**MEDICAL LEADERSHIP DEVELOPMENT TOOL**

**CHAIRING A MEETING**

This Medical Leadership Development Tool on ‘Chairing a Meeting’ has been designed to help you develop techniques to chair any type of meeting effectively, for example, a multidisciplinary clinical meeting, a journal club or a more formal committee meeting. You could use this tool in various ways:

* This tool could serve as a reminder checklist before tour meeting. Use the form to reflect on your performance afterwards – remember to note any ideas to help with your next attempt
* Alternatively, or in addition to, you could ask a colleague or supervisor to feed back to you after the meeting and have a discussion afterwards
* Although specifically developed for chairing a meeting, lessons from using the tool can be applied to other scenarios that involve facilitation
* You can use this tool many times to continually develop your chairing skills

One of the major aspects of chairing a meeting effectively is the ability to engage and facilitate a discussion at the same time as keeping everyone to the agenda. A quick note which may help you before you first embark on this development tool is that effective communication is not all about what you say; how you say it is very important! It is often quoted that, in face to face communication, the meaning of a message is communicated by:

* Your words – 7% of what was liked in a communication
* Your tone of voice – 38% of what was liked in a communication
* Your body language – 55% of what was liked in a communication

Mehrabian, Albert (1971). *Silent Messages* (1st ed.). Belmont, CA: Wadsworth

**Brief notes for peer assessor giving feedback:**

* This tool is best used when the peer assessor is present and listening to the entire meeting, from start to finish
* It is desirable that the assessor is not actively participating in the meeting, but this may not be possible due to practical reasons and does not preclude the tool from being used for feedback
* Please ensure that you are sat in a location where you will be able to observe the chair and make particular note of their communication
* Use the checklist and the comments boxes to write down your comments





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|  |  |
| --- | --- |
| **Name of Doctor:** | **Date:** |
| **Meeting:** | **Time:** |
| **Duration:** | **Group:** |

You can use the checklist below to self-assess your own skills at chairing a meeting, or you can ask a trainer, supervisor or colleague to complete the assessment for you.

**MEETING PREPARATION**

**Please tick the appropriate boxes or mark N/A if not applicable**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Needs further development** | **Achieved** | **Comments** |
| **1. Sets a clear agenda & timescale for the meeting** |  |  |  |
| **2. Circulates key documents prior to the meeting** |  |  |  |
| **3. Arrives on time** |  |  |  |
| **4. Provides spare documents for the meeting** |  |  |  |
| **5. Checks & adjusts layout of the room** |  |  |  |

**ENVIRONMENT & INTRODUCTION**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Needs further development** | **Achieved** | **Comments** |
| **1. Welcomes, introduces self & invites introductions** |  |  |  |
| **2. States purpose & objectives of meeting** |  |  |  |
| **3. Establishes timeframe** |  |  |  |

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**FACILITATION**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Needs further development** | **Achieved** | **Comments** |
| **1. Confirms/establishes order of agenda items** |  |  |  |
| **2. Summarises key agreements/decisions/action points after each agenda item** |  |  |  |
| **3. Identifies & confirms valid action points** |  |  |  |
| **4. Attitude/behaviour encourages group interaction** |  |  |  |
| **5. Keeps group to task (i.e. purpose of the meeting)** |  |  |  |
| **6. Effectively manages group participation** |  |  |  |
| **7. Uses effective listening skills** |  |  |  |
| **8. Ensure voice projection** |  |  |  |
| **9. Uses eye contact appropriately** |  |  |  |
| **10. Keeps to time** |  |  |  |
| **11. Uses visual aids (if any) appropriately** |  |  |  |
| **12. Overall performance in facilitation** |  |  |  |

**CLOSURE**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Needs further development** | **Achieved** | **Comments** |
| **1. Clear closure indicators to keep meeting to time** |  |  |  |
| **2. Invites any other business** |  |  |  |
| **3. Terminates session with a summary of objectives & links to future sessions** |  |  |  |

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|  |
| --- |
| **Please note any suggestions for improvement and action points:** |

|  |
| --- |
| **Please note any aspects which were especially good:** |

**Name of Doctor chairing:** **Signature:**

**Name of peer assessor giving feedback:** **Signature:**