

## Amputation Care ECHO

### Facilitation Scorecard

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

Facilitator Name: \_\_\_\_\_

Your Duty Station: \_\_\_\_\_

Please rate the following statements below on today's session:  1 = Strongly disagree 2 = Disagree 3 = Neutral 4 = Agree 5 = Strongly Agree	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. Identifies and announces the main facilitator					
2. Starts session on time					
3. Ensures that all participants introduce themselves					
4. Identifies participants as they sign in late					
5. Facilitators look and speak directly into the camera					
6. Facilitator repeats questions/comments asked by participants when needed					
7. Encourages participants to introduce themselves prior to speaking					
8. Reminds participants to maintain confidentiality (HIPAA) – uses ECHO ID for case presentations					
9. Briefly reviews agenda					
10. Eliminates environmental distractions (avoids side conversations, rustling of papers, whispering, unnecessary gestures)					
11. The facilitator engages all group members					
12. Invites clinicians to present patient cases					
13. Summarizes patient case presentation in 5 to 6 sentences					
14. Provides evidenced based articles/references as needed to support recommendations given or to support discussion					
15. Shares all recommendations for treatment with participants, presenter, and other facilitators					
16. Ensures that words such as “consider” or “recommend” are used when providing recommendations					

