# **Service/Rotation Meeting Agenda**

Name of Rotation/Service:

Rotation/Service Director:

Program Director:

Other attendees:

Provide an overview of the rotation/service. (i.e., patient numbers, percentage of outpt/inpt, types of procedures)

*Insert response*

What changes were made to the rotation/service based on last year’s meeting?

*Insert response*

What are the current trends in the feedback from the trainees (aggregate data for your rotation/service was emailed)?

*Insert response*

What concerns do your faculty/staff have about the rotation/service?

*Insert response*

Discuss the proposed improvement plans for the next year? (NOTE: These will be discussed at the upcoming PEC meeting)

*Insert response*

