



# Independent Contractor Evaluation

Completed by Independent Contractor Organization and St. Luke's Managing Director

Reporting Date: \_\_\_\_\_

St. Luke's Managing Director: \_\_\_\_\_

## Independent Contractor Organization

<b>Name:</b>	<b>Phone:</b>
<b>Address:</b>	<b>Email:</b>
	<b>Start Date at St. Luke's:</b>
<b>Contract Name:</b>	<b>Contract Number:</b>

## Independent Contractor Expectations

Expectation: (Please type individual expectation here)

- Met       Unmet       NA

Expectation: (Please type individual expectation here)

- Met       Unmet       NA

Expectation: (Please type individual expectation here)

- Met       Unmet       NA

Comments:

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## Independent Contractor Evaluation

Contract service has met expectations

The contractual agreement will be continued, effective \_\_\_\_\_ through \_\_\_\_\_

Contract service has not met expectations

Expectations not met:

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The following action(s) has or will be taken: *(check all that apply)*

- An action plan for improvement will be created
- The terms of contract have been renegotiated without disruption in the continuity of patient care
- The contractual agreement has been terminated without disruption in the continuity of patient care
- Other:

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Approval Signatures		Date
St. Luke's Managing Director Approval:		
Executive Approval:		

This review demonstrates that the contractual care, treatment and services are provided safely and effectively.