

Surgical Foundations
Multisource Feedback Form
2.7B “Discharge Planning Team”

PURPOSE: The following serves as a guide to facilitate effective completion of SF EPA 2.7B. This requires multi-source feedback. Considering the challenges with connecting non-surgical individuals to MedSIS, the following lists the recommended process for completion.

PROCESS:

1. The resident identifies an appropriate faculty or senior trainee for EPA 2.7B observation completion and documentation
2. The resident describes the process to faculty and requests that they
 - Inform the individuals in advance of the activity
 - Obtains feedback from the various individuals
3. The resident requests that the faculty name the individual roles and/or the resident adds those roles to the commentary section *after* triggering the observation and prior to submitting to the faculty for completion
4. Roles can include any of the following: Occupational therapist, physiotherapist, social worker, geriatric nurse, geriatrician, patient, family member, palliative care nurse, palliative care resident/physician, stoma therapist, speech and language pathologist, dietician, thrombosis nurse, CCAC manager, integrated comprehensive care coordinator.

MILESTONES EVALUATED: The resident should review with their assessor the milestones being evaluated in the session prior to the activity.

- ✓ Resident demonstrates the ability to collaborate with allied health professionals for safe hospital discharge, including:
 - Arrange for appropriate allied health providers assistance
 - Arrange for appropriate homecare devices and services
 - Coordinate an appropriate follow up plan with multiple physician providers and healthcare professionals
 - Ensure follow up on results of investigations
- ✓ Perform the above tasks while actively engaging in collaborative care, including:
 - Patient input
 - Family member input
 - Input of other physician providers if appropriate
 - Input of other allied health care providers if appropriate