

Tips for Evaluating a Hospice Medical Director

There are two parts to the evaluation:

1. Evaluating the physician's medical expertise and competency, and
2. Evaluating the non-medical performance: responsiveness to clinicians' requests, teamwork on the IDG, communication skills, timeliness of documentation, etc.

Creating an Evaluation Process

1. Begin with a Job Description that sets out clear expectations of both the physician and the Hospice. Make sure the physician understands and agrees to the terms of the job description. The evaluation is based on the criteria described in the job description.
2. Frame the evaluation process in a nonthreatening way, "I want to work with you to give you the feedback you want." "Review," "Peer Audit," or "Feedback" might be more comfortable phrases than "Annual Evaluation."
3. Assure the physician that since you are not a physician yourself, you will not be reviewing or evaluating his or her medical opinions or practices – that can only be done by another Hospice physician.
4. Involve the physician in the process from the very beginning. Ask, "What type of feedback would be helpful to you?" Listen to and accommodate the physician's requests.
5. Have the physician choose the types of charts that he or she would like to have reviewed by another physician. You can choose additional charts you have concerns about.
6. Have the physician review draft forms, surveys and revise per his or her suggestions.
7. Don't start the process until an agreement has been reached on all aspects of the process.

Performing the Evaluation

1. Meet with the physician regularly throughout the year to deal with issues as they arise – don't wait for the annual evaluation process.
2. Make notes ("Memo to File") whenever something comes up during the year so that you will remember when writing your evaluation summary.
3. Get as much input as you can – from both clinical and non-clinical staff – in a standardized form so the responses can be tabulated and summarized.
4. Never accept anonymous feedback – it stifles honest communications and creates a suspicious working environment. Issues need to be addressed in a straightforward, transparent manner within the boundaries of appropriate confidentiality.
5. Give the written evaluation summary to the physician before meeting to discuss the evaluation.
6. At the end of the evaluation ask, "How can I support your work better?" or "Is there anything else you need from me?"
7. Make notes on any issues or feedback that the physician brings up during the evaluation review.
8. Thank the physician afterwards for participating in the evaluation.
9. Do it all over again the following year.