Continuity Clinic Evaluation Instructions to Evaluators for the Continuity Clinic Evaluation

This evaluation is to be conducted at least twice each year by the Internal Medicine Residency Clinic trainer or trainer(s). The following evaluation form is presented as a model, which utilizes the AOA core competency requirements. The use of this form is not mandatory at this time, but its use is encouraged if local programs are not satisfied with their current evaluation tool.

It is suggested that the trainer(s) discuss the evaluation with the resident, highlighting strengths and weaknesses and pointing out areas that can be improved. The evaluation process should be an opportunity for teaching by the trainers resulting in personal and professional growth by the resident. Serious deficiencies need to be documented along with a plan for improvement.

A scoring grid is provided for those programs that have multiple trainers in their ambulatory clinic who each fill out an evaluation. The grid serves to illustrate to the resident how their performance has been rated by several supervisors and adds some validity to the evaluation when there is agreement in scores.

The ACGME Outcome Project is a long-term initiative that places increased emphasis on educational outcome assessment in the accreditation process. The AOA has adopted the six core competencies identified by the ACGME with an additional section for Osteopathic Concepts. This evaluation, along with the Resident Patient Evaluation, groups the questions into categories based on these competencies. While there is considerable overlap between the competencies, this format serves to illustrate how we are evaluating these items while acting as a guideline for shaping our curriculum.

Optional 360-Degree Evaluation

In the past, evaluations of medical residents concentrated on the 'science' of medicine rather than the art. Medical knowledge and patient care issues are still paramount, but a successful physician needs more than good knowledge. Assessment of professionalism and interpersonal communication is often difficult, especially since the evaluating physician sees the resident in only one context.

A 360-degree evaluation compiles subjective information from several sources to obtain a 'well rounded' view of the resident. Evaluation forms may be filled out by the resident's patients and peers, as well as by clinic staff. The clinic supervisor may decide how many evaluations to solicit, with the understanding that 3 or more evaluations from each source will likely provide better data.

The scoring grid may be used to compile the results of all the evaluations and will act as a valuable resource to promote personal growth and change in our trainees. A discussion between the clinic supervisor and the resident concerning these results is an essential part of this process.

ACOI Continuity Clinic Evaluation

Resident's Name:	1	Unsatisfactory
Evaluator's Name(s):	2	Below Average
Hospital Name:	3	Average
Date of Evaluation:	4	Good
□ Traditional Track (10% Clinic) □ Primary Care Track (20% Clinic)	5	Superior

	Please circle the appropriate number for each item using the scale Patient Care	e an		cal	е	
1.	Demonstrates sound clinical judgment	1	2	3	4	5
2.	Presents patient information case concisely without significant omissions or digressions	1	2	3	4	5
3.	Able to integrate the history and physical findings with the clinical data and identify all of the patient's major problems using a logical thought process	1	2	3	4	5
4.	Develops a logical sequence in planning for diagnostic tests and procedures and Formulates an appropriate treatment plan to deal with the patient's major problems	1	2	3	4	5
5.	Able to perform commonly used office procedures	1	2	3	4	5
6.	Follows age appropriate preventative medicine guidelines in patient care	1	2	3	4	5
	Medical Knowledge		S	cal	е	
1.	Uses current terminology	1	2	3	4	5
2.	Understands the meaning of the patient's abnormal findings	1	2	3	4	5
3.	Utilizes the appropriate techniques of physical examination	1	2	3	4	5
4.	Develops a pertinent and appropriate differential diagnosis for each patient	1	2	3	4	5
5.	Demonstrates a solid base of knowledge of ambulatory medicine	1	2	3	4	5
6.	Can discuss and apply the applicable basic and clinically supportive sciences	1	2	3	4	5
	Professionalism		S	cal	е	
1.	Demonstrates consideration for the patient's comfort and modesty	1	2	3	4	5
2.	Arrives to clinic on time and follows clinic policies and procedures	1	2	3	4	5
3.	Works effectively with clinic staff and other health professionals	1	2	3	4	5
4.	Able to gain the patient's cooperation and respect	1	2	3	4	5
5.	Demonstrates compassion and empathy for the patient	1	2	3	4	5
6.	Demonstrates sensitivity to patient's culture, age, gender, and disabilities	1	2	3	4	5
7.	Discusses end-of-life issues (DPOA, advanced directives, etc.) when appropriate	1	2	3	4	5

	Interpersonal and Communication Skills	Scale		е		
1.	Demonstrates appropriate patient/physician relationship	1	2	3	4	5
2.	Uses appropriate and understandable layman's terminology in discussions with patients	1	2	3	4	5
3.	Patient care documentation is complete, legible, and submitted in timely manner	1	2	3	4	5
4.	Recognizes need for behavioral health services and understands resources available	1	2	3	4	5
	Systems-based Practice		S	cal	e	
1.	Spends appropriate time with patient for the complexity of the problem	1	2	3	4	5
2.	Able to discuss the costs, risks and benefits of clinical data and therapy	1	2	3	4	5
3.	Recognizes the personal, financial, and health system resources required to carry out the prescribed care plan	1	2	3	4	5
4.	Demonstrates effective coordination of care with other health professionals	1	2	3	4	5
5.	Recognizes the patient's barriers to compliance with treatment plan such as age, gender, ethnicity, socioeconomic status, intelligence, dementia, etc.	1	2	3	4	5
6.	Demonstrates knowledge of risk management issues associated with patient's case	1	2	3	4	5
7.	Works effectively with other residents in clinic as if a member of a group practice	1	2	3	4	5
	Osteopathic Concepts		S	cal	е	
1.	Demonstrates ability to utilize and document structural examination findings	1	2	3	4	5
2.	Integrates findings of osteopathic examination in the diagnosis and treatment plan	1	2	3	4	5
3.	Successfully uses osteopathic manipulation for treatment where appropriate	1	2	3	4	5
4.	Practices Patient Centered Care with a "whole person" approach to medicine.	1	2	3	4	5
	Practice-Based Learning and Improvement		S	cal	е	
1.	Locates, appraises, and assimilates evidence from scientific studies	1	2	3	4	5
2.	Apply knowledge of study designs and statistical methods to the appraisal of clinical studies to assess diagnostic and therapeutic effectiveness of treatment plan	1	2	3	4	5
3.	Uses information technology to access information to support diagnosis and treatment	1	2	3	4	5
	Comments					
	Resident's Signature Date Evaluator's Signature			Dat	e	

Patient Evaluation of Physician

Physician's Name:	1	Strongly Disagree
Date of Evaluation:	2	Disagree
	3	Neutral

Please circle the appropriate number for each item using this scale. Please provide any relevant comments on the back of this form.

•	Ottoligly Disagree
2	Disagree
3	Neutral
4	Agree
5	Strongly Agree

Strongly Agree

This physician:			cal	е	
Introduces him/herself and greets me in a way that makes me feel comfortable.	1	2	3	4	5
Manages his/her time well and is respectful of my time.	1	2	3	4	5
Is truthful, upfront, and does not keep things from me that I believe I should know.	1	2	3	4	5
Talks to me in a way that I can understand, while also being respectful.	1	2	3	4	5
Understands how my health affects me, based on his/her understanding of the details of my life.	1	2	3	4	5
Takes time to explain my treatment options, including benefits and risks.	1	2	3	4	5

Patient Evaluation of Physician

Physician's Name:		Strongly Disagree
Date of Evaluation:	2	Disagree
	3	Neutral
Places circle the appropriate number for each item using this scale	4	Agree

Please circle the appropriate number for each item using this scale. Please provide any relevant comments on the back of this form.

This physician:			cal	е	
Introduces him/herself and greets me in a way that makes me feel comfortable.	1	2	3	4	5
Manages his/her time well and is respectful of my time.	1	2	3	4	5
Is truthful, upfront, and does not keep things from me that I believe I should know.	1	2	3	4	5
Talks to me in a way that I can understand, while also being respectful.	1	2	3	4	5
Understands how my health affects me, based on his/her understanding of the details of my life.	1	2	3	4	5
Takes time to explain my treatment options, including benefits and risks.	1	2	3	4	5

Peer Evaluation of Resident

Strongly Agree

Strongly Agree

Resident's Name:	1	Strongly Disagree
Date of Evaluation:	2	Disagree
	3	Neutral
Please circle the appropriate number for each item using this scale	4	Agree

Please circle the appropriate number for each item using this scale. Please provide any relevant comments on the back of this form.

This resident: Scale		е			
Exhibits appropriate personal and interpersonal behaviors.	1	2	3	4	5
Is punctual and dependable.	1	2	3	4	5
Demonstrates ability to work with others, as a part of a team, and responds positively to feedback.	1	2	3	4	5
Maintains medical records that are thorough and clear to team members unfamiliar with the patient.	1	2	3	4	5
Is sensitive and responsive to issues of gender, age, culture, socioeconomic status, religion, sexual preference, and disabilities of both patients and colleagues.	1	2	3	4	5
Exhibits effective verbal and non-verbal, as well as questioning skills when communicating with patients and families.	1	2	3	4	5

Peer Evaluation of Resident

5

Resident's Name:	1	Strongly Disagree
Date of Evaluation:	2	Disagree
	3	Neutral
Diagon sivele the appropriate pumber for each item units this each	4	Agree

Please circle the appropriate number for each item using this scale. Please provide any relevant comments on the back of this form.

This resident:			Scal	е	
Exhibits appropriate personal and interpersonal behaviors.	1	2	3	4	5
Is punctual and dependable.	1	2	3	4	5
Demonstrates ability to work with others, as a part of a team, and responds positively to feedback.	1	2	3	4	5
Maintains medical records that are thorough and clear to team members unfamiliar with the patient.	1	2	3	4	5
Is sensitive and responsive to issues of gender, age, culture, socioeconomic status, religion, sexual preference, and disabilities of both patients and colleagues.	1	2	3	4	5
Exhibits effective verbal and non-verbal, as well as questioning skills when communicating with patients and families.	1	2	3	4	5

Staff Evaluation of Resident

Strongly Agree

Strongly Agree

Resident's Name:	1	Strongly Disagree
Date of Evaluation:	2	Disagree
	3	Neutral
Please circle the appropriate number for each item using this scale	4	Agree

Please circle the appropriate number for each item using this scale. Please provide any relevant comments on the back of this form.

This resident:	Scale						
Exhibits appropriate personal and interpersonal behaviors.	1	2	3	4	5		
Is punctual and dependable and respectful of others	1	2	3	4	5		
Demonstrates ability to work with others, as a part of a team, and responds positively to feedback.	1	2	3	4	5		
Maintains medical records that are thorough and clear to team members unfamiliar with the patient.	1	2	3	4	5		
Is sensitive and responsive to issues of gender, age, culture, socioeconomic status, religion, sexual preference, and disabilities of both patients and colleagues.	1	2	3	4	5		
Exhibits effective verbal and non-verbal, as well as questioning skills when communicating with patients and families.	1	2	3	4	5		

Staff Evaluation of Resident

5

Resident's Name:		Strongly Disagree
Date of Evaluation:	2	Disagree
	3	Neutral
Please circle the appropriate number for each item using this scale	4	Agree

Please circle the appropriate number for each item using this scale. Please provide any relevant comments on the back of this form.

This resident:	Scale						
Exhibits appropriate personal and interpersonal behaviors.	1	2	3	4	5		
Is punctual and dependable and respectful of others		2	3	4	5		
Demonstrates ability to work with others, as a part of a team, and responds positively to feedback.	1	2	3	4	5		
Maintains medical records that are thorough and clear to team members unfamiliar with the patient.	1	2	3	4	5		
Is sensitive and responsive to issues of gender, age, culture, socioeconomic status, religion, sexual preference, and disabilities of both patients and colleagues.	1	2	3	4	5		
Exhibits effective verbal and non-verbal, as well as questioning skills when communicating with patients and families.	1	2	3	4	5		

ACOI Continuity Clinic Evaluation Scoring Sheet

Name:			_	N	umb	er of	Patie	ents i	n Re	siden	t's Pa	nel:				_
Date:	Average Number of Patients Seen Per Clinic:															
1 Unsatisfactory 2 Below Average 3 Average 4 Good 5 Superior	Attending #1	Attending #2	Attending #3	Attending Totals	This table has been designed as a tally sheet for programs where multiple attending physicians supervise and evaluate residents in the continuity clinic. In addition, it may be used to complete a 360-degree evaluation, where residents are evaluated by patients, staff, and peers, as well as by their attending physicians.											
Knowledge					For patient, peer, and staff evaluations, the first 3 questions on the questionnaire should be scored as professionalism while the last 3 questions											
Patient Care					should be scored as interpersonal communication.											
Practice Based Learning								als								
Systems-based Practice					nt #1	atient #2	nt #3	atient Totals	#1	#2	#3	Peer Totals	Ŧ	#2	£	Staff Totals
Osteopathic Concepts					Patient #1	Patier	Patient #3	Patier	Peer #1	Peer a	Peer #3	Peer ⁻	Staff #1	Staff #2	Staff #3	Staff '
Professionalism																
Interpersonal Communication																
Overall Rating																
Average:																

Summary of Written Comments: