

Nursing Feedback of Medicine House Staff (Outpatient)

Clinic A / Resident Primary Care Clinic

Resident: _____ Date: _____ . . .

Mark "N/A" (not applicable) if you cannot fairly answer the question

1. Response to ORCHID messages:

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> N/A
Messages are disregarded or rarely answered		Satisfactory responses, not always timely		Responses are always timely and appropriate	

2. PCMH team communication:

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> N/A
Communicates poorly with the MA/staff; utilizes the PCMH model poorly		Satisfactory communication, reasonable use of PCMH model		Always communicates very well with the MA/staff; embraces the PCMH model	

3. Relationship with Nursing Staff:

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> N/A
Disrespectful or strained relationship with Nursing Staff		Satisfactory relationship with Nursing Staff		Positive, respectful, and highly effective relationship	

4. Physician-Patient Interaction:

<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 4	<input type="checkbox"/> 5	<input type="checkbox"/> N/A
Disrespectful or inappropriate behavior with patients		Satisfactory behavior with patients		Always treats patients with respect, empathy, and compassion	

Comments: