

Giving Feedback: Setting Expectations

Stephanie Dewar, Andy Nowalk, and Lynn Cabral

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Objectives

- Review the components of *effective* feedback
- Discuss the barriers to feedback
- Evaluate effectiveness of feedback sessions
- Demonstrate meaningful evaluation comments
- Develop an approach to feedback and evaluations

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Effective Feedback

- Anybody who believes that all you have to do to be a good teacher is to love to teach also has to believe that all you have to do to become a good surgeon is to love to cut.
 - Masnerus L. The New York Times. 11/7/93
- The ability to give feedback effectively is one of the defining characteristics of master teachers.
 - Torre DM. Acad Med 2005; 80(10)

What is Feedback?

- Sharing observations and recommendations with a learner
- Formative, ongoing, timely
- Non-judgmental, specific, descriptive
- Allows learners to improve BEFORE evaluation
- Focus on behaviors that can be controlled and modified

What is Evaluation?

- Summative
- Judgment based on norms or peers
- Determine whether learner has met objectives
- Quality assurance for the profession, documents accomplishments

Feedback versus Evaluation

	Feedback	Evaluation
When?	Ongoing, starts from day 1	End of rotation
Directed by?	Learner and teacher objectives	Established norms for performance
Driven by?	Specific observations to drive improvement	Retrospective review of performance
Best accomplished?	In person , verbal and descriptive	In person , verbal and written

Effective Feedback

- Outline expectations at the beginning of the rotation (from learner *and* from teacher)
- Prepare the learner to receive feedback (“This is feedback”)
- Ask the learner for a self-assessment
- A wide array of observed behaviors is worthy inspiration for feedback.
- Describe to the learner what he or she is doing
- Focus on the actions observed rather than assumptions of the trainee’s intentions.
- Agree on a plan for improvement

Without Feedback

- Silence may indicate approval
- Learner will make assumptions
- Good behavior is not reinforced
- Mistakes go uncorrected

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What are your barriers?

Common Reasons for Not Giving Feedback

- I don't want to be the bad guy
- I don't want to upset them
- I don't want to make a big deal out of this
- I don't want to ruin their grade/career
- I may have contributed to the problem
- I know they realized it was wrong and will not do it again
- It's too late
- I don't like confrontation

Feedback Hack

life·hack

/ˈlɪfˌhæk/

noun informal

noun: life hack

a strategy or technique adopted in order to manage one's time and daily activities in a more efficient way.

Small group activity

- At each table take 5 minutes to discuss your biggest barriers to giving feedback
- Then take 5 minutes to share your best hacks for giving feedback
- Have one person present the most difficult barrier and the best hack your group discussed

Effective Feedback

- Feedback takes time
 - Say it!
 - Schedule it!
- Start with the end in mind
 - Set objectives!
- Focus on behaviors
 - Name it!
 - Be specific!
- Make feedback timely
 - Don't wait!

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Giving Feedback: Session 1

- <http://chpmediasite.chp.edu/Mediasite/Play/137b1c121a674b18b5cc3dedbc899e731d>
(Example of feedback not done well; requires CHP log-in)
- 1:41

Observations

- Timely and expected
- Timing was not optimal
- Positive comments but no specifics
- Did not solicit learner's objective
- Gave second hand constructive feedback
- No other room for improvement offered

Giving Feedback: Session 2

- <http://chpmediasite.chp.edu/Mediasite/Play/c080926072504f2d82cec2d16ea7b1f01d>
(Example of improved feedback; requiresd CHP log-in)
- 3:26

Observations

- Reflected back on learner's goals
- Expected
- Specific about teaching on rounds
- Highlighted her knowledge of patients and impact
- Problem solved together to make a plan for improvement
- Agreed to reevaluate at another time

Giving Feedback: Session 3

- <http://chpmediasite.chp.edu/Mediasite/Play/27c90b84843f49dc819a12ef032e5d011d>
(Example of feedback not done well; requires CHP log-in)
- 2:07

Observations

- Did not elicit learner's perspective
- Gave specific issues to improve
- Too many behaviors addressed

Giving Feedback: Session 4

- <http://chpmediasite.chp.edu/Mediasite/Play/2c4f001701ee419ea77039cd0c4e18101d>
(Example of feedback improved; requires CHP log-in)
- 2:18

Observations

- Expected
- Reflected back to learner's goals
- Elicited learner's perspective
- Gave other positive feedback
- Problem solved together for next steps
- Made a plan to revisit her progress

Giving Effective Feedback

- Expected
 - tell learners that you will be providing feedback
- Well-timed
 - should be given as soon after the observed behavior as is practical
- Based on specific, observed behavior
 - Secondhand data may lack authenticity

Giving Effective Feedback

- Focus on behavior that can be changed
 - Stay focused on the behavior, even if you feel it originates from a less-than-ideal personality
- Limit to the most important aspects of performance
 - Too much feedback will be seen as berating
- Elicit the learner's perspective
 - What was done well, what could be improved?
 - Ask, tell, ask

Giving Effective Feedback

- Be descriptive not judgmental
 - Be specific about what needs to be changed
 - You are correcting the behavior, not the person
- Include an action plan and follow up
 - Offer suggestions for how to improve

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PROVIDING MEANINGFUL WRITTEN COMMENTS ON EVALUATIONS

Lynn Cabral, MD

Pediatric Inpatient Medicine Clerkship

Director; UPSOM

Paul C. Gaffney Diagnostic Service



Objectives

- Discuss the benefits of informative comments
- Describe the content of meaningful written evaluations
- Assess examples of comments for deficiencies

What do Meaningful Comments Offer?

- Complement a scaled evaluation
 - Numeric ratings often do not distinguish the various dimensions of clinical competence.
 - Written comments should justify the scaled ratings
- Give Formative Information
 - Gives the learner information about the performance (both strengths and weaknesses).
- Provide Summative Information
 - Provides the stakeholders with evidence of the learner's performance

What Makes Comments Meaningful?

Descriptive

Non-judgmental language

Behavioral focus (not personality based)

Specific (not generalized)

Offer concrete suggestions for the learner to attain a higher level of performance

...What Makes Comments Meaningful?

Descriptive

- Actions are described clearly
- If a descriptor is used, then explain what made it so.

“He wrote great H&Ps.”

Instead of “great”

“His H&Ps were organized, concise, yet complete, containing expanded but appropriate differential diagnoses and accurate plans.”

...What Makes Comments Meaningful?

Behavioral Focus

- Comment on behaviors, rather than elements of the learner's personality (positive or less so).
- Describe the actions and the effect.

Try this

- Instead of “Lazy”
“The resident arrived 15-20 minutes late routinely, which limited pre-rounding and led to inaccurate data presentation and decision making on rounds.”
- Instead of “**Pleasant.**”
“Even in stressful and busy situations, the resident remained unruffled, which lead to an environment where the learners felt comfortable asking questions about patient care.”

...What Makes Comments Meaningful?

Specific

- Talk about discrete actions, not generalizations

Example

- “Great Doc!”

..What Makes Comments Meaningful?

- NON-JUDGMENTAL

- Avoid labeling a learner as solid, good, excellent.
- These labels offer no information about what the individual actually did.
- Giving specifics can help clarify what the next step is for the learner

- **“Solid Clinical Performance”**

- **“Expected performance”**

- **“Good job.”**

What else to avoid in written comments?

- Information not already discussed with the resident verbally.
- Catharsis for the evaluator
 - “this was a soul-sucking experience for me.”

What's Wrong with This Catch Phrase?

- “A Pleasure to Work with “
 - Judgmental
 - Not specific
 - Contains no suggestions for improvement
- “A Team Player”
 - Might be useful if specific information regarding how the learner helped the team.
 - -He updated the white board on other team member's patients and called the pt's PCP without prompting.
- “Needs to read more”
 - Vague, but has potential
 - “She was not familiar with UTI management midway through her intern year. I suggested she read the AAP UTI practice guideline.”
- “Will make a wonderful house officer, physician.”
 - Based on the evaluator's guess. Offers no information on what the learner did to merit this opinion.
 - Lacks specificity
 - Judgmental (positively, but still)
 - Includes no suggestions for improvement

Framework

1. Strengths and weaknesses

2. RIME: Classified in 4 easily observable domains

- Reporter- gathering of information
- Interpreter- using information appropriately to make clinical decisions
- Manager
- Educator

3. PRIME+/-

- Professionalism, RIME, strengths and weaknesses

Take home points

- Written comments
 - Document the learner's performance
 - Help learner progress to the next stage of training
- **Elements of meaningful comments**
 - Complement the scaled evaluation
 - Specific
 - Non-judgmental
 - Descriptive
 - Offer concrete suggestions for improvement.

Frameworks to consider when writing comments

- RIME
 - PRIME +/-
- Take notes on your learners. Don't rely on your memory

Student M

- **Evaluator 1**

- M. communicated extremely well with families - spoke very directly in appropriate language and really became the point person in his pt's care. He followed up on everything discussed on rounds, took initiative and was a great help to the team.

- **Evaluator 2**

- Highly Satisfactory. It is possible I could be talked into higher if others agree to that.

- **Evaluator 3**

- M.'s enthusiasm and advocacy for patients and families is refreshing. He is an active and adult learner and his bedside manner is impeccable.

- **Evaluator 4**

- M. had an excellent performance on the team. He demonstrated excellent interest and initiatives. He has a superior fund of knowledge and was able to synthesize information and he was able to formulate pointed and appropriate questions. His clinical skills were above average. His oral presentations were appropriately detailed and concise. He had excellent interactions with patients and families as well as the medical team.

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Questions?