Acknowledgements

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Objectives

1. Define feedback.
2. Explain why feedback is important.
3. Describe the elements of effective feedback.
4. Employ behaviors used to give effective feedback.
What is “Feedback”?

Specific information about the comparison between a trainee’s observed performance and a standard, given with the intent to improve the trainee’s performance.

(Van de Ridder et al., 2008. What is feedback in clinical education? Medical Education, 42, 189-197.)
Why Bother?

• Promote learning and understanding

• Develop and improve skills
  ▪ Achieve clinical competence

• Ability to self-assess
  ▪ Important for Self-Directed Learning
  ▪ Maintenance of competence

Feedback is highly desired
Insufficient amount provided
“Nobody tells me how I’m doing”
“I didn’t know I was doing anything wrong”
Remediation of Problems
Feedback by osmosis/pimping

(Veloski et al., 2006)

(Westberg & Jason, 1991)
6 Stages of Feedback

1. Observe trainee behavior
2. Ask the trainee for their Self-Assessment
3. Describe or Model the desired behavior
4. Ensure that the trainee understands the difference between the current and desired behavior
5. Develop a plan to close the gap
6. Follow-up on improvement

(Brown, Hodges, Wakefield, 1995)
1. Observation

- Observation is the currency of feedback
  - What does the learner say?
    - How do they say it? Is it sufficient? Is it appropriate?
  - What does the learner do?
    - How do they do it?

- Forms the framework of the feedback
  - When should the feedback occur?
    - Sense of immediacy?
  - Where does the feedback take place?

- Are you engaging the trainee sufficiently to provide any feedback?

- Is the learner involved/invested/included?
2. Self-Assessment

- The “double you”-
  - How do you think that you did with this patient assessment?
  - Why do you think it is important that you research patient cases and seek out extra readings on your own?

- Self-reflection is a key competence
  - Important for SDL, professional competence
  - Learned skill
Functions of Self-Assessment

- Functions of self-assessing one’s strengths
  - Act with appropriate confidence
    - Choose to persist on plan of action in the face of negative feedback
  - Can set appropriately challenging learning goals
  - Select learning objectives within grasp
    - Motivation and personal satisfaction

- Functions of self-assessing one’s weaknesses
  - Self-limit in the areas of limited competence
  - Help set learning goals
  - Setting realistic expectations of oneself

(Eva & Regehr, 2005)
Unskilled and Unaware of It

Unskilled and Unaware of It
Grammar – Study 3

Kruger and Dunning 1999
Unskilled and Unaware of It

- Most performers overestimate
  - High achievers underestimate
  - Average achievers more accurate self-assessors

- Worst offenders: Underachievers
  - Irremediable?
  - Reality checks from preceptors is vital

- Consistent with studies in medicine as well as other disciplines (Davis et al., 2006)
3. Describe or Model Desired Behavior

- Feedback is provided by imparting to the trainee a clear understanding of the target performance
- Your poor behaviors as a professional are also keenly observed
  - Do you want these behaviors to be seen as best practice by the learner?
  - This requires reflection on your part as an educator
4. Understanding the Gap

- Ensure that the students understands the difference between the current and desired behavior
  - Make sure the message has been heard, and understood
  - Have the student paraphrase the feedback
5. Action Plan to Close the Gap

- Strategies for improvement
- Explore potential solutions together
- Educational prescription
- Feedback is only useful if the student has an alternate course of action
  - “Here’s what you need to do before we meet again…”
  - “Here’s the approach I would like for you to consider…”
  - “Let’s plan to review the procedure tomorrow…”
6. Follow-up on Improvement

- Set a time to review the learner’s progress
  - “1-minute preceptor”
    - Has the lesson been learned?
    - Has the behavior been modified?
    - Additional feedback
Guidelines for Giving Feedback

Feedback is **most useful** when it is...
- Specific
- Constructive
- Applicable
- Supportive
- Fair and honest
- **Timely, Immediate**
- Focused on behavior
- Given privately when required
- Based on first hand information

Feedback is **least useful** when it is...
- Global
- Impossible to change the situation – frustration!
- Based only on one incident
- Delayed
- Judgmental / personality attack
- Personal info given in front of others
- Hearsay or speculative
References

- Medina M. Providing feedback to enhance pharmacy students’ performance. Am J Health-syst Pharm 2007; 64: 2542-45
References