

FEEDBACK

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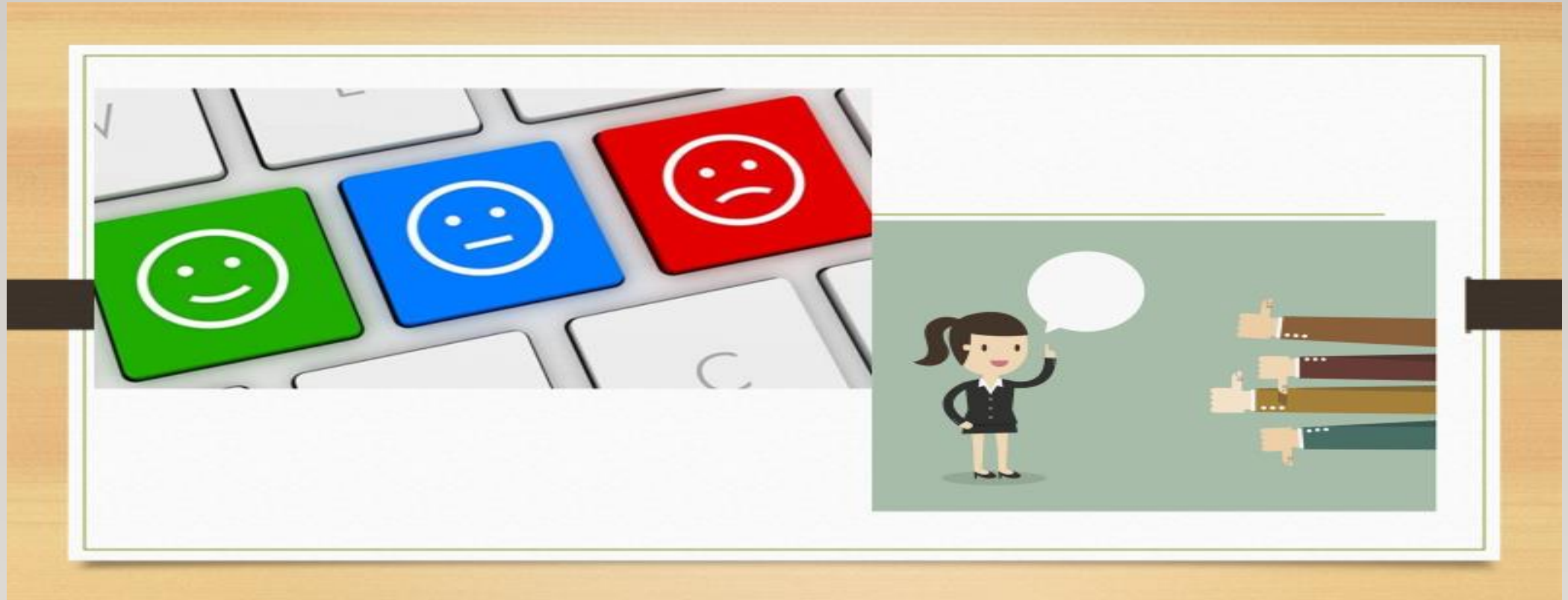
NABL & NABH ASSESSOR



ROLL
POSITIVE THINGS
LEARNING HELPFUL
PERSONAL WRONG CRITICISM
IMPROVEMENT
thanks CONSTRUCTIVE NON-CONSTRUCTIVE
EYE SANDWICH loop GENERALLY DONE
scary UGH tachycardia IMPROVE
MUCH CRITIQUE



RESIDENTS AS TEACHERS





SPECIFIC LEARNING OBJECTIVES

- Define feedback
- Discuss the importance of receiving & giving feedback
- Characteristics of effective feedback
- Describe strategies for delivering feedback

DEFINITION

What exactly is feedback ??

- Acknowledging strengths and weaknesses so that one can utilize this information to not only improve but to reinforce desirable behavior and attitude.

WHY FEEDBACK IS IMPORTANT ?

- Giving constructive feedback has been considered a commitment between teachers and students for **overall academic and professional development.**
- The art of giving feedback to medical students about their performance and competence can act as a **strong motivating factor.**




- Considering that resident doctors play an important role in the education of medical students, a survey-based observational study revealed that peer observation and feedback of residents' teaching during work is not only feasible but also rewarding for the involved residents and thus should be encouraged.
- Moving a step further, the findings of another study revealed that the provision of feedback by faculty staff to resident doctors after observing resident-patient interactions is a complex and dynamic process. In this feedback-giving exercise, there is definite scope for the adoption of a potential newer approach that can assist in enhancing the effectiveness of faculty and residents both .



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- The usefulness of giving constructive feedback privately to **medical students at the time of bedside teaching** has been well documented and is found effective in acquiring and developing **clinical skills, communication skills and professional bedside manner by medical students**.
 - In a randomized controlled trial done to determine the impact of a pocket card and feedback session on Internal Medicine residents, it was concluded that residents in the intervention arm felt that their clinical and professionalism/ communication skills have improved to a significant extent based on the feedback **obtained from the inpatients**.

CHARACTERISTICS OF EFFECTIVE FEEDBACK

- Characteristics of Good Feedback:
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- Feedback should be... - Provided in a supportive environment –
 - Solicited – A preliminary orientation and agreement about learning goals is best, or ask “is now a good time to give you feedback?” –
 - Authentic – Provided by a trusted and reliable source, use “I” statements –
 - Limited – Choose one to two items on which you would like to focus - Well-timed – As soon as possible after the encounter, unless it was emotionally laden –
 - Specific and descriptive – Give specific examples of what you observed –
 - Balanced – Include both reinforcing and corrective feedback - Focused on modifiable behaviours – Do not focus on personality traits
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GUIDELINES FOR GIVING EFFECTIVE FEEDBACK

Ende's principles

- Appropriate setting
- Well timed
- Focus on performance not on individual
- Clear and specific
- Neutral /non judgmental language
- Emphasize positive aspects /not evaluative

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- Acknowledge the strength and reinforce their exemplary behavior.
 - Highlight the areas requiring improvement
 - Suggests measures for improvement
 - Followed by reflection by the giver and recipient and both .
 - Correct use of body language .

- **Beyond the Sandwich: From Feedback to Clinical Coaching for Residents as Teachers**

- [Lorrel E. Brown, MD](#)

- [, Deepa Rangachari, MD](#)

- [, Michael Melia, MD](#)

- https://doi.org/10.15766/mep_2374-8265.10627

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- [EDUCATIONAL OBJECTIVES](#)
- [INTRODUCTION](#)
- [METHODS](#)
- [RESULTS](#)
- [DISCUSSION](#)

- [Abstract](#)

- [PDF](#)

- [Tools](#)

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- **Introduction:** Senior trainees (residents) are poised



Pendleton Rules

Phase	Supervisor	Trainee
Positive aspects		Tells what went well
	Complements on what went well	
Areas for improvement		Tells what went wrong, what could be done better
	Complements on what could be done better	
Action Plan for improvement		Tells Action plan
	Approves action plan with modifications	
Summary		Summarizes the key points
	Complements if necessary	

CHARACTERISTICS OF EFFECTIVE FEEDBACK

- Clearly defined
- Timely
- Specific
- Objective
- Consequences explained
- Nonthreatening
- Right amount
- Helps in next steps

Giving Good Feedback

Is it **REALLY**
that simple?



METHODS OF GIVING FEEDBACK

- Informal feedback
- Formal feedback
- Formative feedback
- Summative feedback

- **FEEDBACK SANDWICH**

Opens discussion with positive observation , follows with a corrective suggestion , and ends with a reinforcing positive statement .

- **ASK-TELL - ASK technique**

Ask about skill or performance / TELL ; how improvement can be done / ASK how he will improve the performance by utilising inputs .

- SBI (Situation –Behaviour- Impact) model
- PEARLS(Promoting excellence and Reflective learning in Simulation)

helps in developing a variety of skills, including decision making , improving technical skills , team work training , interprofessional collaboration using simulation .

- CEDAR model

CONTEXT- EXAMPLES- DIAGNOSIS- ACTION – REVIEW



MULTISCORE FEEDBACK (MSF)

- By ACGME

It is the feedback given to medical students at the time of bedside teaching

- MSF uses inputs from peers , colleagues , staff and patients to gather information about an individual's behavior in the clinical setting .
- Assessment of Professional Behavior (APB) : provides physicians , resident doctors , medical students and fellows with feedback on professional behavior , ethical practice of medicine .

FEEDBACK SEEKING BEHAVIOR

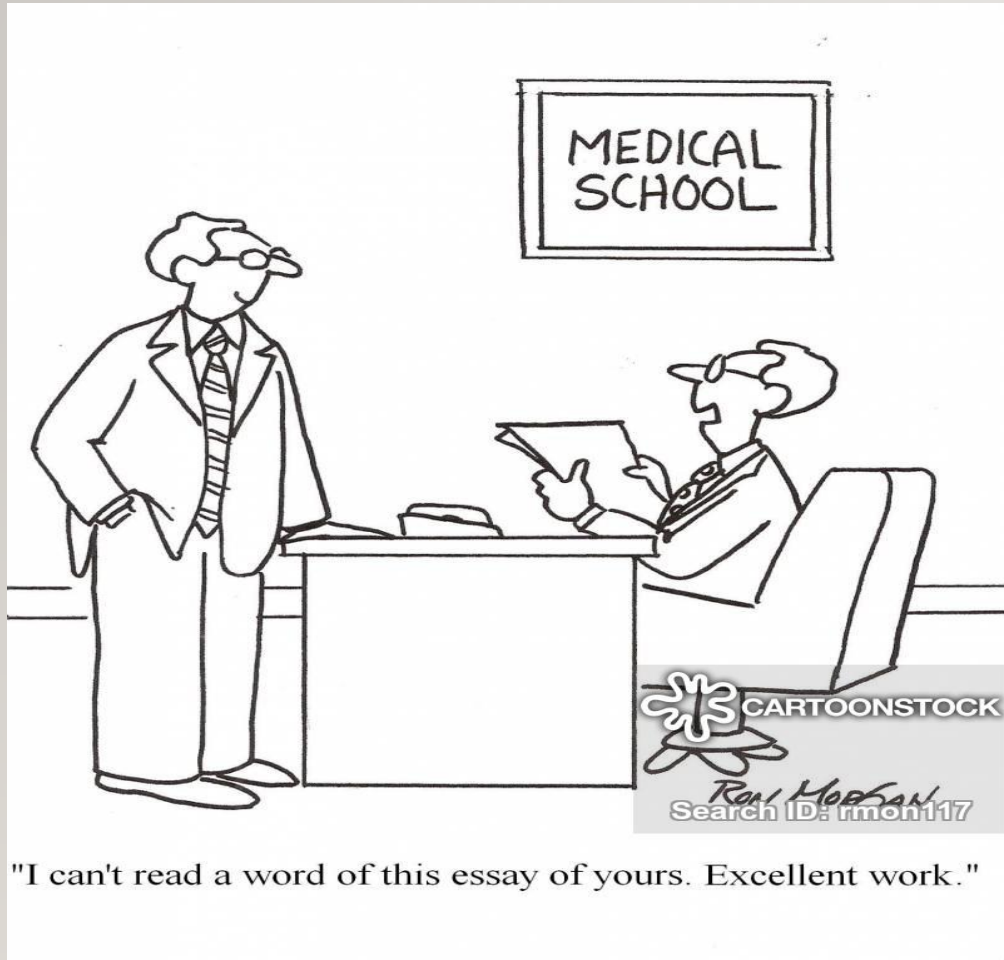
- Learners are more receptive to feedback provided by people whom they trust .
- Method used to obtain feedback
- The timing of feedback seeking
- Intension and characteristics of feedback provider
- Motive of learner

BARRIERS TO GOOD FEEDBACK

- 1. Little or no instruction on how to give feedback
- 2. Fear of damaging relationship with learners
- 3. Cultural context issues
- 4. Hierarchy issues between teacher and learner
- 5. Students' ability to self-assess

Table 1. Bipolar Descriptors of Recommended and Nonrecommended Feedback Techniques

Nonrecommended Feedback Techniques	Scale	Recommended Feedback Techniques
Creating a disrespectful, unfriendly, closed, threatening climate	-----	Creating a respectful, friendly, openminded, unthreatening climate
Not eliciting thoughts and feelings before giving feedback	-----	Eliciting thoughts and feelings before giving feedback
Being judgmental	-----	Being nonjudgmental
Focusing on personality	-----	Focusing on behaviors
Basing feedback on hearsay	-----	Basing feedback on observed facts
Basing feedback on generalizations	-----	Basing feedback on specifics
Giving too much/little feedback	-----	Giving right amount of feedback
Not suggesting ideas for improvement	-----	Suggesting ideas for improvement
Basing feedback on unknown, nonnegotiated goals	-----	Basing feedback on well-defined, negotiated goals





When giving feedback, there will always be something positive for you to comment upon. It's up to you to find it



Summary

- **Feedback is a cornerstone in learning and in teaching clinical competence**
- **Feedback should be specific, timely, and aimed at next steps to improve further learning and performance.**
- **Involving the learner and using a structured approach to giving feedback will enhance the quality of learning.**

REFERENCES

- Twelve tips for giving feedback effectively in the clinical environment SUBHA RAMANII & SHARON K. KRACKOV2 1 Harvard Medical School, USA, 2 Albany Medical College, USA 2012; 34: 787–79 MEDICAL TEACHER
- International Journal of Research in Medical Sciences Mandhane N et al. Int J Res Med Sci. 2015 Aug;3(8):1868-1873 Positive feedback: a tool for quality education in field of medicine Nisha Mandhane*, Sharique Ansari, Tanveer Parvez Shaikh, Sandesh Deoleka

WHAT'S YOUR FEED BACK

VALUE YOUR FEEDBACK

