

Delivering Constructive Feedback More Effectively

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- Faculty, staff, and students may be suspicious of the motives when asked to hear constructive feedback, especially about behavior
- Students are not fully prepared to appreciate the critical role constructive feedback plays in their professional development
- Sharing constructive feedback about another's behavior or performance can cause angst
- "Negative" feedback has been linked to subsequent incivility behavior (especially when receiver perceives things differently)
- Leaders are key in establishing a culture in which team members learn to welcome (or at least not disdain) constructive feedback
- A foundation must be laid before a house is built. We must establish a culture in which feedback is valued in order to deliver it effectively.
- A rich groundwork exists in nursing to guide our efforts to cultivate healthy environments
 - Nursing values include altruism, respect for human dignity, and professionalism
 - The AACN Baccalaureate Essentials clearly links civility to professionalism
 - The ANA Code of Ethics for Nurses clearly calls for respectful interactions among nurses and reminds educators of our responsibility to assure new graduates possess specific knowledge and attitudes.
 - Nurses have long placed a premium on patient safety

Strategies for Delivering Feedback More Effectively*

1. Establish a culture in which feedback is valued for the role it plays in personal and professional growth
 - a. Set aside time to discuss and collectively identify the common goals and aspirations of the group
 - b. For staff/colleagues: Discussion in staff meeting
 - "What is our collective goal?" –OR– "Show of hands. How many of us are hoping to be mediocre, unsafe nurses? How many of us are hoping to be highly competent, safe nurses?"
 - "Let's talk about the role feedback plays in how we achieve this goal."
 - "I'd like to talk to you about the role of trust in giving and hearing feedback."
 - "Can we trust that we want feedback from others to help us/you achieve your goal?"
 - "Let's trust that our sole purpose in sharing both positive and constructive feedback with each other is to help us achieve our individual and collective goal to be safe, competent nurses."
 - Avoid terms with negative connotations, e.g., *constructive criticism*
 - c. For students: Discussion on first day of class
 - "Show of hands.... How many of you are hoping to become mediocre nurses? How many of you are hoping to become highly competent nurses?"
 - "Let's talk about the role feedback plays in your professional development."
 - "I'd like to talk to you about the role of trust in giving and hearing feedback."
 - "I trust that you want my feedback to help you achieve your goal, thus I will honor that trust by sharing my observations."

- “I ask that you trust that my sole purpose in sharing both positive and constructive feedback is to help you achieve your goal.”
 - Avoid terms with negative connotations, e.g., *constructive criticism*
2. Get ready for game day
- Control the setting--choose time and place and words
 - Preparatory mind work—visualize and plan the discussion and potential receiver responses
3. Make it about them (Radio station WII-FM)
- For Staff/Colleagues
 - *Reminder about role of trust:* Remember when we talked about the role of feedback in helping you develop/us meet our goals? I have some feedback to share with you now that may be difficult to hear. I hope that you will trust that I’m sharing it with you so that I can help you meet your goal.”
 - “When you _____, it leaves me with the impression that _____. If I have that impression, it’s likely that others may have it as well.”
 - “My concern for you is that others will be unable to see (identify positive traits, characteristics, etc.)”
 - Choose words differently dependent on whether the change is required or not
 - Approach can be adapted for more sensitive issues: “I need to talk with you about a sensitive issue. I have noticed (or, it’s been brought to my attention) that your style of dress may be offensive to some. I’m concerned because it will potentially affect your practice and how others respond to you (or, your ability to establish a good relationship with patients, doctors, etc.)”
 - “So, let’s chat a bit about this and see what we can do to address it. I would really hate it if others were sidetracked from seeing all you have to offer.”
 - For students
 - *Reminder about role of trust:* Remember the first day of class when we talked about the role of feedback in helping you develop? I have some feedback to share with you now that may be difficult to hear. I’d like you to trust that I’m sharing it with you so that I can help you meet your goal.”
 - “When you _____, it leaves me with the impression that _____. If I have that impression, it’s likely that others may have it as well.”
 - “If you are okay with people drawing this conclusion about you, then keep on doing what you are doing. If you are not comfortable with people potentially drawing this conclusion, you may want to consider a change.”
 - Great for behaviors related to professionalism, role development, or role internalization. Choose words differently dependent on whether the change is required or not
 - Approach can be adapted for more sensitive issues: “I need to talk with you about a sensitive issue. I have noticed (or, it’s been brought to my attention) that you had a strong body odor in clinical. I’m concerned because it will potentially affect your practice and how others respond to you (or, your ability to establish a good relationship with patients, doctors, etc.)”
 - “So, let’s chat a bit about this and see what we can do to address it. I would really hate it if others were sidetracked from seeing all you have to offer.”

Potential methods for linking civil behavior to employee evaluations

1. Provides safe care.
 - 1.1. Demonstrate behaviors that are congruent with the ANA Code of Ethics and the ANA Position Statement on Incivility, Bullying, and Workplace Violence in all interactions.
 - 1.2. Interacts with health care colleagues, students, patients, and family members in manner that demonstrates civility and respect.

Potential methods for linking civil behavior to nursing course objectives

1. Demonstrate behaviors that are congruent with the ANA Code of Ethics and the ANA Position Statement on Incivility, Bullying, and Workplace Violence in all class related interactions. (Or similar professionalism objective.)
 - 1.1. Is prompt for clinical and skills lab activities.
 - 1.2. Is adequately prepared for clinical with understanding of patient diagnosis and medications.
 - 1.3. Follows through on plan of care and instructions from faculty and staff.
 - 1.4. Submits written materials on time and completed in a scholarly manner.
 - 1.5. Demonstrates self-direction and initiative in own learning process.
 - 1.6. Maintains confidentiality of clients and units.
 - 1.7. **Recognizes own limitations and seeks assistance appropriately.**
 - 1.8. **Participates thoughtfully in self-evaluation process.**
 - 1.9. **Seeks and thoughtfully considers constructive feedback.**
 - 1.10. **Accepts responsibility for own actions and judgments in the provision of care.**
 - 1.11. **Interactions with patients and all professional colleagues are respectful, civil, and caring.**
2. Synthesize previously learned knowledge, new knowledge, and quality and patient **safety principles** into care of clients with acute and chronic illness. (Or similar course safety objective.)
 - 2.1. Administers medications according to standards of practice.
 - 2.2. Demonstrates safety principles for self and patient in rendering care.
 - 2.3. Performs psychomotor skills according to established procedures.
 - 2.4. Recognizes situations in which previous coursework applies.
 - 2.5. Functions within an appropriate level of supervision.
 - 2.6. **Recognizes own limitations and seeks assistance appropriately.**
 - 2.7. **Communicates problems to the appropriate person.**
 - 2.8. **Interacts with health care colleagues, patients, and family members in manner that demonstrates civility and respect.**

Sample documentation excerpts:

- “Concerns about eye-rolling and abrupt, dismissive communication with classmates. In particular, I have red flags that this type of communication, based on the literature, may in fact be a patient safety issue.”
- “Tone of remarks and nature of communication with faculty yesterday struck me as inappropriate and, in my experience, was well outside the norm of professional communication standards. Additionally, based on the literature, I have serious concerns that this communication style may in fact be a patient safety risk.”
- “Although any one behavior in itself—fifteen minutes late for clinical with no call, odd comments made to patient, dismissive remarks to faculty about tardy medication--might be considered relatively minor, collectively they fall outside of the norm of what, in my experience, constitutes professional nursing practice.”