

Giving Feedback



Formal Opportunities

Orientation – Orientation provides a valuable opportunity to explain expectations and to look at the evaluation forms. Students will gain an appreciation of their learning objectives as well as what will determine their grades. Take this time to establish with the student the manner in which he or she is most comfortable receiving feedback and address the method in which you would like to receive feedback as well.

Mid-Clerkship Review – The mid-clerkship review is an appropriate time to examine the original goals. What goals have been met and which are outstanding? How is the preceptor helping the student to meet these goals? What areas should the student concentrate on for the rest of the clerkship? What are some new goals that can be set for the remaining three weeks of the clerkship? Use Mid-Clerkship Review Checklist available at: http://www.fammed.washington.edu/predoctoral/clerkship/sg_forms.html

Final Review – The final clerkship review should be a summation of informal and formal feedback that has been given to the student thus far. The final review *should not* include a guess at the student's grade, but should be a discussion of the student's strengths as well as what he or she should continue to work on. The final review is a good opportunity to discuss anything that will ultimately appear on the grade form. The student shouldn't receive any surprises when he or she receives a grade. Use the Final Review Checklist (available at: http://www.fammed.washington.edu/predoctoral/clerkship/sg_forms.html) and Clinical Summary Student Performance Evaluation Forms. If you know the final numbers you will be assigning, please do discuss it with the student

During a Busy Day in the Clinic

There are a variety of techniques for giving effective feedback to students. Here are some that the clerkship has utilized in the past as well as innovative ideas from students and faculty:

- ✓ “Ready for Some Feedback?” – This approach is done at the end of a half day working with a student. It is extremely informal and offers the student insight into something he or she was encountered during the half day.
For example: At the end of a morning in clinic, take the student into an office and offer suggestions on a scenario he or she encountered that morning. This is a good time to highlight areas for additional reading and to remark on an area in which he or she improved.
- ✓ “Patient Gives the Feedback” – Allow the patient to comment on aspects of the student's technique that were helpful and aspects that could be improved.
Note: This can't be done with every patient or every student, but for patients who are very used to having medical students, this is an excellent opportunity to offer some suggestions from another perspective.
- ✓ “On the Go” – After a single encounter, offer the student some insight into something that went particularly well or something that could use improvement.
Make sure: On these occasions, prefacing any comments with, “I'd like to give you some feedback.” or, “Here's some feedback.” might be particularly useful to students who are not always as aware that is what you are telling them.
- ✓ “Five Microskills”^{*} – After a student's initial interaction with a patient; this is a technique for a busy preceptor working with a student.

- ✓ Feedback cards* – Handed out by a student at the beginning of a clinical day or rotation, feedback cards allow the preceptor to offer written feedback to the student based on what he or she did during the clinical day. These cards can be used by the site coordinator to help establish the final grade.

Note: The cards shouldn't substitute for verbal feedback, but are an excellent way to document feedback as it is given. They are also useful for the students to have and review as they need to throughout their clerkship.

Extenuating Circumstances

Students encounter a number of obstacles to receiving feedback that they can digest and utilize. Here are some obstacles and some possible solutions:

- ✓ *Conflicting feedback from attendings.* This is a good opportunity for a student to look objectively at both pieces of feedback and come to some conclusion. However, it might help the student if you set a standard for him or her during orientation. "If you receive conflicting feedback and would like to talk about it..."
- ✓ *Feeling like he or she isn't receiving feedback.* Again, setting the stage early on about your accessibility is crucial to the student, help him or her feel comfortable raising questions or concerns. If a student feels he or she isn't receiving feedback, he or she may not realize that some of the interactions with the attending actually are feedback and those would be important to identify. It is important to share the responsibility for the feedback process, so talking to the student about what works best for him or her and adjusting both of your styles may be necessary.
- ✓ *He or she isn't responding to feedback.* There could be many factors at play in this scenario, but the best way to get to the root of it is to sit down with the student and discuss the situation allowing you both to express concerns. After an initial discussion, consider focusing feedback on one previously agreed upon topic or redefining the performance expectations.

Final Comments

Feedback is extremely difficult to give effectively because of time constraints, internal struggles with what feedback means and the complications of establishing good communication. We maintain that it is one of the foundations of a medical student's clinical education. We appreciate greatly, the amount of time you are willing to dedicate to instructing students and recognize how much additional time having a medical student can add to your schedule. Continuous conscientious feedback will allow students to improve at greater rates and assist you in making the clinical experience smoother for both teacher and student.

* Available online as of 1/1/05 in the clinical handbook via:
<http://www.fammed.washington.edu/predoctoral/clerkship/>