

HARINGEY COMMUNITY & POLICE CONSULTATIVE GROUP

Ward Panel Chairs Feedback Form

Ward Name:

Delegate Name:

Telephone:

Email Address:

Did your Ward achieve the agreed priorities?

Yes No Partially

Are there any issues that concern you?

Your comments:

Meeting	Very Regular (twice a weekly)	Regular (once a month)	Often bi monthly	Occasionally
How often are your meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	1-5	5-10	10-15	15-25
On average how many people attend the meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Your Panel	Excellent	Very Good	Satisfactory	Unsatisfactory
How well organised are your panel meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
How productive are the panel meetings?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Priorities	Very Effective	Effective	Not Effective	in Effective
How effective do you think your panel is tackling the identified priorities?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Communication	Yes	Sometimes	No	Don't Know
Do you receive regular updates from the Police?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you receive information from the Council?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is support provided by members of the community?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Does the panel have the right people involved to enable effective action to be taken?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Please comment briefly on the following:

Specific achievements (solutions):

Areas for improvement: