



ASKING FOR ACTIONABLE FEEDBACK: From Wrong Spotting To Growth

- **AC₃T:** To Optimize Feedback Impact, Learner Growth and Well Being

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Quick Poll – Show of Hands

- How many sessions have you attended on how to give feedback?
- What are the key features of effective feedback?
- How often do learners change based on your feedback or “wrong spotted” your feedback?
 - Yes but....
 - <20% of time?

Feedback Puzzle: All in the Delivery

Learners:
No FB

“DECADES” Faculty Dev
FB Workshops
Result: LITTLE/NO
SUSTAINED IMPACT

Teachers:
FB all time!



- Telio S, Regehr G, et al. Feedback and the educational alliances: examining credibility judgements and their consequences. *Med Ed* 2016;50:933-942.
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OBJECTIVES

1. Describe current findings re: why learners perceive they don't receive feedback
2. Define + list 4 key elements associated with feedback seeking behavior
3. Evaluate model for feedback seeking and responding
4. Fun

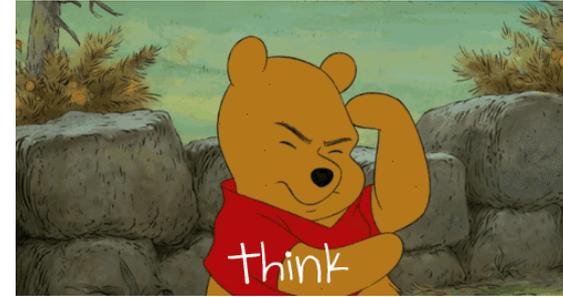
SESSION PLAN

- Overview recent literature on feedback (FB)
 - Feedback quality
 - Feedback seeking (who, where, when, why)
- Key Features of Soliciting Actionable FB using AC₂T model
 - Demo then Practice
 - Debrief in small groups
- Report Out & Wrap Up

Steps: Literature

• Medical Education

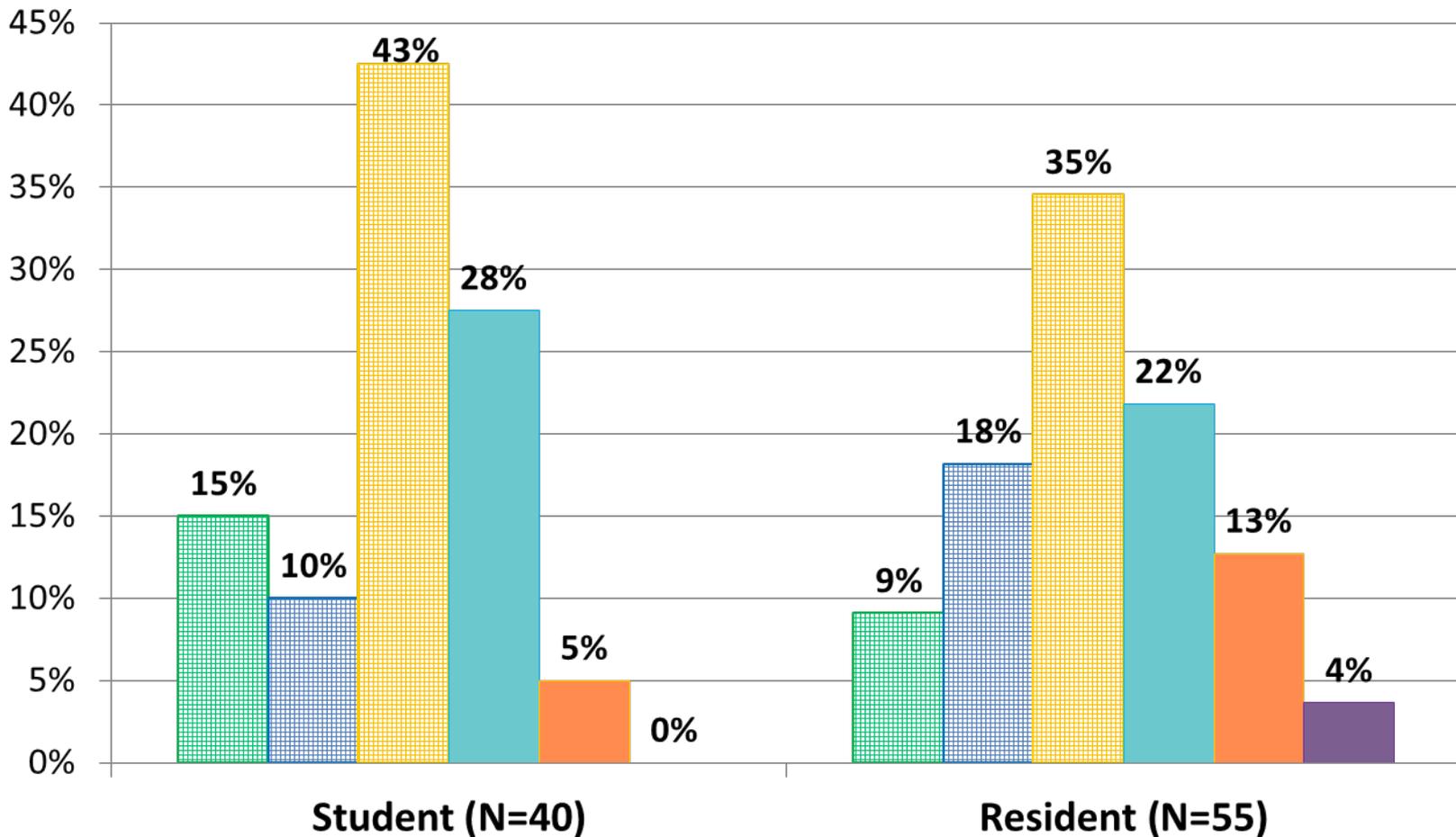
- Amongst Items: May not be provided/perceived
- If provided “low quality”
 - Leniency Bias (no negatives) / Too Polite
 - Not actionable – no goal performance and/or steps
 - No strategies / process for improvement / resources / practice opps
 - Not a “coproduction” = not interactive partnership



- Bing-You RG, Trowbridge RL. Why medical educators may be failing at feedback. JAMA. 2009;302:1330-1331.
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- Telio S, Ajjawi R, Regehr G. The 'educational alliance' as a framework for conceptualizing feedback in medical education. Acad Med. 2015;90(5):609-14..
- Crommelinck M, Anseel F. Understanding and encouraging feedback seeking behavior: a literature review. Med Ed 2013;47:232-241. [Feedback Vacuum – Lit review 2013 ref 4]

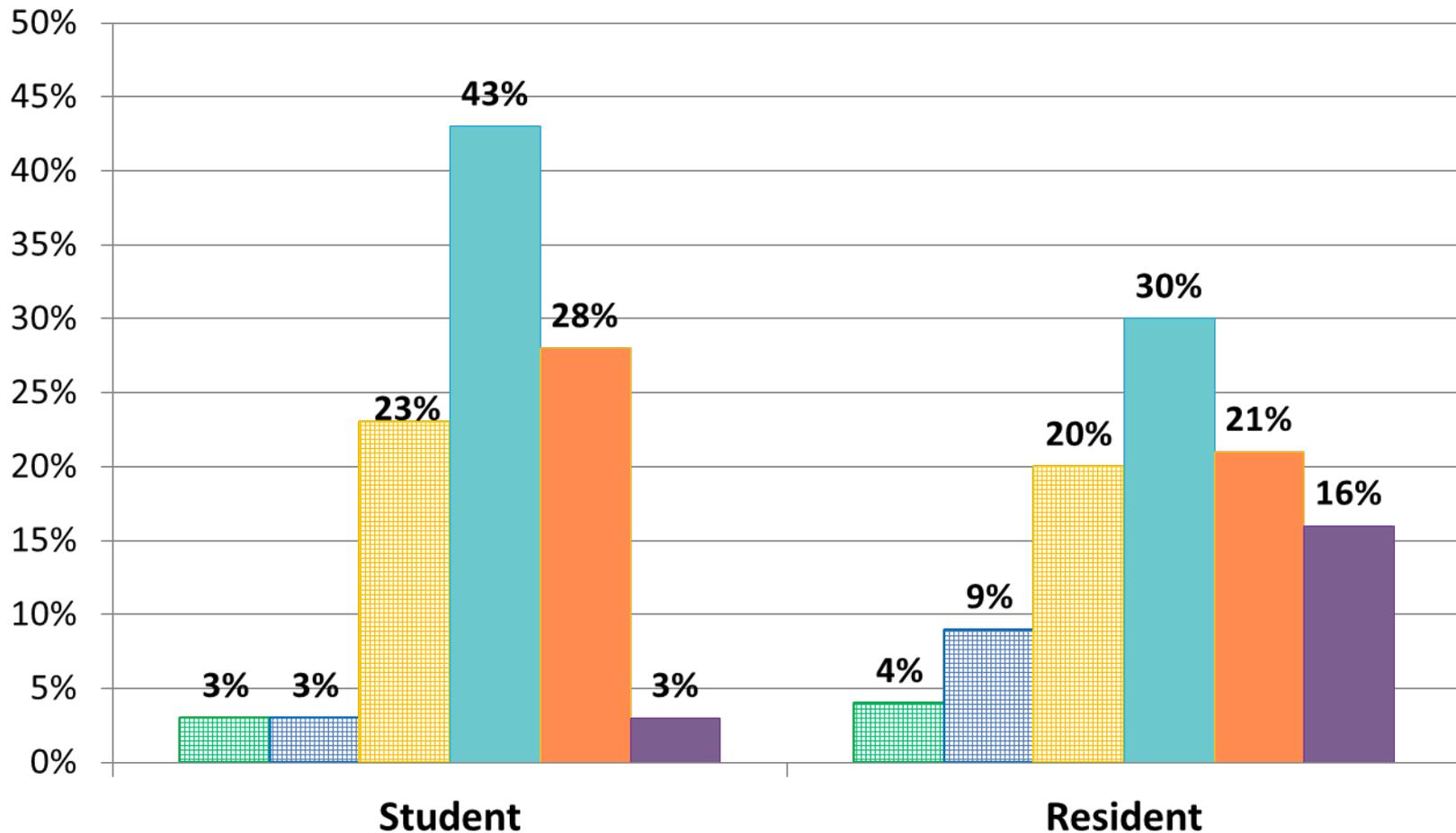
How often in past month was the "gap" between where you are now and identified goal discussed during feedback interaction?

- Never (0/times)
- Rarely (10-39% of time)
- Frequently (61-79% of time)
- Very Rarely (<10% of time)
- Sometimes (40-60% of time)
- Very Frequently (>80% of time)



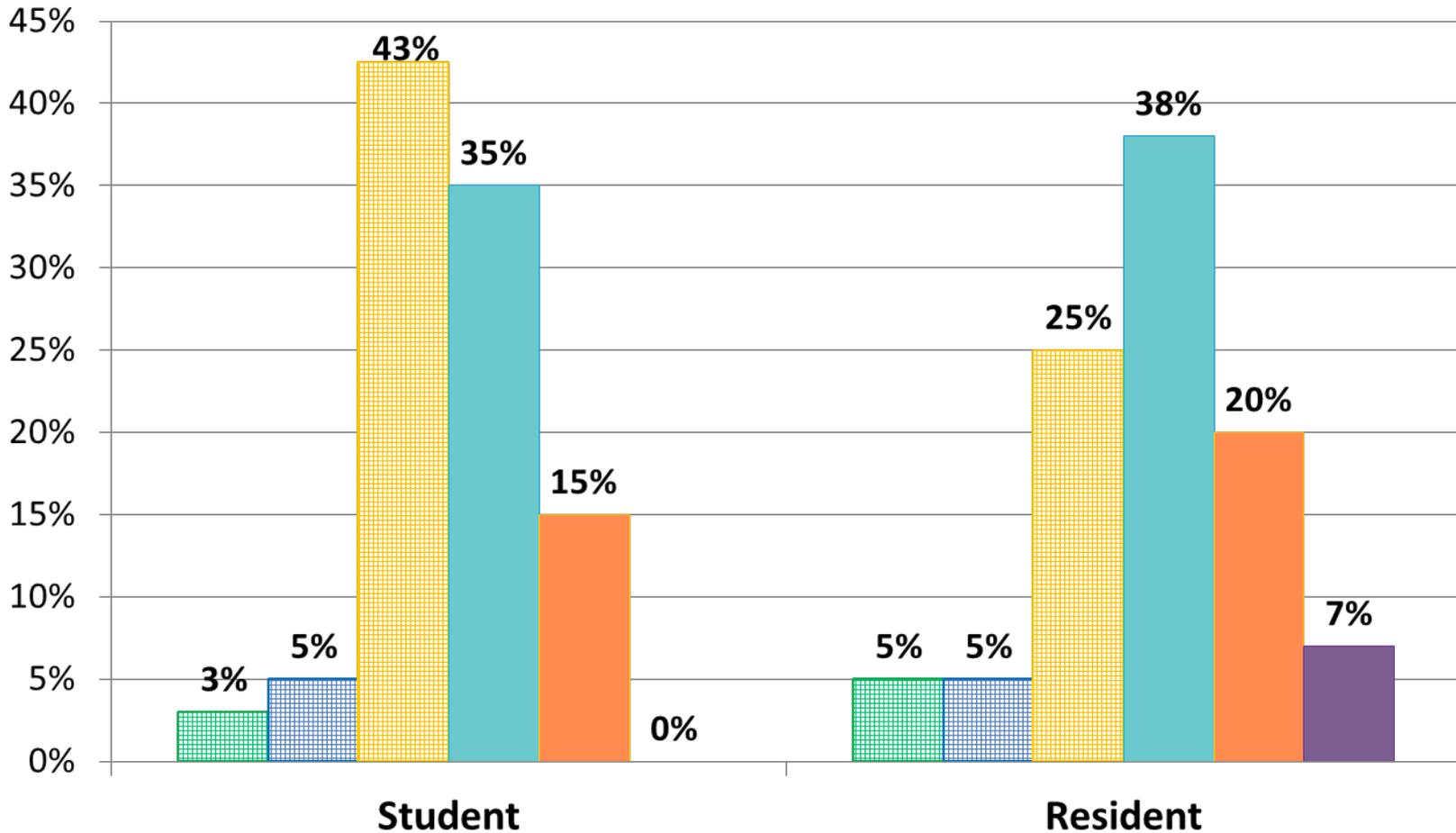
How often in the past month was your **feedback actionable** - focused on a specific performance, behavior, and or event?

- Never (0/times)
- Rarely (10-39% of time)
- Frequently (61-79% of time)
- Very Rarely (<10% of time)
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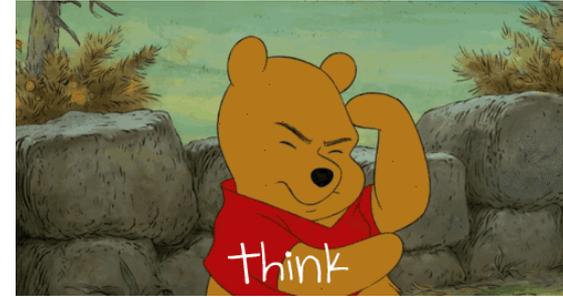
How often in past mo was your feedback focused on **specific strategies/tactics/resources** to support step-wise improvement?

- Never (0/times)
- Rarely (10-39% of time)
- Frequently (61-79% of time)
- Very Rarely (<10% of time)
- Sometimes (40-60% of time)
- Very Frequently (>80% of time)



Steps: More Literature

- **Org + Social Psych Research: Yes**
 - Continue encourage teachers to give FB
 - Learners solicit **FB = AC2T**
Ask, Clarity, Consider, Ihanks



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Asking for Feedback aka *Feedback Seeking Behavior*

Defined

- The conscious devotion of effort towards determining the correctness and adequacy of one's behaviors for attaining **valued goals**
 - Goal-oriented behavior – end game!



Asking for FB is an ROI



RETURN/VALUE - PROS

- Purpose:
 - to be a better doctor
 - Improve K & S's
- Know where you stand
- Promote one's image by showing engagement
- ↑ Relationships-teachers
 - Reciprocal Benefits
- Well-Being

COSTS - CONS

- Costs
 - Self-preservation
 - Look incompetent
 - Ego Protection
 - FB ≠ self image
 - Effort
 - Too much required
- If female
 - May get “incongruent” FB

Who Asks for FB: Mindset

GROWTH

- Learning Oriented
 - Believe that effort can result in success / competence
 - Desire for new/improved skills and knowledge
 - To master tasks
 - To get info re: how to solve
- See FB as way to improve
 - Desensitized to constructive FB as accountable for self improve
 - **Low Cost** ≠ personal insult

PERFORMANCE

- Fixed / Control
 - Believe that potential to achieve competence is fixed and/or out of their control
 - Performance (Validation)
 - Desire positive assessments; avoid negative Validation (ego)
 - Desire Validation
- See FB info as a judgment
 - About who they are → + FB
 - **High cost** as = ego judgement

Impacts How One “Considers” FB & ROI

How Gather Information (ROI)

| “Inquiry” Directly Ask | In-Direct Inquiry “Artifice” Ask | Observation “Monitoring” |
|--|---|-------------------------------------|
| <ul style="list-style-type: none"> • Directly ask others for feedback about yourself <ul style="list-style-type: none"> • Specific to a situation or activity • Growth – learning • Image or ego mgmt (seek FB re: success) | | |

- Ashford SJ, De Stobbeleir K, Nujella M. To seek or not to seek: Is that the only question? Recent developments in feedback-seeking literature. *Annual Review of Organizational Psychology and Organizational Behavior*. 2016 Mar 21;3:213-39.
- Anseel F. Agile learning strategies for sustainable careers: a review and integrated model of feedback-seeking behavior and reflection. *Current opinion in environmental sustainability*. 2017 Oct 1;28:51-7.
- Bing-You R, Hayes V, Palka T, Ford M, Trowbridge R. The Art (and Artifice) of Seeking Feedback: Clerkship Students' Approaches to Asking for Feedback. *Academic Medicine*. 2018 Aug 1;93(8):1218-26.
- Janssen O, Prins J. Goal orientations and the seeking of different types of feedback information. *Journal of Occupational and Organizational Psychology*. 2007 Jun;80(2):235-49.
- Teunissen PW, Stapel DA, van der Vleuten C, Scherpbier A, Boor K, Scheele F. Who wants feedback? An investigation of the variables influencing residents' feedback-seeking behavior in relation to night shifts. *Academic Medicine*. 2009 Jul 1;84(7):910-7.

THE NEW YORKER

ANNALS OF MEDICINE

PERSONAL BEST

Top athletes and singers have coaches. Should you?

BY ATUL GAWANDE

OCTOBER 3, 2011

I've been a surgeon for eight years. For the past couple of them, my performance in the operating room has reached a plateau. I'd like to think it's a good thing—I've arrived at my professional peak. But mainly it seems as if I've just stopped getting better.

During the first two or three years in practice, your skills seem to improve almost daily. It's not about hand-eye coordination—you have that down halfway through your

Professional athletes use coaches to make sure they are as good as they can be. But doctors don't...



Right Person, Time, Place, Person

PERSON

- **Clinical & Identity Creditability**
 - = Personal professional values
- **Creditability (in “Edu Alliance”)**
 - Commitment to “growth” (S/R)
 - Experience/Open to giving FB
 - Given spontaneous FB prior
 - Authenticity/Engage as Educator
 - Thoughtful about
 - Enjoyed teaching, respectful
 - Seek feedback
- **Approachable (not intimidating)**
 - Feel like something in common (interested in me - identity)
 - Not “too nice” (Politeness Bias)

TIME, PLACE

- **Setting**
 - Not Frenetic
- **Timing**
 - End of day/shift/week
- **Cues**
 - Teacher shows interest in me (knows my name)

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Key Elements/Features of Ask (AC₂T)

- **The Ask** (accept responsibility)
 - **Seek from Creditable Sources:** (when possible)
 - **Ask from Growth- Learning:**
 - Frame based on **true desire to know** (consider framing as a competency, an objective) - a **Personal Growth Goal**
 - *What key features of (Hx/PE/Dx/Mgmt) did I leave out* (avoids guess what I'm thinking)
 - **Be Silent**
- **Clarify to be action oriented: focus gap-goal analysis**
 - Where am I now, what are next steps to get to my goal
- **Consider – reflect**
 - Accept as step to your goal, plan and act/practice!!
- **Thank you!** Great FB – action oriented



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- Mueller AS, Jenkins TM, Osborne M, Dayal A, O'Connor DM, Arora VM. Gender Differences in Attending Physicians' Feedback to Residents: A Qualitative Analysis. *Journal of graduate medical education*. 2017 Oct;9(5):577-85.

Key Elements of Answer (AC₃T)

- **Answer** (be open, approachable)
 - **Be responsive from Growth- Learning Mindset:**
 - Frame based on **true desire to support their next step**
 - Consider framing as a competency – milestone
 - **Be specific – actionable** (current state, desired state, next steps)
 - **Rec Strategies/Resources for deliberate practice**
 - **If can't provide specific, actionable guidance – be honest** (authentic)
- **Clarify the ask if not specific** (≠ How did it go, how am I doing)
- **Check learner understanding of feedback**
- **Coach learner to identify next step(s)**
 - What they can do, how practice, timeframe to achieve their goal
- **Thank you!** Be appreciative that they asked



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Demonstration: AC₂₊₃T Feedback

The Ask & Answer! *(May do timeouts)*

| Key Elements - Feedback | The AC ₂ T | The AC ₃ T |
|--------------------------------------|-----------------------|-----------------------|
| Ask From Growth Perspective | | |
| • Specific | | |
| Answer – Towards Growth | | |
| Clarify (if not clear) | | |
| • Actionable (Steps to Goal) | | |
| • Strategies/Resources | | |
| Check | | |
| Consider (Growth Perspective) | | |
| Coach | | |
| Say Thanks | | |



Your Turn – Practice AC₂₊₃T [Feedback]

The Ask & Answer!

- **Scenario #1:** You are staffing a **resident**. At the end of session the residents asks:
 - *“How do you think it went today?”*
- Sm Groups – 2-3 min MAX
- Facilitators seek Volunteers/Assign Roles
 - “Ask” Residents (feedback solicitor)
 - “Answer” Attending/Staffer (feedback provider)
 - Observer(s)
- Debrief Large Group

Scenario #1 Observer: AC₂₊₃T

The Ask & Answer!

| Key Elements - Feedback | The AC ₂ T | The AC ₃ T |
|--------------------------------------|-----------------------|-----------------------|
| Ask From Growth Perspective | | |
| • Specific | | |
| Answer – Towards Growth | | |
| Clarify (if not clear) | | |
| • Actionable (Steps to Goal) | | |
| • Strategies/Resources | | |
| Check | | |
| Consider (Growth Perspective) | | |
| Coach | | |
| Say Thanks | | |



DEBRIEF Scenario #1

The Ask & Answer!

| Key Elements - Feedback | The AC ₂ T | The AC ₃ T |
|--------------------------------------|-----------------------|-----------------------|
| Ask From Growth Perspective | | |
| • Specific | | |
| Answer – Towards Growth | | |
| Clarify (if not clear) | | |
| • Actionable (Steps to Goal) | | |
| • Strategies/Resources | | |
| Check | | |
| Consider (Growth Perspective) | | |
| Coach | | |
| Say Thanks | | |



Your Turn – Practice AC₂₊₃T [Feedback]

Scenarios

1. [Repeat] You are staffing a **resident in clinic**. At the end of session the residents asks:
 - *“How do you think it went today?”*
2. In-patient rounding with team, Jr med stud approaches you as team is disbanding, asking:
 - *I’m interested in some feedback re: my “_____” performance, can you advise 1-2 things I can do to take the next step to improve?*
3. Jr faculty approaches you and says
 - *Just got my teaching evals back – and they weren’t good... can you help?*
4. Jr resident just presented patient to team, omitting key elements of Hx, PE, misreads labs/image data and has ‘wrong” dx/plan. There is are only a few minutes before all exit. Knowing team must not leave assuming this is “accurate” you say (based on knowledge of FB):
 - *We have a great learning opportunity here... and I want to provide some actionable feedback to the team ... and will also more feedback to John later today as we finalize this patient’s plan....*
5. Create Your Own “ASK” Focused on area of your own “value professional growth”

Small Group Practice AC₂₊₃T [Feedback]

The Ask & Answer!

- Facilitators seek Volunteers/Assign Roles
 - “Ask” Residents (feedback solicitor)
 - “Answer” Attending/Staffer (feedback provider)
 - Observer(s) (use the observer table)
- 2-3 min MAX per scenario
 - Facilitator may do “time outs” – life lines
 - Debrief each scenario (each element AC₂₊₃T approach)
- Then Prepare Large Group Debrief Report Out
 - 3 key take homes re: Feedback & AC₂₊₃T approach
 - Appoint reporter

Debrief Large Group

PART A:

GENERAL REACTIONS

- What parts Easy?
- Challenging?
- What would help?

PART B:

3 KEY TAKE HOMES

- Re: Feedback & AC₂₊₃T approach

OBJECTIVES

1. Describe current findings re: why learners perceive they don't receive feedback
2. Define + list 4 key elements associated with feedback seeking behavior
3. Evaluate model for feedback seeking and responding
4. Fun (and Valuable)

SESSION PLAN

→ Recent FB lit



- Alliance/relationship

→ Feedback seeking

- Who, where, when, why
 - Valued Goal - Growth mindset
 - Specific, focused
 - ROI

→ Practice & Debrief

- Easy, Hard, Take Homes

→ TBD

Please Complete NOW Time

Thanks & Ask/Answer Feedback!

TIME #2 FM FACULTY: AC₃T FEEDBACK: ANSWER, CHECK, CLARIFY, COACH, THANKS

Name Initials: _____ Date: 9.27.2018

Asking for feedback is critical for continued growth as a clinician and teachers. Please advise (circle most accurate/honest answer):

1. How often in past month, did YOU ask for feedback from your learners/colleagues /supervisors/chair?

| Never | Very Rarely | Rarely | On Occasion | Frequently | Very Frequently |
|---------|-------------|---------|-------------|------------|-----------------|
| 0/times | < 1/mo | 1-2 /mo | 1/wk | 2-3/wk | > 5/wk |

2. How often were YOU Asked for feedback in the past month from the students/residents you are teach?

| Never | Very Rarely | Rarely | On Occasion | Frequently | Very Frequently |
|---------|-------------|---------|-------------|------------|-----------------|
| 0/times | < 1/mo | 1-2 /mo | 1/wk | 2-3/wk | > 5/wk |

3. How would you characterize your typical feedback interactions in past month: (circle all that apply)

| Learner Controlled | Teacher Controlled | Co-Production | Growth Oriented | Other |
|-------------------------------------|-------------------------------------|--|--|-------|
| Feeling that learner was in Control | Feeling that Teacher was in Control | Interactive Partnership Shared Control | Meeting trainee's goal to be a great clinician | |

4. Giving feedback in past month positively impacted my: (circle all that apply)

| Relationship with learner | Autonomy | Growth | Competence | Well-Being |
|-------------------------------|---|--------|------------|------------|
| Feeling that I was in Control | Meeting my goal to be a great clinician | | | |

General Comments:

How often in past month - when giving feedback - did u:

5. Identify the "gap"-- here's where you are now and work with learner to set goal

| Never | Very Rarely | Rarely | Some of the time | Frequently | Very Frequently |
|---------|---------------|----------------|------------------|----------------|-----------------|
| 0/times | < 10% of time | 10-39% of time | 40-60% of time | 61-79% of time | ≥ 80% of time |

6. Provide actionable feedback - focused on a specific performance, behavior, event

| Never | Very Rarely | Rarely | Some of the time | Frequently | Very Frequently |
|---------|---------------|----------------|------------------|----------------|-----------------|
| 0/times | < 10% of time | 10-39% of time | 40-60% of time | 61-79% of time | ≥ 80% of time |

7. Focus on specific strategies/tactics/resources to support for step-wise improvement

| Never | Very Rarely | Rarely | Some of the time | Frequently | Very Frequently |
|---------|---------------|----------------|------------------|----------------|-----------------|
| 0/times | < 10% of time | 10-39% of time | 40-60% of time | 61-79% of time | ≥ 80% of time |

8. How often in past month did learner say "thanks"

| Never | Very Rarely | Rarely | Some of the time | Frequently | Very Frequently |
|---------|---------------|----------------|------------------|----------------|-----------------|
| 0/times | < 10% of time | 10-39% of time | 40-60% of time | 61-79% of time | ≥ 80% of time |

9. List 1 pro and 1 con: One thing you learned/gained when you gave feedback + One thing that didn't work out so well.

- Pro:
- Con:

AC₂₋₃T

Thank YOU!



AC₂T

Ask

Clarify

Consider

Thanks

AC₃T

Answer

Clarify

Check

Coach

Thanks

Why Ask for FB? What is know to:

| | | OTHERS | |
|------|-----|--------|--------|
| | | Yes | No |
| SELF | Yes | Open | Hidden |
| | No | | |

Johari Window: Psychology Model Re: Self-Awareness