**Community Engagement Advisory Network (CEAN) Member Reflection Tool –For CEANS**

This tool is for CEAN members who would like to do a self-evaluation of their impact and contributions to a committee or project. This is not a mandatory tool, but something to assess the impact a CEAN member has and inform continued development of the advisor role on the committee. The questions below are a guideline and can be adapted as you see fit. It is recommended that you use this tool in conjunction with the Committee Chair/Liaison self-reflection tool. If you have questions or require any support, please get in touch with ce@vch.ca.

Committee Name:

Name of Committee Liaison:       Name of CEAN Member:

Date:

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| --- | --- |
| What do you feel the committee/project is hoping to accomplish by having a CEAN member involved ? | [ ]  Include patient/family perspective in planning and decision making[ ]  Encourage members of the project/committee to always consider the patient/family voice throughout its work[ ]  Make better decisions related to the project with the help of patient/family advisor input Other (include specific examples where advisor voice is needed):      |
| In your opinion, has the committee achieved what it hoped to accomplish by having a CEAN member involved? | 1 [ ]  2 [ ]  3[ ]  4 [ ]  5[ ] Not at all Somewhat Yes completely  Achieved  |
| Do you feel your participation as a CEAN member has had an impact? | [ ]  Not really [ ]  Somewhat [ ]  Highly ImpactfulOther:       |
| What are some examples of the impact that you have had on the committee? |       |
| Name three specific strategies that you have experienced that successfully made you feel part of the committee |       |
| How engaged do you feel on the committee? | 1[ ]  2[ ]  3[ ]  4 [ ]  5[ ] Not at all Somewhat Very Engaged Engaged |
| If very engaged, what do you think contributed to that feeling ? |       |
| If not very engaged, what could help you feel more engaged? |       |
| Share examples of good experiences you have had while on this committee |       |
| Share examples of any challenges you have experienced while on committee  |       |
| Share suggestions for improvement regarding your working with this committee |       |
| Overall, how do you feel about your involvement with this committee? | 1 [ ]  2 [ ]  3[ ]  4[ ]  5[ ] Not good Okay Very good  |
| Additional Questions:      |  |
| Other Comments: |       |

Thank you for filling out this tool.