

# Appendix B

## Practice Personnel Peer and Self Evaluation

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### TOOLS AND METHODS FOR PRACTICE AND PERSONNEL EVALUATION

Physicians and Health Professionals working together can benefit from having a shared understanding of the goals, expectations and priorities of the practice.

Discussions about differences regarding clinical management are common and comfortable for most clinicians. Disputes can be resolved by searching for evidence-based material, gathering opinions from individuals with special expertise in the area, reaching consensus based on the best published information available, or accepting that some questions have insufficient data to support a specific approach. Such discussions can lead to good clinical and basic research. In any case, most agree that the appropriately applied scientific method should ultimately referee our disputes.

In the nonclinical areas discussed in the *Understanding a Practice Venue* document, expectations and guidelines are not found in the literature, but in the mutual understanding among professionals working together. Practices would serve themselves well by delineating shared expectations and discussing the priorities associated with each of them. Establishing shared goals and expectations among practice members and contract writing have a shared reality — the job is much easier when all parties are positive and supportive. For that reason, contracts are written at the start of legal relationships so as to be useful in determining a participant's fulfillment of duties. Gathering group members together and elucidating expectations in areas of clinical call and availability, education, research, and administration can establish agreed-to standards within the practice group. The process of discussing and establishing these nonclinical activities and setting priorities can go a long way toward prospectively avoiding dispute, discord, dissent, dissatisfaction, or dissolution.

Many practices have regularly scheduled meetings for addressing many of these issues. In some groups, the formal and informal interchanges on a day-to-day basis provide opportunities to put out fires. Larger groups, often serving more than one hospital, may need formalized meetings and agendas to assure that all interested parties have an opportunity to contribute to problem/issue identification, to offer potential solutions, and to be a part of decision making.

Interpersonal communication and collegiality are essential to a satisfying practice life. Identification and resolution of disorders of

communication among group members or between group members and other professionals are important elements of practice satisfaction and of risk management. This section contains evaluation forms adapted from materials graciously supplied by Northwest Newborn Specialists. These peer- and self-evaluation tools are examples of formal approaches to practice expectations and the degree to which the individual and those with whom he/she works perceive that the expectations are fulfilled. Practices planning to use instruments such as these should first create their own evaluation tools, based on their practice's unique environment and expectations. Thereafter, their prospective use can be helpful in achieving the goals of practice success, satisfaction among group members, early problem identification and resolution of disputes.

CONFIDENTIAL

PHYSICIAN PEER EVALUATION

Evaluation for Dr. \_\_\_\_\_

Date: \_\_\_\_\_

Completed by Dr. \_\_\_\_\_

Goals:

1. Provide direction for professional growth
2. Promote self-assessment of current level of practice
3. Receive feed-back from peers
4. Improve quality of service
5. Develop short- and long-term goals

Scoring:

- 1 = Exceeds expectations
- 2 = Meets expectations
- 3 = Needs improvement
- 4 = No opinion

Clinical

1. Confidence in medical judgment and diagnostic ability \_\_\_\_\_
2. Confidence in technical ability \_\_\_\_\_
3. Familiarity with current literature/technology/innovations \_\_\_\_\_
4. Content of daily notes and summaries

- a. Clarity \_\_\_\_\_
- b. Completeness \_\_\_\_\_
- c. Delineation of treatment plan \_\_\_\_\_

5. Completion/updating of problem list, summary sheet \_\_\_\_\_
6. Individualization of diagnostic work-up \_\_\_\_\_
7. Identification of discharge issues and follow-up needs \_\_\_\_\_

- 8. Implementation of discharge plans \_\_\_\_\_
- 9. Quality/completeness of call sign-out \_\_\_\_\_
- 10. Use of laboratory/diagnostic tests in appropriate and cost-effective manner \_\_\_\_\_
- 11. Use of subspecialty consultants in appropriate and cost-effective manner \_\_\_\_\_
- 12. Communicates with families in effective and timely manner \_\_\_\_\_
- 13. Communicates with referring physicians in timely manner \_\_\_\_\_
- 14. Assumes responsibility for patient care \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

PHYSICIAN PEER EVALUATION  
 COLLEGIAL

- 1. Reliable and punctual (sign-out, call, meetings) \_\_\_\_\_
- 2. Willingness to share workload \_\_\_\_\_
- 3. Demonstrates professional demeanor and appearance \_\_\_\_\_
- 4. Demonstrates positive interactions with colleagues \_\_\_\_\_
- 5. Demonstrates favorable support of physician colleagues to parents and to staff \_\_\_\_\_
- 6. Empathetic and respectful of fellow physicians' issues/needs \_\_\_\_\_

Comments \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

COMMUNICATION SKILLS

- 1. Effective listener \_\_\_\_\_
- 2. Communicates ideas or opinions clearly and concisely \_\_\_\_\_
- 3. Ability to resolve conflict \_\_\_\_\_

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

ADMINISTRATIVE WORK

- 1. Completes administrative tasks in timely manner \_\_\_\_\_
- 2. Follows through on work identified as his/her responsibility \_\_\_\_\_
- 3. Shows flexibility in scheduling requests for meetings \_\_\_\_\_
- 4. Attends scheduled meetings \_\_\_\_\_
- 5. Timeliness in attending meetings \_\_\_\_\_
- 6. Contributes to meeting efficiency and productivity \_\_\_\_\_
- 7. Clearly/concisely communicates ideas and opinions \_\_\_\_\_
- 8. Demonstrates receptiveness to physicians' concerns \_\_\_\_\_
- 9. Demonstrates good leadership skills \_\_\_\_\_
- 10. Displays confidence in decision making skills \_\_\_\_\_

- 11. Disseminates information appropriately \_\_\_\_\_
- 12. Shows skill and conflict resolution abilities when practice needs, goals or objectives differ from institutional desires \_\_\_\_\_

Comments: (1) Is an appropriate amount of time being allocated to his/her administrative position/duties:

- Time used is too much \_\_\_\_\_
- Appropriate time used \_\_\_\_\_
- Too little time used \_\_\_\_\_

(2) Other general comments on administrative performance:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

DISCUSSION OR OTHER COMMENTS: (Use this space for added comments, to further clarify specific answers above, or to address areas not included)

Comments/suggestions on the peer evaluation tool or process:

Adapted from materials supplied by Northwest Newborn Specialists, PC. Thanks to Larry Cheldelin, MD

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 PHYSICIAN SELF-EVALUATION

Completed by Dr. \_\_\_\_\_

Date: \_\_\_\_\_

Goals:

- A. Provide direction for professional growth
- B. Promote self-assessment of current level of practice
- C. Receive feed-back from peers
- D. Improve quality of service
- E. Develop short- and long-term goals

PROCEDURES:

- A. Estimate the number of following procedures
  - a. Endotracheal intubation \_\_\_\_\_
  - b. Umbilical line placement \_\_\_\_\_
  - c. Lumbar puncture \_\_\_\_\_
  - d. Pneumothorax needling \_\_\_\_\_
  - e. Chest tube placement \_\_\_\_\_
  - f. Circumcisions \_\_\_\_\_
  - g. Exchange transfusions \_\_\_\_\_
  - h. Other \_\_\_\_\_

- B. NRP CERTIFIED? YES \_\_\_\_\_ NO \_\_\_\_\_
- C. NRP INSTRUCTOR? YES \_\_\_\_\_ NO \_\_\_\_\_

## CLINICAL (Mark as best describes your practice)

## Scoring:

- 1 = Always
- 2 = Usually
- 3 = Occasionally
- 4 = Never

## NIGHT CALL: From home

- Arrive within 30 minutes for emergencies \_\_\_\_\_
- Document phone-only consultations \_\_\_\_\_
- Evaluate non-acute patients within 6 hours \_\_\_\_\_
- Present at time of transport arrival \_\_\_\_\_
- Present when patient returns from OR \_\_\_\_\_

## NIGHT CALL: In-hospital

- Gets sign-in report from departing associates \_\_\_\_\_
- Regularly circulates through nursery \_\_\_\_\_
- Responds promptly to nursing requests \_\_\_\_\_
- Interacts with families willingly \_\_\_\_\_
- Presents self to deliveries in timely fashion \_\_\_\_\_
- Present at time of transport arrival \_\_\_\_\_
- Present when patient returns from OR \_\_\_\_\_
- Prompt and polite response when called during night \_\_\_\_\_

## ADMISSIONS

- Arrive within 30 minutes for emergencies \_\_\_\_\_
- Attend deliveries <34 weeks, multiples <35 weeks, serious congenital malformations, anticipated complicated deliveries \_\_\_\_\_
- Identify referring physician in records \_\_\_\_\_
- Contact referring physician at admission \_\_\_\_\_
- Discuss condition/treatment plan with family \_\_\_\_\_
- Discuss/document desire to breast feed \_\_\_\_\_

## DAILY ROUNDS

- Complete and update the daily summary sheet \_\_\_\_\_
- Identify patients eligible for research protocols \_\_\_\_\_
- Provide families with update \_\_\_\_\_
- Outline treatment plan clearly in progress note \_\_\_\_\_

## DISCHARGE

- Discuss discharge and follow-up with primary health professional \_\_\_\_\_
- Timely completion of discharge papers \_\_\_\_\_

## EXPIRATION

- Notify primary physician and obstetrician \_\_\_\_\_
- Discuss autopsy with family & record in chart \_\_\_\_\_
- Complete death certificate in timely manner \_\_\_\_\_

## ADMINISTRATIVE/EDUCATIONAL

- A. Are you a member in good standing with \_\_\_\_\_ Medical Association? Yes \_\_\_ No \_\_\_

B. Have you attended required risk management seminars? Yes \_\_\_ No \_\_\_

C. Have you presented to group educational sessions? Yes \_\_\_ No \_\_\_

D. Have you attended out-of-state CME conference in the past year? Yes \_\_\_ No \_\_\_

Name of conference \_\_\_\_\_

Have you presented conference data or recommendations to the practice group? Yes \_\_\_ No \_\_\_

E. Describe your attendance at the following:  
 Regularly scheduled practice management meetings \_\_\_ of \_\_\_  
 Practice educational meetings \_\_\_ of \_\_\_  
 Grand rounds \_\_\_ of \_\_\_  
 \_\_\_\_\_ of \_\_\_  
 \_\_\_\_\_ of \_\_\_

F. How many hours per week do you participate in self-study activities? \_\_\_\_\_

Describe your strengths in the following areas:  
 Interpersonal \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Clinical \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Corporate \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Identify areas for improvement:  
 Interpersonal \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Clinical \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Corporate \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What is your most recent positive contribution to the practice?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

What are your specific goals for the coming year?  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

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