Needs Assessment Evaluation - 2016 Annual TRAPIC Conference

# *"Expanding Your Infection Prevention Toolbox"*

**Please take the time to complete this short survey. Your answers will be used to help develop future conferences and educational programs.**

1. **Please indicate what subjects you would like to see presented at future TRAPIC conferences?**

2. **Please indicate what your biggest challenges as an Infection Preventionist are?**

3. **Please indicate what subjects you would like to see presented at future TRAPIC meetings.**

4. **Please indicate what area of healthcare you are employed in. (i.e. Acute care, Long term Care, Home Care, etc.)**