



Team Member Feedback

Periodic reviews are meant to be a collaborative, positive approach to professional growth and development. The ultimate goal with periodic reviews is to provide practitioners with objective data that will assist them in continually improving their clinical and professional skills, in addition to recognize excellence and in turn provide high quality, safe patient care.

Using the form below, please provide feedback as part of the in-depth review process for the practitioner indicated.

Practitioner's Name:	
Department:	
Reviewing Team Member's Name:	
Professional Relationship:	
Period of time working together:	____/____/____ to ____/____/____ (dd) (mmm) (yy) (dd) (mmm) (yy)

MEDICAL EXPERT	Strongly disagree	Disagree	Neutral / N/A	Agree	Strongly agree
Practices medicine within their defined scope of practice and expertise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performs patient centered clinical assessment and establishes management plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plans and performs procedures for the purpose of management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Establishes plans for timely follow up and appropriate consultation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates as a member of a team, providing high quality, safe patient care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

COMMUNICATOR	Strongly disagree	Disagree	Neutral / N/A	Agree	Strongly agree
Establishes professional, therapeutic relationships with patients and their families	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Develops plans that reflect the patient's health care needs	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Documents and shares electronic information about the medical encounter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

COLLABORATOR	Strongly disagree	Disagree	Neutral / N/A	Agree	Strongly agree
Works effectively with other physicians and health care professionals	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Effectively and safely hands over care to appropriate health care professional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Performs a patient-centred clinical assessment and establishes management plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Plans and performs procedures for the purpose of management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Establishes plans for timely follow up and appropriate consultation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Participates as a member of a team, providing high quality, safe patient care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

LEADER	Strongly disagree	Disagree	Neutral / N/A	Agree	Strongly agree
Contributes to the improvement of health care delivery in health care teams	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Engages in the stewardship of health care resources	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates leadership in professional practice	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Manages their practice and career	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

SCHOLAR	Strongly disagree	Disagree	Neutral / N/A	Agree	Strongly agree
Develops a plan to enhance competence across all the CanMEDS domains	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Facilitates the learning of students, other health care professionals, and the public	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Integrates best available evidence into real time decision making	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Critically evaluates the integrity, reliability and applicability of health related research and literature	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contributes to the dissemination of knowledge and practices applicable to health	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

HEALTH ADVOCATE	Strongly disagree	Disagree	Neutral / N/A	Agree	Strongly agree
Responds to the individual patient's complex health needs by advocating with the patient within and beyond the clinical environment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Responds to the needs of a community or population they serve by advocating with them for system-level change	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

PROFESSIONAL	Strongly disagree	Disagree	Neutral / N/A	Agree	Strongly agree
Demonstrates commitment to patients by applying best practices and adhering to high ethical standards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates a commitment to society by recognizing and responding to the social contract in health care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates a commitment to the profession by adhering to standards and participating in physician led regulation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Demonstrates a commitment to physician health and wellbeing to foster optimal patient care	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Establishes plans for timely follow up and appropriate consultation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:					

Overall Comments/Summary: