



CHESAPEAKE
MEDICAL STAFFING

Clinical & Professional Feedback Request

2401 York Road Timonium, MD 21093 Phone (410) 321.4267 Fax (410) 321.4980

An essential component of professional development includes periodic clinical and/or professional feedback. This feedback facilitates communication, provides useful information about job performance, enhances better working relationships, and provides a historical record of performance. Please use the following criteria in providing feedback for the employee. Your time and comments are very much appreciated by CMS as we strive to maintain the highest standards of practice and comply with TJC Health Care Staffing certification requirements. **This feedback is confidential and may be returned via fax (410-321-4980) or email (hr@cms24-7.com).**

NURSE MANAGER / CLINICAL SUPERVISOR: Please complete the following:

Your Name: _____ Title: _____
Name of Facility / Hospital: _____ Unit / specific setting: _____
Your Work Email: _____ Work Phone Number: _____

Employee Name for whom you are providing feedback: _____
Date(s) you supervised this employee (mm/yyyy – mm/yyyy): _____

Professional Behaviors (if applicable)	Exceeds Standards	Meets Standards	Needs Improvement
Clinical Competence & Judgment			
Flexibility & Adaptability			
Communication			
Time Management			
Utilization of Electronic Medical Records (EMR)			
Attitude & Cooperation			
Attendance & Punctuality			

Is this employee eligible to return to your facility / hospital? YES NO Unable to Comment

Please provide any additional comments about this employee: _____

Nurse Manager / Clinical Supervisor Signature: _____ Date: _____