

WE NEED TO TALK... PROVIDING EFFECTIVE FEEDBACK Lena McDowell, PharmD Assistant Clinical Professor Introductory Pharmacy Practice Experiences Coordinator

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FACULTY DISCLOSURE/CONFLICT OF INTEREST

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I, Lena McDowell, have no actual or potential conflict of interest in relation to this program.



- Describe the differences between feedback and evaluation.
- Explain techniques for providing effective feedback.
- Given example case scenarios, apply strategies to prevent and manage difficult learning situations.

(I) Poll Everywhere

To join:

1) Go to the website PollEv.com/LenaMcDowell

2) Text LenaMcDowell to 37607



What do you think of when you hear the word feedback?



https://get.pxhere.com/photo/angry-close-up-face-facialexpression-facial-hair-fashion-fashionable-formal-guyindoors-looking-male-man-mean-model-outfit-personphotoshoot-tie-wear-yelling-1552811.jpg



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https://images.pexels.com/photos/3874031/pexels-photo-3874031.jpeg?cs=srgb&dl=two-people-having-coffee-whiletalking-3874031.jpg&fm=jpg







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FEEDBACK

Helpful information or criticism that is given to someone to say what can be done to improve a performance, product, etc.

https://www.merriam-webster.com/dictionary/feedback#:~:text=English%20Language%20Learners%20Definition%20of,a%20performance%2C%20product%2C%20etc.

What approaches to providing feedback have been successful for you?

Тор



FEEDBACK VS. EVALUATION

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	Feedback	Evaluation
Timing	Timely	Scheduled
Setting	Informal	Formal
Basis	Observation	Observation
Content	Objective	Objective
Scope	Specific Action	Global Performance
Purpose	Improvement/ Conveys Information	Grading/ Conveys Judgement

Wilkinson ST, Couldry R, Phillips H, Buck B. Preceptor development: providing effective feedback. Hosp Pharm. 2013;48(1):26-32. doi:10.1310/hpj4801-26





WHAT? WHERE? WHO? HOW? WHY? WHEN?

https://www.team4kids.com/incorporating-wh-questions-into-your-daily-routines/



> "Negative feedback isn't always bad and positive feedback isn't always good. Too often, they say, we forget the purpose of feedback — it's not to make people feel better, it's to help them do better."

Tugend A. You've Been Doing a Fantastic Job. Just One Thing... New York Times. 2013 April 5.

"Feedback has the purpose of raising the trainee's self awareness about their performance and leaves them to choose their future actions."

Hesketh EA, Laidlaw JM. Developing the Teaching Instinct, 1: Feedback. *Medical Teacher*. 2002;24(3):245-248. DOI: 10.1080/014215902201409911



PRINCIPLES OF GOOD FEEDBACK

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- 1. Helps clarify good performance
- 2. Facilitates the development of self-assessment
- 3. Delivers information to the learner
- 4. Encourages dialogue around learning
- 5. Encourages positive motivations beliefs and self-esteem
- 6. Closes gap between current and desired performance
- 7. Provides information to shape future teaching/learning

David J. Nicol & Debra Macfarlane-Dick (2006) Formative assessment and self-regulated learning: a model and seven principles of good feedback practice, Studies in Higher Education, 31:2, 199-218, DOI: 10.1080/03075070600572090ck



WHO IS INVOLVED?

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Preceptor

Learner



How to provide Feedback

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- Direct vs. elaborative
- Varies depending on:
 - Timing
 - o Amount
 - Mode
 - Audience

F Frequent





Timely



WHEN TO PROVIDE FEEDBACK

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- Consistently or on a regular basis
 - Ensures better chance for clarity
 - Allows for recall of specifics
 - Easier for learners to ask questions and reach understanding
- Focused attention is important
- Immediately in certain scenarios:
 - Incorrect information is provided
 - Patient care could be compromised





WHERE TO PROVIDE FEEDBACK

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▶ 1:1 (away from other learners)

Relaxed, private area



FEEDBACK STRATEGIES

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Feedback Sandwich

► W3

► 360°

Pendleton Four-Step Model

Situation Impact Behavior

When poll is active, respond at pollev.com/lenamcdowell
 Text LENAMCDOWELL to 37607 once to join

Which feedback strategy have you utilized?

Feedback sandwich	
W3	
360	
Pendleton Four-Step Method	
Situation Impact Behavior	



FEEDBACK SANDWICH

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- ► Technique is fast and efficient
- Ideal for new relationships but beneficial to existing relationships as well
- Bread: praise
 - Be specific
 - Example: "You did a great job providing monitoring parameters for both safety and efficacy of the patient's medications in your recent SOAP note."
- Meat: constructive feedback
 - Points the finger at the behavior not the learner
 - Avoid general terms "always" and "never"
 - Example: "This assignment is late. I recommend you review the rotation calendar and take note of future deadlines so your next assignment is submitted on time."



https://www.eater.com/2017/6/9/15763282/chick-fil-awhat-to-order-menu



https://www.timetoast.com/timelines/oreo-historybc7fde4d-11ae-42fc-847e-462b9243e76d

Dohrenwend A. Fam Pract Manag. 2002 Nov-Dec;9(10):43-46.





What worked well?





https://vicknowledgebank.net.au/wp-content/uploads/kb_project/1129/Loddon_Mallee_Bendigo_Health_CSSP_Module_1.6_Feedback.pdf



PENDLETON FOUR-STEP MODEL

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Ask learner: What do you think worked well?



Preceptor responds: I think what worked well for you was...



Ask learner: What do you think you could do to improve?

Preceptor responds: Improvements you could make are...



- Feedback from multiple sources who have interacted with the learner to provide multiple perspectives
- ► May include:
 - Peers (other learners)
 - Pharmacy technicians
 - Other healthcare professionals or preceptors
 - Supervisors
- Can be anonymous
- Good for focusing on teamwork and leadership skills



SITUATION BEHAVIOR IMPACT

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Situation	Outline situationClear and specific context	
Behavior	 Discuss specific behavior Most challenging part 	
Impact	 Highlight impact of learner's behavior Patient, team, practice site 	

Rank the feedback strategies in order of most likely to least likely to least

Feedback sandwich W3 360 Pendleton Four-Step Method

Situation Impact Behavior



RECOMMENDATIONS FOR PROVIDING FEEDBACK

- Set clear expectations at beginning of rotation
- Select an appropriate time and place
- Engage in a two-way conversation
- ► Be specific
- Provide actionable feedback
- Limit to a few items at a time
- ► Have learner help determine the course of action
- Ensure learner understands



FOUR DIMENSIONS OF MOTIVATION

Interest/ Relatedness Value Control/ Competence Autonomy

Usher, A, Kober, N. What Is Motivation and Why Does It Matter? Washington, D.C.: Center on Education Policy; 2012



CONTRIBUTORS OF LOW MOTIVATION

- ► Low confidence
- Distractions
- Personal safety needs
- Avoidance of interaction
- ► High level of stress and/or depression
- Lack of support/social isolation
- Low drive to succeed

Hendricson, B. Interpreting a Student's Apparent Lack of Motivation. Academy for Academic Leadership Newsletter; Nov 2012



THE 7 C'S MODEL OF MOTIVATION

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Hendricson, B. Interpreting a Student's Apparent Lack of Motivation. Academy for Academic Leadership Newsletter; Nov 2012



DIFFICULT LEARNING SITUATIONS

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Avoid feeling burned out
Three levels of prevention:





PRIMARY PREVENTION

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Goal: Prevent the problem before it occurs

- Set expectations and goals
- Communicate expectations
- Orientation is key
- Reassess often and at least at midpoint
- Provide thoughtful feedback and evaluations

"An ounce of prevention is worth a pound of cure."



Langlois JP, Thach S. Preventing the difficult learning situation. Fam Med. 2000;32(4):232-234.



SECONDARY PREVENTION

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Goal: Early detection and intervention

- Maintain awareness that things can go wrong
- Pay attention to warning signs
- Do not wait
 - $_{\circ}$ $\,$ Better success the early you intervene
- Provide specific feedback early and monitor closely





TERTIARY PREVENTION

HARRISON School of Pharmacy Goal: Manage an existing problem to minimize its negative impact

- Don't just try and stick it out
- Don't give a student a grade that was not earned
- Seek help if interventions are not working





MANAGING DIFFICULT SITUATIONS

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1. Communication

2. Documentation

Langlois JP, Thach S. Preventing the difficult learning situation. Fam Med. 2000;32(4):232-234. Langlois JP, Thach S. Managing the difficult learning situation. Fam Med. 2000;32(5):307-309.







Subjective: What do you think? Pattern?

Objective: Document specific behaviors

Assessment: Your diagnosis

Plan: Gather more data? Intervene? Get help?

Langlois JP, Thach S. Managing the difficult learning situation. Fam Med. 2000;32(5):307-309.



- A preceptor has two APPE students currently on rotation. It is week 3 of the 5-week rotation.
- Amy, one of the students has been late to the practice site two times over the last two weeks. This morning, she is late again.
- Amy has performed well above average in all other areas to date. There has been no effort to discuss the tardiness by Amy at all.

How would you handle this situation?

How would you handle this situation in case scenario 1?



- It is block 7 of Tim's APPE year, and he is on his Community APPE rotation in the ICU. After graduation, he has plans to complete a PGY-1 residency and pursue a career as a critical care pharmacist.
- The preceptor has noticed that Tim seems distracted quite often and never shows any initative to complete rotation activities unless prompted to do so. In addition, it has been difficult to engage him in any of the topic discussions to date. It is day 8 of the rotation.
- The preceptor is frustrated with what appears to be a lack of motivation from the student.

How would you handle this situation?

How would you handle this situation in case scenario 2?



- Jeff and Jessica are on their Clinical IPPE rotation. During the first few days of the rotation, Jeff notices how well the preceptor and Jessica relate. Many times, Jeff notices that when the preceptor asks a question of the students, she only looks to Jessica for an answer and rarely engages him personally.
- In general, Jeff begins to feel as if he is the "third wheel". At this point, he disengages from most activities, leaves early if possible, and simply observes when the interprofessional team is discussing patients.
- When confronted about his lack of motivation during the midpoint evaluation, Jeff says he just does not want to be there.

How would you handle this situation?

How would you handle this situation in case scenario 3?



- Melissa and Brian are APPE students on week three of their Primary Care rotation.
- The preceptor notices Melissa is taking much longer than Brian to complete her patient work-ups and is becoming concerned.
- During patient visits over the past three weeks, both Melissa and Brian have seemed ill-prepared. The preceptor wants to address the situation.

How would you handle this situation?

How would you handle this situation in case scenario 4?

What precepting pearls can you share with respect to providing effective feedback?



Which feedback strategy involves providing constructive criticism in between two praises?

360	
W3	
Feedback Sandwich	
Situation Impact Behavior	
Pendleton Four-Step Model	

You review the goals and expectations for your rotation during orientation on the first day. Which type of <u>prevention are you practicing?</u>





True or False: It is best to gather all of your feedback and save it to share it with the learner on the last day of the rotation.











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