxiety/ uncertainty I may have had about who my child is living with. Score _____

5. My questions, if I had any, were answered for the most part. Score _____

6. Icebreaker meetings are generally helpful. Score _____

Did at least one child in care attend the Icebreaker meeting (please check one): Yes _____ No _____

If yes, please indicate the number of children for each age group:

Ages: 0-5 _____ 6-10 _____ 11-15 _____ 16-18 _____

General Comments:

Please hand the meeting evaluation to the front desk when you leave

Admin: Scan to RR Drive → Icebreaker Meetings & Comfort Calls → Scanned Icebreaker Evaluations