

NON-HOSPITALIST PROVIDER ON-BOARDING: Feedback

Feedback Methods

Feedback is critical to making improvements to your on-boarding process over-time. Please choose one or more of the following methods for soliciting feedback.

- 1) Create or designate an e-mail for providers to voice concerns.
NOTE: dedicate a hospital or group administrator to monitor the in-box activity regularly.
- 2) Contact non-hospitalist providers once weekly (or more often if feasible) to inquire about common friction points.
NOTE: this can be done in-person or digitally via email.
- 3) Create a (brief!) end-of-service survey. We recommend putting this into RedCap, Qualtrics, Survey Monkey, or Google forms to help with dissemination and collating your results.

Here is a sample survey:

Dear Volunteer Providers,

Thank you very much for your time on service. We are indebted to you for your help managing our increased capacity of patients during the COVID-19 pandemic. So that we can improve our on-boarding for future providers, please complete the following brief survey.

1. Name:
2. Service:
3. Dates worked:
4. What barriers did you experience that made it difficult to deliver high-quality, efficient patient care?
5. How could we better support you?
6. What resources or support helped you the most?
7. What resources were not helpful/extraneous?
8. Is there any else you would like us to know?

- 4) Create a forum for providers to share their feedback to each other. This can be done electronically through platforms such as Microsoft Teams or can be as simple as a dedicated white board in a shared workspace.
NOTE: you can monitor this as well and may provide more honest feedback if it feels like a safe space for providers to exchange information.

Responding to Feedback

While receiving feedback, if it is not acted on then the effort is wasted. It is critical to establish a process for responding to and incorporating feedback. Not all feedback needs a response but closing the loop on high-risk, high-importance, or passionate feedback can to a long way in making providers supported.

- 1) Categorize issues based on pre-defined criteria (ie, EHR interface, interdisciplinary support, nursing shortages/issues, placement difficulties)
- 2) Designate a hospital medicine leader to respond to and address issues within each category, ideally by connecting that provider with available resources
- 3) Review each category on a weekly basis