

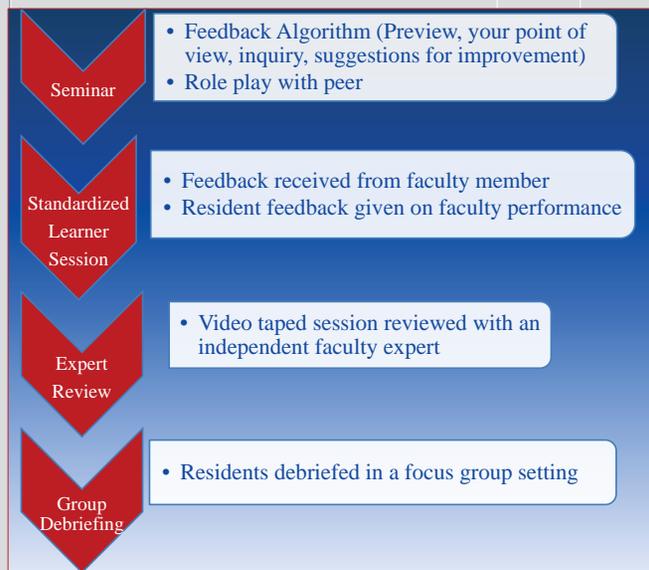
BACKGROUND

- The ACGME Milestones for psychiatry residency training focus on “relationship development and conflict management with patients, families, colleagues, and members of the health care team.”
- Seeking, receiving, and providing effective feedback are important skills necessary in attaining this milestone. Research has demonstrated that the quality of feedback provided to learners is one of the most significant elements in the effectiveness of clinical supervision.
- Limited information is available on the process of residents providing feedback to faculty. Most residents provide feedback through written formal evaluations, which often do not provide useful information.
- An ideal system of resident feedback would include both specific written evaluations and verbal feedback. All learners should be comfortable in providing verbal feedback as part of a mutually-beneficial process. A local needs assessment suggested that residents were uncomfortable providing feedback to faculty members.
- The goal of our project was to determine if residents could be more comfortable and effective at providing feedback to faculty after receiving formal training in this area.

METHODS

- We implemented a cross-departmental standardized learner experience consisting of four steps.
- Step 1. Psychiatry residents (n=6) attended a one hour training session on providing quality feedback.
- Step 2. Residents completed a videotaped session where they acted out a scripted role as a “troubled resident” and were given feedback by a faculty member. Later, the roles were reversed and the resident provided feedback to the faculty member regarding his/her performance.
- Step 3. Both resident and faculty member reviewed the tape with an experienced faculty expert.
- Step 4. The residents debriefed their experiences in a focus group format and completed pre and post encounter surveys.
- We enrolled faculty and residents from different departments to ensure that residents were not practicing these techniques with faculty members they would regularly encounter.

Pre Intervention Survey Questions (N=6)	Yes	No
1. Have you ever had an unsuccessful feedback session with a supervising physician?	6	
2. Have you received previous training on how to give feedback to a supervising physician?		6
3. Do you use any previously learned techniques or steps to provide feedback to a supervising physician?		6



Post Intervention Survey Questions (N=6)	Yes	No
1. Was the resident training session a good use of your time?	6	
2. Do you think you need additional training for providing feedback to supervising physicians after today’s training session?	6	



RESULTS

- Pre-assessment surveys showed residents had been faced with uncomfortable feedback sessions with attending physicians in the past.
- Residents were not comfortable providing feedback and had not received any formal training on giving feedback.
- Preliminary results show that residents felt the exercise was beneficial and provided skills applicable to giving effective feedback.

DISCUSSION

Providing feedback is an essential skill for all physicians, yet little formal training is provided during residency and medical school. Our novel approach allowed residents to participate in a didactic lecture on giving feedback and to use the skills learned in a practical standardized encounter

FUTURE CONSIDERATIONS

- Training sessions will continue approximately every six months.
- Additional faculty members will participate in future sessions to allow residents to practice and further refine their skills..

DISCLOSURE

The authors have no financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation. There was no direct source of project funding.