

Co-Workers & Allied Health Staff Survey

During the Summative Assessment, schedule some time to conduct one-on-one conversations with the candidate's staff and support team. Write down their responses to the following questions. Complete this form for every health staff member you interview.

1.	How long have you known this physician?
2.	Have patients ever made comments to you about this physician? Yes No Explain:
3.	How does the physician establish and maintain a positive relationship with you to support collaborative care?
4.	Does the physician share their knowledge and expertise with you? Yes No Unsure
5.	Is the physician's verbal communication with you clear and concise? Yes No Explain:





How receptive is the phys	ician to suggestions or i	input from other
	Receptive	Somewhat receptive \Box
		Somewhat receptive
Does the physician respec Yes	ct your time?	
		ents regardless of gender,
Yes		
	Yes No Sexual orientation, or ethr	Not at all receptive N/A Does the physician respect your time? Yes No Explain: Does the physician demonstrate respect for paties Sexual orientation, or ethnicity? Yes No





10.	Does the physician treat colleagues and members of other disciplines with respect? Yes No Explain:
11.	Does the physician respect the confidentiality of patients and their families? Yes \square No \square Explain:
12.	What do you see as the physician's greatest strengths or things the physician does well?
13.	What could the physician do to improve the way they practice and interact with patients, colleagues and/or staff?





	o you feel the physician practises in a safe manner?	
	es No D	
	xplain:	
15.	Vould you recommend the physician to a friend or a family member?	
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