

THE FEEDBACK EVOLUTION

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Foundations Clinical Components

Communication

- Relationship development
- Info gathering

Exam Skills

- Exam & advanced maneuvers
- Adapting exam

Oral Case Presentation

- Bedside presentation
- Include patient

Write-ups

- Complete/accurate/organized
- SOAP and H&P

Clinical Reasoning

- Generate ddx and A&P
- Hypothesis based HPI

Professionalism

- Self assessment
- Team based care





Fall
MSI

- Establish rapport
- Communication skills
- Basic history
- Exam scaffolding



Spring
MSI

- Hypothesis driven Hx/PE
- Start clinical reasoning
- Advance write-ups/OCPs
- Add: advanced PE and history skills



Fall
MS2

- Refining OCP, Hx, PE
- Illness scripts
- Advance clinical reasoning
- Add: shared decision making
- Add: challenging encounters

Feedback: Learner Progression



MSI

- Extrinsic motivation
- Pre-mat experience driven
- Academic identity



MS2

- Longitudinal relationship
- Formative
- Coaching based



MS3

- Goal directed
- Power differential
- Piecemeal relationships*
- Take it or leave it



MS4/Grad

- Self Directed
- Independent soliciting feedback
- Self awareness

Feedback: Educator Progression

Foundations

- Observation based
- Scaffolding/Recipe based
- Can be structured
- Broad and wide

Clinical Phase

- Informal in the moment
- Less stylistic
- Focused on reasoning
- Intervene with bad habits
- Empower self-direction

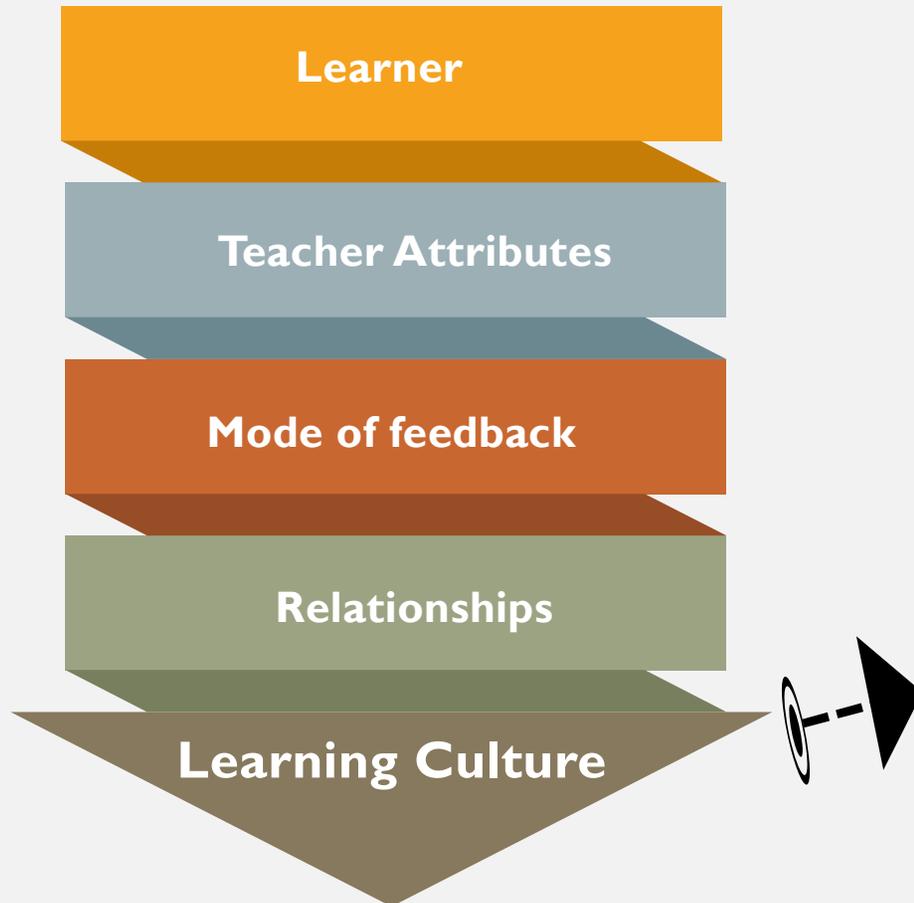
Post Grad

- Management pearls
- Knowledge centric
- In the moment/need to know

Factors influencing Feedback

Learner	Teacher	Mode	Relationship
<ul style="list-style-type: none">• Beliefs, attitudes, perceptions & experience• Understanding feedback• Nidus of motivation• Degree of self direction• Ability to seek/use feedback	<ul style="list-style-type: none">• Perception of educator• Approachability• Presence of organized systems• Prioritizing students' best interests	<ul style="list-style-type: none">• Verbal vs written• 2-way dialogue• Ability to reference previous feedback	<ul style="list-style-type: none">• Learner-educator and Learner-School• Affects perception of teacher attributes• Positive relationship → Increased feedback and more trusted feedback

Factors Influencing Feedback



Combines previous components plus other system-based contributors: longer rotations, longitudinal student-educator relationship, and goal beyond competencies to excellence

Learning culture is a **KEY** influence on Feedback

Give the learner the tools



PANEL

NURTURING TOMORROW'S PHYSICIAN TEACHERS



Early
System/structure
Recognize feedback



Mid
Empower self
direction
Seek feedback



Mid-late
Goal-directed
Encourage reflection



Career
CQI/Pruning
Input and outcomes

THANK YOU

WORKS REFERENCED

- UWSOM FCM Course Syllabus
- **Medical Student Perceptions of Feedback and Feedback Behaviors Within the Context of the “Educational Alliance”** Lucy Bowen, Michelle Marshall, PhD, and Deborah Murdoch-Eaton, MBBS, FRCPCH, MD. Academic Medicine. 2017 Sep;92(9):1303-1312.
- **Feedback in Medical Education: An Evidence-based Guide to Best Practices from the Council of Residency Directors in Emergency Medicine.** West J Emerg Med. 2023 May 5;24(3):479–494