



Facilitating Feedback

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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 Balanced on corrective and reinforcing behavior	Focused only on positive (sugar-coated) or only on negative 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"> • Respectful communication 	Aggressive in tone (can be seen as personal attack) <ul style="list-style-type: none"> • Lack of clarity can lead to confusion in the receiver
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
Truth Trigger	Is information given in feedback correct or incorrect?	<ul style="list-style-type: none"> Receiver must clarify what they believe is wrong in feedback Must also think about both sides before coming to judgment rather than disregarding entire feedback as “wrong” or “false”
Relationship Trigger	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"> Receiver should separate person from the message. Guard against reacting to <i>who</i> is saying it vs <i>what</i> they are saying See strength and weaknesses Lay aside relationship frictions to learn from feedback
Identity Trigger	How does this feedback conflict with the receivers identity (“sense of self”)	<ul style="list-style-type: none"> 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)

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.