Building a Culture to Enhance Feedback

*Susan Glover Takahashi, MA(Ed), PhD; Dr. Rebecca Dubé, MD, FRCPSC, MSc(HPTE)*

**Worksheet #2: Sample Cases**

**01**

As a Resident, I receive compliments or generic feedback. I’m told to keep doing what I am doing, ‘terrific to work with,’ ‘read more around cases,’ etc. While nice to hear, how do I reach the next level?

*How would you manage this scenario?*

*What are some specific words/phrases would you use?*

Someone whose confidence seems fragile – you want to try to bolster them up and fear that giving feedback may make them feel more insecure. At times, we feel like we may be being too gentle or too firm. How do we adjust the feedback to match the style that will resonate best with the trainee? How do we identify what form of feedback or coaching delivery will work best for the individual?

**02**

*How would you manage this scenario?*

*What are some specific words/phrases would you use?*

A Resident raised concerns about receiving ITERs which were quite good, but did not reflect the discussion the Faculty had with the Resident in person. Their scores were very good, but despite the Resident knowing there was robust feedback from Faculty sometimes there are absolutely no comments written on the ITER at all, and residents are consistently letting us know that the comments are the most important part of the form for them to grow, not just the numbers.

**03**

*How would you manage this scenario?*

*What are some specific words/phrases would you use?*

One challenging feedback/coaching conversation occurred with a Resident who had no insight into his/her weaknesses. When I brought them to his/her attention, he/she was very resistant to the feedback and emphasized that he/she felt he/she was unfairly judged, and the resident actually got fairly emotional. I think it perhaps had a bit to do with my delivery, as well as this Resident’s lack of insight.

**04**

*How would you manage this scenario?*

*What are some specific words/phrases would you use?*

A challenging feedback/coaching scenario was when there was a difficult clinical event that wasn’t very well managed and the opportunity for feedback was delayed. Returning to discuss the difficult event after a few days made the conversation more challenging.

**05**

*How would you manage this scenario?*

*What are some specific words/phrases would you use?*

**06**

I received feedback from a Faculty member that made a general, but critical/negative comment about my manner with patients, but then received no information as to the specific behaviours that caused this, or tips or coaching on how to move forward and make improvements in the future...

*How would you manage this scenario?*

*What are some specific words/phrases would you use?*

From a Faculty perspective, raising issues, and providing constructive feedback can be challenging with some Residents as they don’t feel a sense of the Resident ‘accepting’ the feedback, they may feel the Residents ‘get their back up’ or ‘don’t agree’ and perhaps blame others for the behaviours etc. These are sometimes the scenarios where Faculty have received a ‘retribution’ evaluation and feel that it is ‘not worth it’ to do again in the future.

**07**

*How would you manage this scenario?*

*What are some specific words/phrases would you use?*

Sometimes, I know I’ve had a bad day in terms of my performance in the OR or clinic–perhaps exposure to a task I realize I’m struggling with, or difficulties managing difficult interpersonal interactions. At the end of the day, though, I sometimes feel people are worried to tell me honestly how I performed, and how to improve, and generic feedback is provided. This leaves me with uncertainty and questions – is my performance too difficult to discuss? How bad was it really?

**08**

*How would you manage this scenario?*

*What are some specific words/phrases would you use?*

A Resident presented a case that illustrated that s/he missed the point in a history (i.e., that the symptom history in the case was important in arriving at a treatment plan). I asked several (too many?) questions to illustrate the gap and s/he started to demonstrate distress (i.e. face red, voice stressed, etc). I backed off, said something like ‘I am sorry I upset you,’ and continued on the clinic. The remainder of the rotation was completed uneventfully.

**09**

*How would you manage this scenario?*

*What are some specific words/phrases would you use?*