



PGY1 Orientation: Giving Feedback to Med Students

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What are the characteristics of good feedback? (verbal / written)

*In your binder notes, jot down three (3) pieces of
information you would like (or would have liked) to see
in your personal feedback in medical school.*



Purpose of Feedback

It is an **educational tool** crucial to improving knowledge, skills, and understanding in some content area or general skill (e.g., problem solving), and it is depicted as a significant factor **in motivating learning and modifying the learner's thinking or behavior** specifically for the purpose of improvement.

A means by which we put into practice the ability to see ourselves as others see us. Conversely, it is through feedback that others know how we see and perceive them.



Feedback Goals

1. To provide the **learner** with insight regarding the trajectory for acquisition of a specific skill
2. To **clarify milestones** or **benchmarks** for skill development and refinement.
3. To distill a clear message about **proper patient care**.



**What pieces of information
should be included in feedback?**





7 Essentials of Effective Feedback



Be Frequent

Do appraise (verbal/written) often as a response to a need. Tailor these to day-to-day workplace moments.

His **patient presentations today (3/21/17)** started off somewhat slow and overly detailed, but he showed a lot of improvement in this arena as well - demonstrating more concise presentations later. He was hardworking, responsible, and prepared for rounds each day.

Don't squeeze all into one moment (e.g., performance review)



Be Specific and Clear

Do try to link feedback clearly and specifically to goals and performance.

_____ is a very good med student who was frequently in my clinic, was accurate with **charting** and **H&Ps**, and easily **established rapport with my patients**. [...] A goal would be to keep reading! The difference between most physicians is not innate ability or intelligence; but rather the determination to work harder than anyone else.

Don't deliver a speech or be unclear. (e.g., “You need to push yourself”)

Nice work on ____ procedure but it could be better. *Push yourself*. You'll get there.



Be Evidence-Based

Do distill your message clearly.

_____ performed well during my two weeks on the inpatient medicine service. **He maintained a personal census of 2-3 patients, and was not afraid to take on challenging/complex patients early in his first clinical rotation.** His notes and H&Ps were well organized - he was **responsive to feedback** and was quickly able to improve areas that needed attention. ____'s medical knowledge was appropriate to his level of training and he was able to apply information gained in his first two years to the clinical setting. His [...].

Don't presume that everyone understands your thoughts

_____ is a superstar!



Be Kind and Accurate

Do give unbiased and objective feedback that is within the power of the student to alter.

___ is continuing to *improve ability to put own cultural mores aside* and understand situation of her patients, even if it is very different from her own.

Don't include moral or religious edicts to “treat others as yourself” and avoid emotional and personal opinions.



Be Dialogue Oriented

Do listen critically to the student's response to feedback and give your full attention. (e.g., verbal and non-verbal cues)

_____ was always on time for his requirements during his week of wards. He was also very knowledgeable about therapeutics and plan of care. **A suggestion for improvement: be cautious in your reactions and comments at times.** Some people may find them offensive without you meaning for them to be. Regardless of your interest in the rotation, you should also show initiative. Continue to read and improve your knowledge base, which will come with time and experience.

Don't deliver a speech, hand out a previously written document where info flows one direction, or look at your phone/text.

Be Beneficial

Do strive to accomplish one goal through the feedback. Brainstorm ways for the resident to improve or change/ modify a poor behavior.

As with all students, he should continue to read and grow his medical knowledge - aiming to understand *why* certain DX or TX options are the next best step on the algorithms. **He should also focus on** continuing to identify the most pertinent information when presenting patients - knowing every detail but presenting the most pertinent ones. Good start to the third year!

Don't fill a comment box simply to move the process

N/A



Be Early

Do give immediate feedback (positive and negative) soon after the behavior takes place to lay a foundation down for expectations and retention of procedural or conceptual knowledge.

I was able to work with _____ **today during** the robotic simulation session. Excellent job **taking history and performing physical exam**. Excellent job with robotic sim skills.

Don't presume recipient will “figure it out” eventually.



Case Example

Case Example

		N/A	Inadequate	Below Expected	Expected	Above Expected	Exceptional
Performance		0	1	2	3	4	5
1	Initiative	0	1.0	>> X <<	3.0	4.0	5.0
2	Assumption of responsibility	0	1.0	>> X <<	3.0	4.0	5.0
3	Motivation	0	1.0	>> X <<	3.0	4.0	5.0
4	Professional Relationships	0	1.0	2.0	>> X <<	4.0	5.0
5	Team Participation	0	1.0	2.0	>> X <<	4.0	5.0
6	Relationships with Patients	0	1.0	2.0	>> X <<	4.0	5.0
7	Charting	0	1.0	2.0	3.0	>> X <<	5.0
8	History Taking	0	1.0	2.0	>> X <<	4.0	5.0
9	Physical Examination	0	1.0	>> X <<	3.0	4.0	5.0
10	Oral Verbal Ability	0	1.0	2.0	3.0	>> X <<	5.0
11	Professional Judgment	0	1.0	2.0	>> X <<	4.0	5.0
12	Medical Knowledge	0	1.0	2.0	3.0	>> X <<	5.0
13	Ability to Organize Patient Problems	0	1.0	2.0	3.0	>> X <<	5.0
14	Knowledge of Therapeutics	0	1.0	2.0	>> X <<	4.0	5.0
15	Knowledge of Preventative Medicine	0	1.0	2.0	>> X <<	4.0	5.0
16	Manual Skills	0	1.0	2.0	>> X <<	4.0	5.0

Areas of Improvement: (Question 5 of 6)

Disconnect from team, showed up late, little interest in learning or participating with team



Case Example

Areas of Improvement: The student showed up late and did not make it on time for pre-rounds demonstrating a **lack of motivation** and **assumption of responsibility**. S/he did not take physical **initiative** to speak with patients and obtain a complex physical exam. For example, once we finished rounds, I did not see her/him follow back up with the patient, check on their progression or even fully comment on their care once we started different therapy. My advice is to engage with the other team members and go over your exam findings, and/or go over your presentation with them before you get to table rounds. By doing that, s/he will be more active within the team and might learn something more than what is written in the chart.

Review

- ✓ Feedback should have a specific purpose and the message should be distilled clearly.
- ✓ Review the 7 Essentials of Feedback document for guidance
- ✓ Attend GME/E*Value training session and become familiar with E*Value evaluation system.
- ✓ When working with Med Students, review the goals & objectives before completing evaluations on them.

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resources

<http://units.sla.org/Chapter/cal/feedback.pdf>

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