One of the most important qualities of a good preceptor is the ability to give feedback, second only to clinical competence. (The effective pharmacy preceptor, 2017)

Feedback will help learners:
- increase confidence
- try new skills
- reinforce good behaviours
- establish goals
- critique own performance
- becoming self-evaluators

Feedback vs. Evaluation

Feedback is an ONGOING process that helps the learner to build on a foundation of skills and behaviours.

Evaluation occurs upon COMPLETION of an established time frame with a judgment of how the learner has performed based on pre-established objectives. References to ongoing feedback that was provided during the rotation should be discussed in an evaluation.

Advice for providing effective feedback

Setting Expectations
Starting on the first day of the rotation, discuss how feedback will be provided to the learner, the purpose, and when it will be given. In a busy practice, consider taking time at the beginning or end of the day. The end of each week is a good opportunity to provide more detailed feedback identifying other activities or competencies to work on during the coming week.

Location
A neutral, private, setting is always the safest environment (although not always possible). Learners appreciate one-on-one time and the feeling of importance they get when preceptors take time to talk. Privacy limits the distractions and interruptions.

Timing
Given as close to the event as possible since feedback loses its impact if delayed too long. Proximity in time helps ensure that both preceptor and learner recall specific details. Even if preceptors are busy, stepping aside in a quiet hallway for 1 to 2 minutes may be all that is required.

Specificity
It is more meaningful to link to specific behaviours – “You did a great job just now. I really appreciated the way you remained professional and helpful when the physician was clearly upset. You kept calm and asked questions to understand their point of view. Well done!”

Allow for self-reflection
A simple question can kindly and firmly hold the learner accountable while softening the perception of harshness helping make sensitive, corrective feedback feel more acceptable. Feedback initiated by learners is seen as more instructive.

Open-ended questions are a useful tool such as: How do you think that went?, What went well/poorly in that situation? or Tell me about that. In a situation of tardiness, the preceptor can say, “I noticed you were 15 minutes late this morning. Tell me about that.”

End with an action plan considering specific actions to prevent a similar problem in the future.

Limit Feedback
Prioritize your ideas to the most important issues. Too much feedback provided at a single time can be overwhelming. Provide actionable feedback - If positive/done well, can the learner repeat it? If needs improvement, does the learner have enough information to change? Invite the learner to ask questions to ensure a firm understanding.

Making time for feedback

Identify specific activities the learner will perform during the rotation as triggers to giving feedback:
- Answering a drug information question
- A patient counselling session
- Making a recommendation during rounds
- Completion of a presentation/project (e.g., patient case, journal club)

Constructive (negative) feedback should be provided to the learner:
- Displaying unprofessional behaviour
- Not being prepared for rotation activities
- Committing an error that potentially could result in a negative effect on a patient or the practice site
Providing CONSTRUCTIVE (NEGATIVE) FEEDBACK can be hard, even for the experienced preceptor!

The key is to remain calm, professional, and display a sense of caring for your learner. Referencing the Clinical Practice Assessment tool may help provide talking points keeping the feedback focused on specific behaviours or skills.

**Reframe bad news**
Put the emphasis on it as constructive criticism so the learner will be able to achieve a high level of success in the future.

**Listen and coach**
Allow time for learners to provide their own thoughts about what they are hearing. Taking the time to listen can help preceptors identify the thought process that led to poor results.

**Remember to praise**
Point out what is working well along with what needs additional work. Indicate the areas where performance is meeting or exceeding expectations. This can help to build up and motivate the learner to perform better in the future.

**Come out with it**
State the issue directly in a respectful manner, focusing on the behaviour and not personal traits.

**Be specific and actionable**
Create a stepwise plan to improve poor performance with clear expectations and understanding from the learner.

Provide an example of how to handle the situation next time. Instead of commenting, “You didn’t seem to interact with the team,” the preceptor could say, “I would encourage you to take more time and prepare for rounds so that you aren’t spending valuable team time pouring over the chart. This allows us as pharmacists to be engaged with much more presence during patient care discussions.”

**Adding structure to your feedback:**

The **Pendleton Model** allows a two-way discussion between learner and preceptor and encourages self-assessment.

- The learner is asked to state what is good about their performance.
- The preceptor states areas of agreement and elaborates on good performance.
- The learner is asked to describe the areas of performance that could be improved.
- The preceptor states what they observed that could be improved including a specific improvement plan.

It is important to address other concerns the preceptor has with the learner even if they don’t come up as part of the self-assessment.

The **Situation-Behavior-Impact (SBI) Feedback Tool** encourages the learner to reflect further about their performance, recognize the impact of their behaviour, and consider specific actions to prevent a similar problem in the future.

- Situation - Give the learner a specific setting and time of reference. “During yesterday morning’s team rounds, when you were answering the resident’s drug information question regarding warfarin…”
- Behaviour - Describe the specific behaviours that need to be addressed - only those behaviours you actually witnessed commenting on the actual error made ensuring the feedback remains objective. “You made a mistake regarding the effect of an interaction between warfarin, erythromycin, and amiodarone…”
- Impact - Describe how the behaviour affected others including the impact on a patient. “…this could potentially have had a serious impact on the patient if the resident prescribed these drugs together.”

**The Sandwich Model** has been successful when providing difficult feedback helping to increase confidence.

- Provide comments on specific strengths reinforcing and identifying behaviours the learner should keep doing. “You are well-prepared for medical team rounds. Your level of preparation allows you to be an active participant on the team by providing an accurate and current list of the patients’ medication-related problems.”
- Identify specific areas of improvement. “I have also noticed that you have been 15 minutes late for the start of rounds the last 3 days.”
- Conclude with a positive comment or action plan to improve the corrective feedback. “Members of the team had some key questions that you were able to answer with accuracy. Tomorrow, let’s aim to be 5 minutes early for rounds to ensure you are available to answer key questions.”

**Preceptors receiving feedback**

No preceptor perfectly executes all of the elements of effective feedback. Asking your learners to provide feedback on your feedback is a great way to gain an outside perspective on your style!

- Listen and understand the feedback given - you can absorb more information if you are concentrating on listening and understanding what is being said, especially before responding. Ask questions for clarification if necessary. Listen actively by repeating key points.
- Be aware of your responses - body language and tone of voice often speak louder than words. Attentiveness indicates that you value what someone has to say.
- Be open - being receptive to new ideas and different opinions. Often, there is more than one way to do something.
- Reflect - assess the value of the feedback, the consequences of using it or ignoring it, and then decide what to do.

**References**


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