



Mountain Plains Health Consortium Staff Development Directors



Phone: 605-720-7117; Fax: 605-720-7119; E-mail: heds@heds.org

The upcoming planning meeting is for Staff Development Directors or other educational planners from your facility to attend. Your feedback is VERY valuable to us in determining the in-services we provide.

As a reminder: Those attending the MPHSC SDD Planning Meetings will decide the programs to be hosted in that area. If you are unable to attend, please designate someone from your facility to attend in your place.

November 17, 2009

10:00 am to 2:00 pm

(Lunch included)

Mueller Civic Center

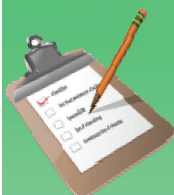
801 South 6th Street

Hot Springs, SD 57747

605-745-4140

The *purpose* of the Needs Assessment, page 2, is to assist us in developing and providing educational opportunities that will enhance the services you provide to your clients.

Recommended process for the completion of the Needs Assessment Form



1. Copy or obtain the needs assessment off the MPHSC web page: www.heds.org; click on "calendars", then click November 2009, then click *Needs Assessment on the November 17, 2009 date*.
2. Distribute the *Needs Assessment* out to the pertinent departments heads, key committees, or Executive Staff for their input.
3. All department heads, key committees, or Executive Staff discuss what is to be determined as topics for next live workshops.
4. The SDD will compile and tally up the topics on the Needs Assessment.
5. The SDD will return the top six topics and/or all the forms to MPHSC by November 2, 2009.
6. Needs Assessment is on page 2.

NOTE: Please use discretion on who should receive these surveys, as MPHSC can provide CEUs for Nursing, NHA, and health care workers.

Needs Assessment

Please return this form to your Staff Development Director, who will compile and record all results from staff. Next, the SDD will return the forms to MPHC by November 2, 2009.

Phone : 605-720-7117; fax: 605-720-7119 ; email: heds@heds.org; or regular mail:

Reneé Foos, Clinical Education Manager; MPHC; PO Box 187; Fort Meade, SD 57741.

The requested topics from all the participating facilities will be prioritized at the November 17, 2009 meeting.

Thank you for your cooperation.

***PLEASE LIST NO MORE THAN SIX TOPICS
THE LIST IS ASSUMED PRIORITIZED***

Name of Facility _____ *Department* _____

1	Topic: Purpose: Target Audience:
2	Topic: Purpose: Target Audience:
3	Topic: Purpose: Target Audience:
4	Topic: Purpose: Target Audience:
5	Topic: Purpose: Target Audience:
6	Topic: Purpose: Target Audience:

***As always, the priorities will be determined at the SDD meetings.
We are looking forward to working with you.***