Yearly Employee Self Evaluation

This evaluation will be conducted on a yearly basis to give FlexRN employees an opportunity to track their growth and be informed of areas needing improvement. This report will give us the opportunity to measure your performance and continue to provide our facilities with the highest quality of staff available.

RN Name: _____ FlexRN Representative: _____

	Excellent	Good	Fair	Poor	Not Applicable
Clinical Skills (over all):					
Patient Assessment & Observation					
Remains calm in stressful situations					
Documentation					
Evaluation of change in patient condition					
Patient and Family Education					
Working knowledge of advance directives					
Patient interaction (age appropriate, care)					
Critical thinking skills/judgment					
Implementation of Physician Orders					
Quality of Work (over all):					
Uses time efficiently					
Prioritizes care appropriately					
Initiative and Enthusiasm					
Follows hospital policy & procedures					
Relations with Co-workers (over all):					
Attitude					
Cooperation with peers					
Appropriately reports patient information					
Effective and timely communication w/physicians					
Punctuality:					
Attendance:					
Ability to adapt to new workplace:					
Compliance with JCAHO standards:					

Additional Comments:

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_____   _____
FlexRN Representative Signature   **Date of Evaluation**