Feedback conversations in a group setting:

Physicians’ experiences with guided reflection on their professional performance in the context of CPD

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Continuing Professional Development (CPD)
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- Communication
- Leadership
- Medical knowledge
- Collaboration

Amsterdam UMC
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Multisource feedback... and revalidation

Physician revalidation
From feedback to performance improvement

The learner at the center

The environment: sociocultural factors
Feedback conversations
Aim of our study

Sociocultural perspective
Research questions

**RQ 1.** How do physicians experience *participation* in group sessions following their receipt of a personal feedback report?

> process

**RQ 2.** How do they perceive the *impact* of these sessions on their learning and development?

> outcomes
Methods

Sample
• Purposive sample

Data collection
• Within 2 weeks after session: interview (50 min)

Data analysis
• Constructivist grounded theory approach
Results - participants

26 physicians
15 male/11 female

13 physician groups
- Orthopedics
- Gynaecology
- Rheumatology
- Pediatrics
- Internal med
- Emergency med
- Geriatrics
- Anesthesiology
- Lung diseases
- Rehabilitation

5 hospitals
Non-academic setting
Results – RQ 1 (process)
Results – RQ 1 (process)

Self-disclosure

“My colleagues are all very strong personalities.. I secretly enjoyed seeing them **vulnerable**”

Engagement

“Because the **others** talked about their struggles, I felt **encouraged** addressing certain topics too”
Results – RQ 1 (process)

Group contextual factors

“We are all young emergency doctors.. it would be nice if there were some older, more experienced doctors in our group, to provide us with some overview and offer us some reassurance”.

Personal factors

“My colleagues shared very personal things.. I felt like it was expected of me too share something too. I didn’t feel comfortable because I didn’t intend to do that..
Results – RQ 2 (outcomes)
Results – RQ 2 (outcomes)

Daily practice – content aspects

“After this session I can better explain why I do things the way I do them, especially when it comes to supervision of residents.”

Organization and strategy – political aspects

“I’d like to rotate more and see other patients than only the 7-year old girls with abdominal aches.”

Work engagement and wellbeing – emotional aspects

“I felt genuine interest, concern and empathy. Working with a group of colleagues you feel safe with.. that makes up for three quarter of your job satisfaction.”
Results – RQ 1+2 (process + outcomes)

We are not going to completely honest with each other. We need to continue working together”.

“It was just chatting safely about each other's qualities, there was no critical sense whatsoever. It should be about concrete behavior that you can change.”

“How are we going to measure any changes?”
Discussion

Sociocultural perspective:
Feedback conversations in the form of group dialogues
Discussion

Sociocultural perspective: Feedback conversations in the form of group dialogues

Politeness theory
Discussion

Sociocultural perspective: Feedback conversations in the form of group dialogues
Take home message

It’s about investing in relationships and managing group dynamics, not about following recipes.
Thank you for your attention

Questions, suggestions, ideas?

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