



# Facilitating Feedback

*CORD Academic Assembly April 2<sup>nd</sup>, 2019*

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## What is feedback?

- Feedback is an essential part of learning, growth, and academic success.
- It is providing specific information of observed performance in respect to a standard, with the intent to improve the learner's knowledge and performance to reach a common goal.
- Feedback requires two main players: the giver of feedback and the receiver of feedback.
  - The Giver of feedback should be equipped with tools to give constructive, specific, timely feedback.
  - The Receiver of feedback must be able to critically appraise the information given, compare this to their sense of self and performance, in order to incorporate the feedback and make a change.

## Characteristics of High Quality and Low Quality Feedback

| High-Quality Feedback  | Low-Quality Feedback   |
|--|--|
| Objective- based on direct observation and<br>Balanced on corrective and reinforcing behavior  | Focused only on positive (sugar-coated) or only on negative<br>Feedback on behavior that was NOT directly observed |
| Specific based on examples and concrete details  | Too general (lacking specific details or concrete examples)  |
| Timely: given as soon as possible to enhance self reflection and memory of event   | Poorly timed or late in delivery (days to weeks after the event)   |
| Timed based on recognition of situational and environmental contributors (ie: not given immediately after an emotionally heightened event) | Disregards emotional responses and situations  |

|  |   |
|--|---|
| Communicated in a professional, respectful manner even-tempered way <ul style="list-style-type: none"> <li>• Respectful communication</li> </ul> | Aggressive in tone (can be seen as personal attack) <ul style="list-style-type: none"> <li>• Lack of clarity can lead to confusion in the receiver</li> </ul> |
| Focused on future behavior   | Focused on past behavior  |
| Followed by an action plan for improvement   | Feedback is given in isolation with no suggestions on how to improve  |

### **What are barriers to *GIVING* Feedback?**

- Time
  - Busy high volume, high acuity environment with multiple interruptions creates a difficult atmosphere to slow down and give/receive feedback
- Training on how to give feedback
  - Many programs do not incorporate sessions for faculty on how to give feedback.
  - Lack of faculty development
  - Lack of observation to determine if this skill is mastered
- Faculty Factors
  - Training/Faculty Development on how to give feedback
  - Other commitments by faculty bidding for their attention and time
- Survey Fatigue-Surveys are the mainstay way to give feedback in residency in the form of milestones leading to survey fatigue
- No enforcement (ask if any places have requirements or enforcement for this, who keeps track that this is getting done?)

### **What Are Barriers to *RECEIVING* Feedback?**

- Training on how to give and receive feedback.
  - Many programs do not incorporate sessions for residents and learners on how to receive feedback.
- Resident Engagement/Perceived Engagement-Must address common triggers that affect receiving feedback.
- Faculty Factors
  - Faculty not sure how feedback will be received by learner
- Survey Fatigue-Surveys are the mainstay way in residency for residents to receive feedback, but learners do not get orientation on how to interpret the feedback in these forms

| Trigger Type                | Definition  | Ways to overcome this trigger   |
|-----------------------------|---|---|
| <b>Truth Trigger</b>        | Is information given in feedback correct or incorrect?  | <ul style="list-style-type: none"> <li>Receiver must clarify what they believe is wrong in feedback</li> <li>Must also think about both sides before coming to judgment rather than disregarding entire feedback as “wrong” or “false”</li> </ul>   |
| <b>Relationship Trigger</b> | Who is the information coming from- does the receiver trust the giver based on character, competence, credibility, and do they have a rapport/connection with them? | <ul style="list-style-type: none"> <li>Receiver should separate person from the message.</li> <li>Guard against reacting to <i>who</i> is saying it vs <i>what</i> they are saying</li> <li>See strength and weaknesses</li> <li>Lay aside relationship frictions to learn from feedback</li> </ul> |
| <b>Identity Trigger</b>     | How does this feedback conflict with the receivers identity (“sense of self”)   | <ul style="list-style-type: none"> <li>Must compare the feedback to how we see ourselves (ie: at our best and at our worst, how would this feedback fit? Is there any truth in what is being said)</li> </ul>   |

Stone D, Heen S. *Thanks for the feedback: the science and art of receiving feedback well*. New York, NY: Penguin Books; 2014.

### **Techniques to increase compliance in feedback:**

- Make it easy of use and access
- Avoid excessively long survey tools
- Includes comment boxes, as they are valued more by residents/learner than numeric score
- Training:
  - Faculty development to train faculty to give feedback
  - Residency/learner development to train learner to receive feedback (“Thanks for the feedback” book).
- Technology (ability to have app on phone to do feedback, ability to voice dictate comments, less work for coordinators to manually enter if written feedback)
- Incentives (tied to recognition or compensation)
- Feedback Culture (enhance expectation of feedback as part of clinical teaching)

## **Strategies for dealing with faculty members who provide inappropriate or ineffective feedback**

- Sharing examples of appropriate feedback
- Workshops led by residency leadership
  - Feedback on Feedback
  - Practice sessions with specific techniques discussed (timeliness, specificity, action plan, etc)
- Help develop a feedback culture (what is the consequence of poor feedback)
- Remediation
  - Discuss in person
  - Identify hurdles
  - Encourage self reflection
  - Identify personalized strategies

### **Additional Resources:**

- Stone D, Heen S. Thanks for the feedback: the science and art of receiving feedback well. New York, NY: Penguin Books; 2014.
- Ende J. Feedback in clinical medical education. *JAMA*. 1983;250(6):777–81.
- Ramani S, Krackov SK. Twelve Tips for Giving Feedback Effectively in the Clinical Environment. *Medical Teacher*. 2012;34(10):787-91.