

# SP FEEDBACK WORKSHOP

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STEPS



# AGENDA

- Introduction
- Didactic & Examples
- Practice & Discussion
- Evaluation





# THE BASICS OF FEEDBACK

- **What is Feedback?**

- Fundamental and interactive aspect of teaching and learning
- Provides learners with an awareness of their performance, an understanding of how they affected SP's emotional experience
- Makes an impact in education by presenting deeper insight into learners' actions/behaviors



- A teaching tip for feedback



# WHAT ARE CHARACTERISTICS OF GOOD FEEDBACK?

- Clear, unbiased comment of observations
- Commend and reinforce verbal and nonverbal skills
- **Constructive**
- **SP Example:**
  - I appreciated how you responded to me with a smile and a caring nature.

Good feedback, but now let's build on it..



# WHAT ARE THE BENEFITS OF CONSTRUCTIVE FEEDBACK?

- Encourages personal and professional growth
- Strengthens clinical practice through improvement of verbal and nonverbal skills
- Promotes student confidence and increases motivation
- Important Feedback = Hard to deliver but necessary for learning and growth!



# HOW CAN YOU PROVIDE CONSTRUCTIVE FEEDBACK?

- Be descriptive! Refer to specific behaviors and actions, not clinical content
- Avoid judgment
- Explain how you felt by accepting responsibility of your response to students' behaviors/ actions
  - Use “I felt” not “you made me feel”
- **SP Example:**
  - I felt comfortable in your care when you greeted me and shook my hand.
  - I felt like the accomplishment of no longer smoking was diminished when you didn't acknowledge it.



# DELIVERING EFFECTIVELY FEEDBACK IN YOUR ROLE

- Come out of SP role and begin feedback immediately following encounter
  - Ask, tell, ask
- Look and talk to your student
  - Your students wants to know how he/she did
- Be aware of your tone and body language
  - Gentle delivery
  - Minimalize negative feedback with a smile/ pleasant tone
- Focus on 1-3 behaviors/actions
  - **SP Example**: *Fidget, click pen, eye contact, etc.*



# WHAT ARE KEY DISCUSSION TOPICS FOR FEEDBACK?

- Verbal and Nonverbal cues

Greeting/ Introduction	Attitude (warm/ caring or cold/unwelcoming)
Eye Contact	Professional handshake
Personalized encounter, using names	Interest in SP situation
Tone of the student	Pace of the student
Use of open-ended questions	Appropriate facial expressions
Respectful	Empathy
Acknowledgement (smile/ head nod)	Provided summary of encounter



# DELIVERING EFFECTIVE FEEDBACK IN YOUR ROLE

## CONTINUED...

- Structure feedback as: ASK, TELL, ASK
  - Begin by asking student to self-assess
  - Give your feedback & encourage continued effort
  - Ask for questions
- **Sandwich Technique**
  - Wrap negative feedback with positives
  - Effective to reduce feedback discomfort and anxiety
- Know what case information you should or should not reveal
- Avoid discussing your performance as an SP
  - They do not need to know



- Positive Feedback Example in Medical Education



# HOW TO SAY WHAT YOU WANT TO SAY

- **DESC** technique!
  - Sharon & Gordon Bower
    - Asserting Yourself
  - Communication tool
  - Develop assertiveness & practice
  - Conflict resolution
  - Feedback

**D-** Describe the behavior

**E-** Express your feelings (use “I”)

**S-** Suggest/ Specify desired change in behavior (“What I would like you to have done is..”)

**C-** Communicate consequences (Commit to improved actions/ behavior in future)



# ALIGN YOUR FEEDBACK WITH THE **DESC** TECHNIQUE!

**Describe.** When you....

**Express.** I felt, perceived, noticed, was, experienced....because....

**Specify.** I'd prefer/ want/ need you to....

**Communicate.** So that



# SUGGESTION ON FEELINGS:

Reassured	Understood
Encouraged	Cared for
Guided	Comfortable
Appreciative	Calm
Good	Please
Listened to	Used
Angry	Provoked
Let down	Embarrassed
Overwhelmed	Pressured
Dehumanized	Judged
Annoyed	Unsure



# EXAMPLES

**SP Example:** When you moved my gown to examine my heart, I felt uncomfortable. I would have preferred if you asked me if that was okay so that I would have felt more comfortable.

**SP Example:** When you immediately began the encounter with questions after you introduced yourself, I perceived that you were only interested in me as a patient and did not want to take the time to talk with me as a person. I need you to come into the room, shake my hand, and establish rapport so that I am in a more relaxed environment.



# AVOID POOR FEEDBACK!

- DON'T be too vague or general in your statements
- DON'T judge “bad” “right” “wrong”
- DON'T criticize
  - Students are here to learn.
- **Poor Example:** You made me feel uncomfortable.
- **Poor Example:** You did not treat me with respect.
- **Poor Example:** I did not like when you told me I should quit smoking.
- ❖ **Constructive Feedback:** When you told me I should quit smoking because it is a bad habit, I felt...(Apply DESC Technique)



# RESTRUCTURE THIS FEEDBACK:

- You made me feel like only a patient and not a person.
- **When you repeatedly asked me question after question without trying to connect with me as a person, I experienced an unpleasant feeling that I was only a clinical project. I would prefer you to take the time during your interview to talk and connect with me. This way I would know that you care about who I am and what I am saying.**



Learn  
Practice  
Improve





- I didn't like the way you looked at your notes more than you looked at me.
- **During the interview, you looked at your notes a large majority of the time. I felt that you were nervous and could not relax. I want you to make eye contact with me and know that it is still okay to look at your notes so that it is a more comfortable environment for us both.**





- You were late.
- **When you came to the encounter late, I was frustrated. I need you to be attentive to your timeliness during encounters so that everyone's time is respected.**





- You did a good job.
- **When you acknowledged that I quit smoking, I felt recognized and that you respected my accomplishment. This is a reassuring feeling as a patient.**



