Providing AC²Tionable Feedback Improves Resident & Fellow Satisfaction

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Introduction

Feedback

- Feedback is an essential component of the learning process.
- It is a required element for graduate medical education (GME) program accreditation.
- Evidence Re: Challenges to Successful Feedback
  - Feedback is often among the lowest rated items on learners’ evaluations of teachers.
  - It is stressful for learners/teachers alike.
  - It is not actionable.
- Actionable feedback must include:
  - Current performance (omission/commission, deficient/error).
  - The desired goal performance (the gap).
  - A stepwise approach to bridging that performance gap with strategies and resources.

Key Elements of Actionable Feedback

- Unfortunately, one or more of these elements are often omitted rendering most feedback unactionable.

Current Literature

- Feedback is conceptualized as a growth-oriented, reciprocal relationship.
- Feedback is an essential component of the learning process.
- It is a required element for graduate medical education (GME) program accreditation.
- It is not actionable.

Current Performance

- Limited to actionable feedback. In a recent survey, feedback is often among the lowest rated items on learners’ evaluations of teachers.

Aims

1. To educate learners and teachers to seek/provide actionable feedback.
2. To determine if residents’/fellows’ ratings of feedback improve.

References


Methods

- **PARTICIPANTS:** All faculty & trainees in our Accreditation Council on Graduate Medical Education (ACGME) approved residency/fellowship programs.
- **TIME FRAME:** 2-year intervention period.
- **INTERVENTION:** Participants expected to attend a 45-minute AC²Tionable feedback session.
  - Session typically incorporated into an established training program venue (eg, faculty meeting, core curriculum session).
  - The core elements of AC²Tionable feedback were highlighted from both a faculty & learner perspective using AC²T model:
    1. **A**sk for feedback
    2. **C**larify if any actionable feedback elements were omitted
    3. **C**onsider what steps you will take/Coach to support learning and growth
    4. **T**hank as feedback is a dynamic relationship.

Data & Analysis

- ACGME administered resident/fellow survey results for our sponsoring institution vs national mean plotted over 4 years:
  - Year 1 improved to .20 below national mean |
  - Response rate 99% [168/170]
  - Year 2 increased another .20 reaching the national mean |
  - Response rate 85% during pandemic [152/179]

Results

- All residents/fellows annually complete an ACGME administered program evaluation.
- One item focuses on feedback – Am “satisfied with feedback”.
  - 5 Point Scale: “Extremely Satisfied” to “Not at All Satisfied”.
  - In each of the 2 years prior to AC²T implementation our ACGME mean rating significantly below national mean by 0.4.
  - Response rate > 98%: 2017= 139/141; 2018=163/167
  - Post AC²T education feedback item ratings:
    - Year 1 improved to .20 below national mean |
    - Response rate 99% [168/170]
  - Year 2 increased another .20 reaching the national mean |
    - Response rate 85% during pandemic [152/179]

Conclusions

- Brief, focused training on AC²Tionable feedback elements were associated with improved feedback ratings over a 2-year period.
- Approach is easily generalizable and feasible for other programs.
- Refresher sessions with inclusion in new resident/fellow and faculty onboarding essential to sustain approach.
- Focusing learner and faculty development on key elements of actionable feedback is associated with dramatic improvement in feedback ratings.

Standard Deviation From National Mean for Item “Satisfied with Feedback” Pre/Post AC²T