

**Feedback: Making it Powerful, Effective, and Efficient**  
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**Annotated bibliography and additional resources:**

**Ende J. *Feedback in clinical medical education.* JAMA 1983; 250(6):777-81.**

A classic article on the principles of providing effective feedback. Dr. Ende provides a framework for the feedback process and emphasizes the importance of focusing on observable behaviors of the trainees rather than on the trainees themselves.

**Hicks PJ, et al. *To the point: Medical education reviews—dealing with student difficulties in the clinical setting.* American Journal of Obstetrics and Gynecology 2005;193:1915-1922.**

A review of several types of difficulties encountered by physician educators with suggested strategies for working effectively with challenging students in the clinical setting.

**Archer, J. *State of the science in health professional education: effective feedback.* Medical Education 2010;44:101-108.**

A critique of the current literature on feedback and its effectiveness with a particular focus on its relevance to health care education. It challenges the practical models that have arisen from this literature and argues that only feedback seen along a learning continuum within a culture of feedback is likely to be effective.

**Quilligan S. *Communication skills teaching: The challenge of giving effective feedback.* The Clinical Teacher 2007;4:100-105.**

This paper explores why giving effective feedback is difficult, and then offers ways to overcome obstacles.

**Lucas JH, Stallworth JR. *Providing difficult feedback: TIPS for the problem learner.* Family Medicine 2003;35(8):544-546.**

Authors present a mnemonic (TIPS-type, identify, perception, and strategies) to help clinical teachers remember how to approach learners with specific difficulties and give them feedback.

**Delima Thomas J, Arnold RA. *Giving feedback.* Journal of Palliative Medicine 2011;14:233-239.**

The authors discuss the parallels between giving feedback and breaking bad news, emphasizing the importance of titrating the amount of information given, attending to affect, and making a plan for next steps. Special considerations for giving feedback in palliative care are highlighted, including the effect of heightened emotion in the clinical encounter and the difficulties of giving feedback about communication skills.

**Wenrich, M et al. *From Cheerleader to Coach: The Developmental Progression of Bedside***

***Teachers in Giving Feedback to Early Learners. Academic Medicine 2015;90:S91–S97.***

A qualitative study including longitudinal interviews with clinician–teachers over five years in a new clinical skills teaching program for preclinical medical students. The authors discuss progress educators make in giving feedback in multiple areas.

**Rudolph, JW et al, *There’s No Such Thing as “Nonjudgmental” Debriefing: A Theory and Method for Debriefing with Good Judgment, Simulation in Healthcare: 2006: 1;1; 49-55.***

An unique frame for delivering feedback derived from debriefing work in medical simulation. The authors propose a nuanced approach to engaging with learners and particular skills that support relationships.

**Ramani S, et al. Twelve tips to promote a feedback culture with a growth mind-set: Swinging the feedback pendulum from recipes to relationships. Medical Teacher 2018; DOI: 10.1080/0142159X.2018.1432850**

In this twelve tips paper the authors attempt to define elements that constitute a feedback culture and to describe distinct strategies that can be used to foster a learning culture with a growth mind-set.

Books:

***Thanks for the Feedback: The Science and Art of Receiving Feedback Well*** by Douglas Stone and Sheila Heen

***Difficult Conversations: How to Discuss What Matters Most*** by Douglas Stone and Bruce Patton