

Peer Feedback Tool for Clinical Teaching

Peer Feedback Tool for Clinical Teaching

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PURPOSE

The purpose of the “Peer Feedback Tool for Clinical Teaching” is to provide information about the quality of a faculty member’s teaching in a clinical setting, based on peer observation. Clinical settings may include ambulatory, inpatient, operative and acute care environments. The observer identifies which specific teaching behaviors are noted by checking the associated boxes on the form. The teaching behaviors listed on the form are based on the literature but they are not exhaustive. More importantly, ample space is provided for the observer to write notes and descriptive comments about the observation. Optimally, the observer and teacher should meet in person soon after the observation to discuss the teaching interaction. More than one observation may be necessary to obtain adequate information. With the goal of promoting reflective teaching practice, this conversation should start by asking the teacher to share his/her perceptions about the teaching session. The observer should share the completed form with the teacher and provide feedback about strengths and/or suggestions for improvement. Together, the teacher and observer should discuss strategies to enhance and promote best teaching practices.

The peer feedback tool was originally developed for formative feedback but institutions may choose to use it to document good teaching performance for the purposes of recognition and reward, including promotion and tenure decisions. The form can be incorporated into one’s dossier and/or educator’s portfolio to document excellence and improved performance over time after incorporation of feedback from peer observations of teaching.

This form is a companion document to the MedEdPORTAL approved Peer Feedback Tool for Lectures & Small Group Teaching available at

http://services.aamc.org/30/mededportal/servlet/s/segment/mededportal/find_resources/browse/?subid=8416

OBJECTIVES

1. To provide a form for peer feedback that may be used to collect information about observed teaching behaviors during clinical teaching.
2. To provide a framework for peer discussion of teaching performance during clinical teaching.
3. To provide a model to enhance teaching through individualized peer coaching and faculty

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development that includes peer feedback for clinical teaching.

CONTEXT

We suggest the following outline of recommended guidelines for using the “Peer Feedback Tool for Clinical Teaching.”

Pre-Observation Exchange

- 1. Determine the purpose of the observation.** Ask the teacher:
 - what he/she hopes to gain from this observation.
 - whether he/she is thinking of using this observation for formative purposes (promoting the development of his/her teaching practice) or summative purposes (using the outcomes of this observation for departmental or promotional review).
 - how you can best address his/her expectations and needs.
- 2. Establish confidentiality.** Point out that you will keep your observations and post-session discussion confidential and that you will send the completed observation form only to the teacher, unless he/she requests that you disclose this information to others.
- 3. Set up the schedule and share the procedures.** Schedule the observation and the post-session feedback encounter (20-30 minute meeting). Explain the procedures for the observation and post-session to the teacher.
- 4. Learn about the context of the session to be observed.** Ask for information about:
 - the target audience.
 - the clinical setting/session format.
 - the session goals.
 - any other information the teacher wants you to learn about before you observe.
- 5. Identify behaviors to be observed with the teacher by:**
 - asking what he/she would like you to focus on during the observation.
 - sharing the observation form.
 - asking the teacher to identify any specific teaching behaviors on the form that he/she would like you to pay particular attention to during the observation.
- 6. Decide on the observer’s position and introduction.** Before the session begins, decide with your peer where you should sit/stand and how you will be introduced to the learners in order to share with them the focus of your observation.

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Observation

1. **Maintain the focus of the observation.** Focus on the behaviors the teacher exhibits, and be attentive to the aspects the teacher asked you to focus on during the observation. Do not exclude other aspects as sharing this information with the teacher may help him/her to recognize additional strengths and/or areas for improvement.
2. **Document observations.** You may complete the form during the observation itself but this may be distracting and cause you to miss important elements of the teaching encounter. Alternatively, during the observation, you can take field notes to record your observations and/or relevant quotes and then use those notes to guide your completion of the form after the observation. You should complete the form as soon as possible after completing the observation. Choose the approach that would best work for you and that minimizes distraction to the teacher, learners and patients.
3. **Identify aspects that you think are strengths of your peer's teaching practice.**
4. **Identify aspects that you think he/she needs to develop/improve.**

Feedback

1. **Organize observations to share.** At the end of the session:
 - Give yourself time to organize your observations and complete or review the observation form.
 - Invite the teacher to take this time to reflect on the session and identify issues he/she would like to discuss with you.
 - Organize your notes to ensure you are ready to provide information about strengths and areas of improvement using specific examples from the observation.
2. **Exchange observations.**
 - Start the discussion by asking the teacher to share his/her reflections with you.
 - Share your observations on the issues he/she wants to discuss with you and include other issues you observed.
 - Identify 3 strengths and 3 areas for improvement and support your comments with the data you collected. For example, you could say, "When you asked the learner to demonstrate how he identified that the patient had an enlarged liver and then demonstrated how to correctly percuss the patient's abdomen..."
 - Offer suggestions for improvement and help the teacher identify specific teaching strategies he/she might want to consider putting into practice. Share "best practices" and/or information/resources from the literature.
3. **Wrap up and sharing learning.** At the end of the encounter:
 - Summarize your observation.
 - Share something that you learned from observing this teaching and learning event. For example, "It was particularly effective when you probed learning and asked the learner to think about other hypothetical cases . . ."

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LESSONS LEARNED

Based on discussions among the authors and with other users of the tool at the authors' institutions, three key lessons have been learned from the use of the "Peer Feedback Tool for Clinical Teaching."

1. The form can help faculty objectively measure and recognize a faculty member's teaching skills
2. Verbal feedback and discussion between the teacher and observer enhances the use of the form. Reflective practice is encouraged through constructive feedback and collaborative conversation about effective teaching strategies.
3. Creating an atmosphere of respect and confidentiality promotes faculty willingness to participate in peer review.

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DESCRIPTORS FOR TEACHING BEHAVIORS LISTED ON OBSERVATION FORM

Establishing Learning Environment

1. Listens to learner(s)
 - Listens actively and non-judgmentally to what the learner(s) is communicating without interruption
 - Incorporates learner's (s') ideas and comments into the discussion
2. Encourages learners' participation
 - Welcomes and demonstrates appreciation of learner's (s') participation
 - Encourages and makes learner(s) feel comfortable asking questions
 - Promotes learner(s) interaction with the patient(s) and their role on the care team
 - Reminds learner(s) that they are to respect their peers' participation
 - Promotes learner's teaching each other
 - Draws nonparticipating learners safely into the discussion without "grilling" them
3. Asks learner(s) to outline their diagnosis, assessment or management plans
4. Incorporates learner's (s') ideas
 - Draws/builds on learner's(s') comments to provide reinforcement or expand concepts
 - Offers opportunities for learners to summarize/define patient problems
 - Paraphrases learner(s)' ideas to summarize patient's(s') problems and assessment.
 - Uses/builds on learner's (s') suggestions to develop evaluation and management plans
 - Provides justification if learner's(s') suggestions are not incorporated
5. Directly observes learners' clinical skills in interacting with patients
 - Watches learners talk with patient(s)
 - Watches learners examine patients(s)
6. Provides constructive feedback to learners
 - Provides specific descriptive feedback
 - Gives learner(s) ideas or helps him/her identify strategies to improve in their knowledge, skills, and/or behavior
7. Shows enthusiasm
 - Is enthusiastic about the subject matter and makes it interesting
 - Shows interest in learners' ideas, comments or concerns
 - Displays energy and passion

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Fostering Communication

1. Introduces learner(s) and patient(s)
 - Makes sure all participants are identified and their roles on the team are understood by the patient
2. Involves patient(s) in discussion
 - Incorporates discussion with patient(s) into educational session
 - Observes and/or demonstrates pertinent aspects of history taking and physical examination
3. Encourages exchanges between learner(s) and patient
 - Encourages learner(s) to ask questions and to provide explanations to the patient(s)
4. Maintains rapport with patient(s)
 - Demonstrates appropriate nonverbal communication with patient(s)
 - Demonstrates clear communication with patient(s)
 - Includes communication skills in educational discussion

Modeling Clinical Knowledge, Decisions, Skills

1. Reveals broad knowledge-base
 - Shares accurate and current information
2. Shows relationships between theory and practice
 - Associates basic science concepts with clinical practice
 - Shares relevant research and explains how it applies in decisions about patient's (s') care.
 - Cites evidence to support practice decisions
3. Directs learners to useful literature
 - Encourages outside reading and refers learners to specific references/bibliography
4. Demonstrates data-gathering, use of consultations, and interpretation of laboratory data
 - Facilitates learner's (s') skill development by modeling these behaviors:
 - Demonstrates skills in obtaining elements of the history and/or performing aspects of the physical examination
 - Incorporates analysis of laboratory and other data into discussion
 - Helps learners formulate appropriate consultation questions
 - Discusses how information provided in a consultation will be used in further decisions about patient's(s') care
5. Demonstrates clinical procedures
 - Facilitates learner's (s') skill development by:
 - Demonstrating the steps involved in doing a procedure(s).
 - Supervising and observing learner(s) doing procedures
 - Providing feedback to learner(s) on procedural techniques
6. Briefs learners to observe specific features of consultation/procedure
 - Discusses approaches to procedures, including informed consent

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- Prior to patient encounter or procedure, directs learner(s) to observe key elements
7. Provides learners with practice opportunities
 - Offers opportunities for learner(s) to practice oral presentations, role-play interactions with patients before performing these skills with other members of the team or with the patient (s)
 - Offers opportunities for learner(s) to draft written documentation, consultation request(s), prescriptions, orders, etc. before completing permanent written document
 8. Demonstrates clinical reasoning and decision-making skills
 - Discusses reasons for diagnostic and therapeutic decisions
 - Raises stimulating and challenging questions that provoke learners' reasoning
 9. Objectively defines patient problems
 - Uses data obtained to succinctly express patient's (s') problems/needs
 10. Synthesizes patient problems
 - Periodically summarizes data to reinforce key elements of the case
 - Integrates key findings in the patient's(s') clinical presentation and in the data from the patient's (s') evaluation to identify patient's ('s) problems/needs
 11. Demonstrates reflective practice
 - Reflects on what has been accomplished and what still may need to be done
 - Acknowledges knowledge gaps and identifies strategies to obtain information/data to ensure provision of evidence-based care
 12. Shares insights from own practice
 - Relates content under discussion to previous clinical situations
 - Uses clinical examples to reinforce teaching points
 13. Works effectively with health care team
 - Reminds learner(s) that he/she is a member of the team
 - Promotes active exchange of ideas and redirects questions to other members of the group when appropriate
 - Includes other health care providers in patient discussions
 - Fosters learner interaction with other members of the health care team
 - Turns conflict or differences of opinion into learning opportunities
 - Helps learners to collectively solve problems or make decisions together
 14. Elicits feedback on his/her performance from learners
 - Solicits learner(s)' feedback and suggestions for improvement

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Promoting Professionalism

1. Shows respect for learner(s) and patient(s)
 - Communicates with all learners and patients
 - Uses learner's(s') and patient's(s') names
 - Is sensitive to learner's(s') individual interests and abilities
 - Is aware of and sensitive to learner's(s') and patient's(s') cultural backgrounds
 - Allow learner(s) and patients to bring up concerns
 - Answer all questions
 - Incorporates patient values/preferences into clinical decision-making
2. Recognizes own limitations
 - States when he/she does not know the answer to learner's (s') and/or patient's (s') questions or concerns
3. Shares ethical values and beliefs that guide him/her in patient care
 - Incorporates discussion of ethics into teaching when appropriate
5. Shares professions legal boundaries
 - Discusses scope of practice issues
 - Explains laws regulating aspects of patient care when applicable to the case
6. Shares insights about profession's relationship to society
 - Discusses physician's role in the community/society/the health care system
 - Helps learner(s) see how physicians relate to one another and to other members of the health care team

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