

WELL FUNCTIONING NATIONAL SOCIETY SELF-ASSESSMENT

National Society:		
Questionnaire completed by:		
Full Name:		
Role within the National Society:		
Contact details:		
1. MISSION:		
1.1. Has your Society formally adopted a mission statement?		
YES NO		
1.1.1.Please indicate the year when this statement was first adopted:		
1.1.2. Year of last amendment (if applicable)		
2. LEGAL BASE:		
2.1. The Society is recognized by the National Government in your country by:		
National law Decree		
Other (please specify)		
2.1.1. Please indicate the year when this law/decree/other instrument was:		
First passed: ————		
Last revised:		
2.2. Is there a need to revise the existing legal provisions for recognition?		
YES NO		
2.3. Please indicate the year when the Society's Statutes/Constitution were:		
First adopted:		
Last amended:		



	2.4. Are amendments to the current Statutes/Constitution necessary?
	YES NO
3.	GOVERNING BOARD:
	3.1. Do the Society's Statutes/Constitution require regular meeting of the Governing Board? YES NO
	If yes, 3.1.1. Is the Governing Board meeting as required in the Statutes/Constitution? YES NO
	3.2. Please provide the dates of the last 3 meetings of the Governing Board:
	3.3. Do the Statutes/Constitution lay down clear election requirements for the members of the Governing Board? YES NO
	3.3.1. Please rate the Society's compliance to these election requirements Fully complies Occasionally complies
	3.4. Please provide the following statistics on Governing Board members: (specify in the brackets the number of members with voting rights if this differs from the total number of members in each category)
	Total number of Board members () Number of elected members () Number of appointed members () Number of female members () Number of members below the age of 40 ()
4.	GENERAL ASSEMBLY:
	4.1. How often must the General Assembly be held according to the Statutes/Constitution?
	once a year Other (please specify)
	4.2. Please provide the dates of the last 3 meetings of the General Assembly:



5. MEMBERSHIP

6.

5.1. Does the Society have clear definitions regarding membership types? YES NO
5.2. Please indicate the total number of members in your Society who are:
Physician anaesthesia providers:
In training
Other:
5.3. Please indicate how many of your members are:
Men
Women
Below the age of 40
5.4. Do you have any restrictions on membership? YES NO
If yes, please specify:
SEPARATION OF GOVERNANCE AND MANAGEMENT
6.1. Has the Society adopted clear regulations/guidelines on the separation of roles and responsibilities of governance and management?
YES NO
6.2. Has the Society adopted a human resource development strategy/policy?
YES NO
6.3. Has the National Society adopted a specific policy in relation to volunteering?
YES NO
6.4. Is there a focal point (person or unit) at the National Society's Headquarters specifically responsible for management?YES NO



7.	FINANCIAL MANAGEMENT
	7.1. Does the Society prepare comprehensive annual budgets before each financial year?
	YES NO
	7.2. Do you have persons carrying out an internal audit function within your Society?
	YES NO
	7.3. Do you have a finance procedure manual?
	YES NO
	7.4. Does the Society enjoy tax-exempt status?
	YES NO
	7.5. Are the Society's accounts/financial statements externally audited?
	YES NO
8.	NATIONAL COVERAGE
	8.1. Does your membership cover all regions in the country?
	YES NO
	8.2. Do you consider your membership coverage to be rather
	centralised decentralised
9.	SELF MONITORING
	9.1. Does your Society have a communications plan?
	YES NO
	9.1.1. Please indicate whether your Society:
	Produces a regular newsletter for members and volunteers Produces any information for the general public
	9.1.2. Please indicate whether your Society has:
	Access to the internet
	A website (address:)



9.2. Does your Society promote gender equality within the specialty? YES NO
9.3. Does your Society have an advocacy programme?
YES NO
If yes:
Please briefly describe three advocacy issues pursued by your Society during the last two years, and your main targets:
1.
2.
3.
9.4. Does your Society have regular meetings with the Minister of Health in your country? YES NO 9.5. Please list you Society's Partners: Surgery & Anaesthesia Organisations Other Medical Organisations Government Organisations Non-profit Organisations Medical Industry Organisations International Organisations Other (please specify)
9.6. Please indicate the percentage of your members who serve in: Public Sector Private Sector Both
10. PLANS AND ACHIEVEMENTS 10.1. Does the Society have an annual plan which clearly sets out its targets for the year? YES NO



10.1.1. Does your Society publish an annual report on its operations and activities?
YES NO
11. PROGRAMMES
11.1. Does the Society have ongoing activities and educational opportunities?
YES NO
11.1.1. Do you monitor the quality of your services to members?
YES NO
11.1.2. Do you review or evaluate the effectiveness and impact of your programmes?
YES NO
11.2. Does your Society produce national anaesthesia guidance/standards? YES NO
11.3. Does your Society meet regularly to promote the specialty of anaesthesia? YES NO
11.4. Does your Society publish a scientific journal? YES NO
12. RELATIONSHIP WITH AND SUPPORT FROM YOUR FEDERATION
12.1. Is your Society aligned to the WFSA's vision and values?
YES NO
12.2. Do you seek and give helpful feedback from/to your Federation?
YES NO
12.3. Does your website refer to your membership of the WFSA?
YES NO
12.4. Does your website link to the WFSA website?
☐ YES ☐ NO



Link:
12.5. Do you feel your Federation keeps you well-informed and up-to-date about what is going on at all times?YESNO
If not, please provide feedback:
12.6. Please rate the WFSA guidance for your Society's work in the following areas (1 = Poor; 2 = Helpful; 3 = Essential)
12.6.1. Advice and guidance in the promotion of essential anaesthesia care practices 1 2 3
12.6.2. Advice and guidance on international standards of care 1 2 3
12.6.3. Provision of relevant education opportunities 1 2 3
12.6.4. Access to educational resources 1 2 3
12.6.5. Guidance and support in capacity-building 1 2 3
12.6.6. Provision of opportunities for cooperation, such as representation within WFSA Committees or Regional Sections 1 2 3
12.7. Has your Society nominated internal members to join WFSA Committees, Council or Regional Section? (In current or past committees, etc) YES NO
If not, please provide some feedback on reasons:



WFSA unites anaesthesiologists around the world to improve patient care and access to

safe anaesthesia and perioperative medicine If yes, please provide feedback on the effectiveness/advantages of the representation: 12.8. Is the WFSA work a regular agenda item in your Board meetings? YES NO Please explain: 12.9. Overall, how do you rate the work of the WFSA in terms of importance to your Society's mission and framework: Important Irrelevant Essential Feedback: 12.10. Please use the space below to provide specific feedback or suggestions. If your feedback relates to a particular question covered in this assessment, please mention the number (i.e.-Question 9.1)



Many thanks for taking this assessment.

We hope this document provided you with a tool to fairly assess the efficacy of your Society's current working practices, as well as to identify areas where improvements are needed.

As a member of our Federation, your feedback is essential to help us to strengthen our services to you and our common mission.