



Critiquing & Bench-Marking

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Reviewing Consultations

Why?

The Traditional Doctor Model

Historically, undergraduate medical education focused on the diagnostic process.

After qualifying, doctors were expected to refine these skills but also to develop knowledge and skills with a greater emphasis on the management of patients and their ailments.

This took place largely in a hospital setting and most often on hospital wards.

Doctors were ill-prepared for general practice consultations even though such consultations were commonplace in medical practice.



Engagement
Feedback
Workplace Based Assessment

Reviewing Consultations

- **RCA/CSA**
 - we all want you to pass!
- **Professional Satisfaction**
 - Improved efficiency
 - This is a GP's "specialist skill"
- **Patient Satisfaction**
 - Improved understanding & compliance
 - We train our patients to consult
 - Less complaints





Feedback

1. What makes for good feedback?
2. How do you feel giving/receiving feedback?
3. What are the barriers to good feedback?



Principles of constructive feedback



Offered, not imposed



Sharing information rather than giving advice.



Tailor the amount of information needed to the individual

Don't overload them
(what's most important?)



Check information with the individual

'How did you feel that went' rather than 'That went...'



Positive feedback may be confusing if the trainee felt that they performed badly.



Feedback should always refer to actions or behaviours rather than to the individual's personality,

'You are always late for clinic - can we look at this?' (behaviour) *rather than* 'You are a lazy doctor' (personality).

Characteristics of effective feedback

Performance feedback should be:

1. for the trainee's benefit and solicited not imposed
2. timely, not delayed
3. specific, not general
4. descriptive not evaluative
5. accurate
6. not embarrassing
7. relevant


Barriers to good feedback

- Trainees' dissatisfaction with feedback

- Generic
- Not related to necessary competences
- Not descriptive enough
- Mistaken for evaluation

- Trainers' anxiety about feedback

- uncomfortable highlighting areas of deficiency in a student's performance
- making the trainee feel inadequate
- praise merely overprotects the trainee and does not show them where they are making errors



Feedback Models



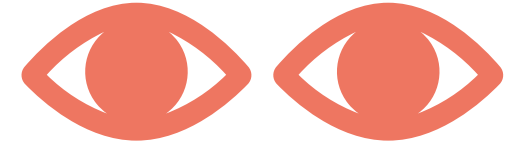
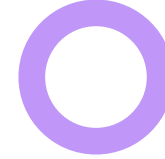
Pendleton's rules

- The first person to comment on the performance is the subject of the recording.
- They start by stating what they think they did well, before moving on to aspects that might have been done better.
- Then it is the turn of others but they too are compelled to start by itemising the good aspects before being allowed to become critical.
- Areas for personal development may be identified.
- This technique is important to prevent hurt or a feeling of humiliation in the person who reveals his video.

'Set-Go'

(aka Calgary-Cambridge aka Silverwell)

- What the trainee **Saw**
 - this should be descriptive, specific and non-judgemental,
 - e.g. 'The patient became very upset and tearful when I talked about the diagnosis of bipolar affective disorder'
- What **Else** they saw
 - e.g. 'I allowed the patient to calm down before continuing talking'
- What the trainee **Thought** at the time
 - reflection, acknowledgement and problem-solving,
 - e.g. 'I was aware the news was distressing the patient and was concerned he wouldn't remember a lot about our conversation. I could have given him written information'
- Clarify the **Goal**
 - e.g. discussing a diagnosis with a patient
- Explore **Offers** of how to achieve the goal,
 - e.g. clarifying what the patient believes is wrong and what they understand by the diagnosis given, and discussing the treatment options

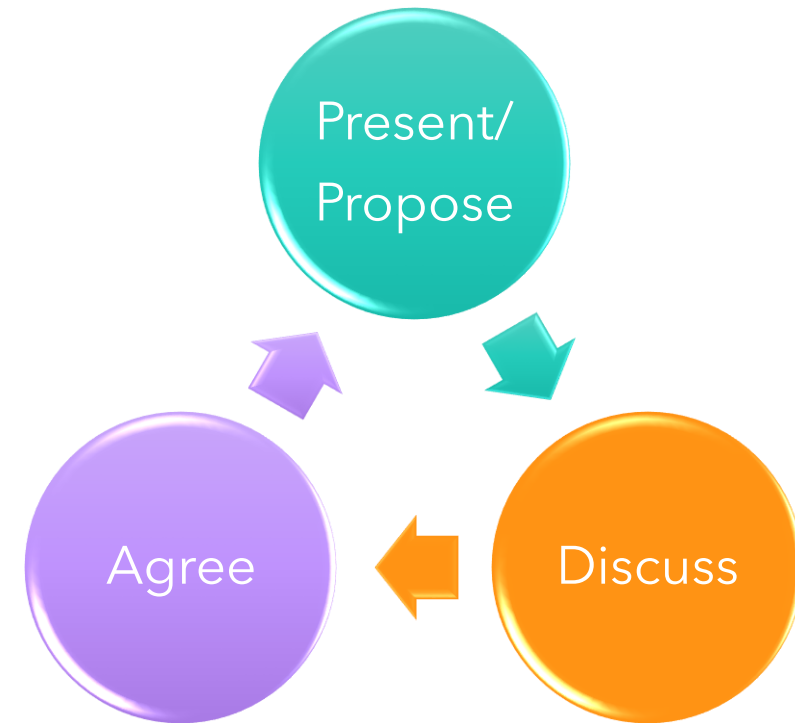


Problem-Solving Method

1. problem presented (to the trainee by the trainer)
2. problem discussed
3. problem agreed
4. solution proposed
5. solution discussed
6. solution agreed

For the method to work it is essential that the trainer:

- is able to connect - establish a rapport with the trainee
- has identified a clear outcome in advance,
 - i.e. the trainee must agree that there is a problem and the agreement should not be diluted or obscured by external factors such as the trainee's counter-arguments
- transmits a clear message: the problem cannot be resolved unless the trainee understands it and agrees with it
- is flexible - using different techniques to communicate the message



Feedback as a gift



'I liked the way you asked the patient what she wanted to achieve from the session'

something good that the trainee needs to **keep doing**



something that **distracts** the trainee from their strengths

'I feel that the patient was not clear about what was expected from her for the next session'

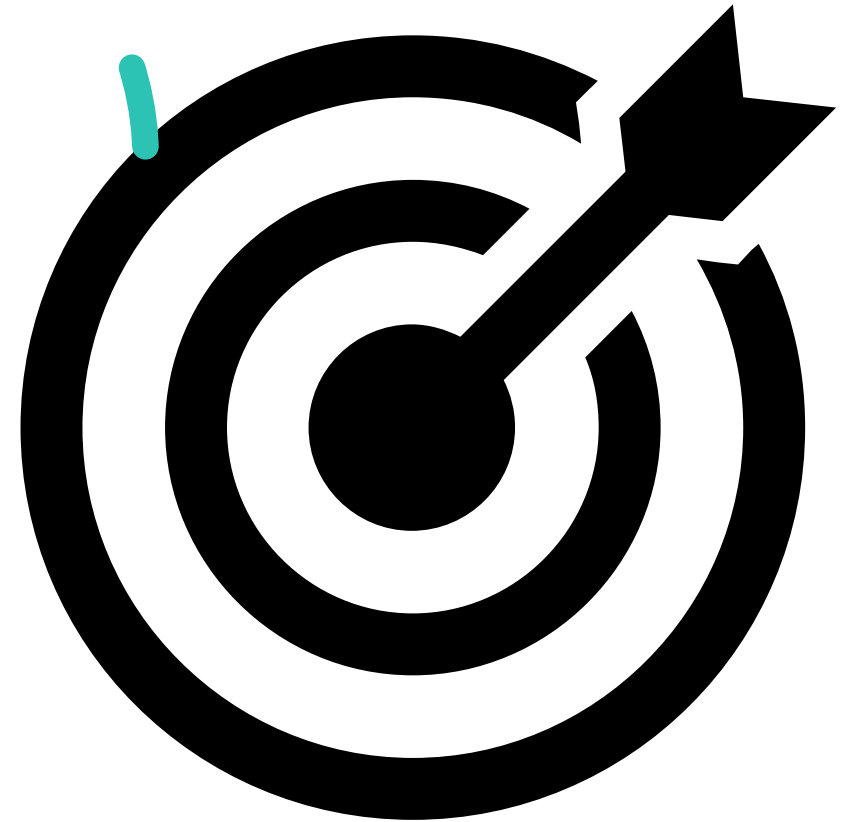


'Towards the end of the session you could summarise what has been discussed and clarify any unclear areas'

something that is a weakness, with a **suggestion for improvement**

Specific/ Target orientated

- The trainee asks the trainer to give specific feedback based on a certain aspect, decided in advance



What kind of
feedback?





Set the scene



1. Bridalwear design school tutor giving feedback to student on designs
2. Bridesmaids accompanying bride at a try-on day
3. Night before the wedding





timing IS
everything

Where & who?



Gibbs

Supportive

- Description
- Problem Orientation
- Spontaneity
 - Empathy
 - Equality
- Provisionalism

Defensive

- Evaluation
- Control
- Strategy
- Neutrality
- Superiority
- Certainty



What am I?

- A structured oral interview designed to assess your professional judgment in a clinical case.
- Assesses your performance against the capabilities and looks at how you made holistic, balanced and justifiable decisions in relation to patient care.
- Assesses your understanding and application of medical knowledge, ethical frameworks, ability to prioritise and how you recognised and approached the complexity and uncertainty of the consultation.
- Protected time of no more than 30minutes is required



Sources

- **Feedback Methods:** <https://www.cambridge.org/core/journals/advances-in-psychiatric-treatment/article/giving-effective-feedback-to-psychiatric-trainees/900B5B0B99EE479085F4BD4ACE60EDDA/core-reader>
- Gibbs strategies: <https://www.bradfordvts.co.uk/wp-content/onlineresources/teaching-learning/feedback/gibbs%20strategies%20for%20supportive%20feedback.pdf>