

EMPLOYEE PERFORMANCE EVALUATION (CLINICAL)

Employee Name: _____ Position: _____

Check One Scheduled Evaluation Promotion 90-day Other

Date of Hire: _____ Date of Evaluation: _____

Key to Ratings:
 5 *Excellent -- Outstanding performance that exceeds the job's requirements.*
 4 *Very good -- Above average performance that exceeds the job's requirements.*
 3 *Average -- Acceptable performance that meets the job's requirements.*
 2 *Needs Improvement -- Minimally acceptable performance that meets some of the job's requirements.*
 1 *Unsatisfactory -- Unacceptable performance that does not meet the job's requirements.*

Evaluation Items	Circle One
1. Quality	
Accuracy	5 4 3 2 1
Completeness/Thoroughness	5 4 3 2 1
Oral/Written expression	5 4 3 2 1
2. Quantity	
Amount of work performed	5 4 3 2 1
Completion of work on schedule	5 4 3 2 1
3. Work Habits	
Attendance/Punctuality	5 4 3 2 1
Professional appearance	5 4 3 2 1
Observance of rules, regulations and safety	5 4 3 2 1
Compliance with work instructions	5 4 3 2 1
Seeking supervision when appropriate	5 4 3 2 1
Initiative	5 4 3 2 1
4. Interpersonal Skills/Attitude	
Ability to effectively communicate with all levels of employees	5 4 3 2 1
Ability to effectively communicate with subjects/patients/stakeholders	5 4 3 2 1
Flexibility with tasks assigned	5 4 3 2 1
Constructive reaction to criticism	5 4 3 2 1
Ability to maintain positive attitude.	5 4 3 2 1
5. Job Related Functions	
Comprehension of treatment model	5 4 3 2 1
Adherence to clinical hours	5 4 3 2 1
Understands and operates within legal and ethical boundaries	5 4 3 2 1
Comfortable working with all patient populations	5 4 3 2 1
Competency in Utilization Reviews (if applicable)	5 4 3 2 1
Completion of chart documentation in a timely manner	5 4 3 2 1
6. Duties and task (see job description)	
Performance on assigned job duties as outlined in job description	5 4 3 2 1
Comments on duties or tasks:	
Overall Performance	5 4 3 2 1

Review Job Description

- Reviewed and no changes made
- Reviewed and modified (see attached)

Past performance objectives

Accomplishments of evaluation period:

Measurable Goals for next performance evaluation period (specific to functions of position):

Date of Review with Employee

Employee's Signature

Employee's Comments:

Date of Evaluation

Evaluated by

Director's / Supervisor's Comments: