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 inbox for providers to voice concerns.
   NOTE: Dedicate a hospital or group administrator to monitor the inbox 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 anything else you would like us to know?

4. Create a forum for providers to share their feedback with 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

If feedback is not acted upon, 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 go a long way in making providers supported.

1. Categorize issues based on pre-defined criteria (i.e., 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.

4. Share your feedback with us via education@hospitalmedicine.org, and we'll work hard to connect you with existing resources or create something to meet your needs.