Learner-Centered Feedback: Fostering Milestone Achievement Using Self-Determination Theory

John Frohna, MD, MPH
Dan Sklansky, MD
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Disclosures

- Drs. Frohna and Sklansky have nothing to disclose.

Objectives

- Discuss how sub-competency milestones can inform feedback to learners
- Review the concepts of intrinsic motivation and Self-Determination Theory (SDT)
- Use the SDT framework to provide effective feedback that preserves intrinsic motivation

Session Timeline

3:30 Using Milestones for Improved Feedback
3:45 Small Groups: Improving Feedback
4:00 Looking at Feedback Through a SDT Lens
4:20 Small Groups: Applying SDT Feedback
4:45 Discussion and Wrap-Up

Utility of Milestones

- Tracking resident development
- Helping learners develop
- Faculty development
- Program outcomes
- Accreditation
- Ensuring outcomes to public and profession
Utility of Milestones IN CURRENT STATE

• Tracking resident development
• Helping learners develop
• Faculty development
• Program outcomes (maybe)
• Accreditation
• Ensuring outcomes to public and profession

Cytopathology Milestones

Evidence for Milestones as Roadmaps for Learning

Self and Program Assessment

Large Group Discussion

• What informs self assessment?
• What calibrates self assessment?
Consider Physician Development as a Developmental Process

- Normalize
- Connect with learner and draw similarities with your prior experience

Focus on Next Steps

Milestones as Roadmaps

Zones of Proximal Development

Competence vs Capability (Fraser and Greenhalgh 2001)

- Competence: What you can do now
- Capability: How you incorporate experience and learning for the future
A Scenario

• It’s mid-November and your fellow is reviewing Pap smears. The test shows atypical cells and you ask him about recommended followup. He says, "I have to review those guidelines again." Think about what feedback you would provide…

MK2: Interpretation and Diagnostic Knowledge

• Level 2
  – Participates in cervical cancer screening, and complies with laboratory regulations related to cytopathology tests
  – Observes indications for ordering ancillary studies

• Level 3
  – Applies cervical cancer screening and follow-up guidelines, provides advice on follow-up guidelines, and adheres to laboratory regulations related to cytopathology tests
  – Proposes and explains appropriate indications for ancillary studies

• Level 4
  – Accurately correlates cervical cancer screening cytology specimens with prognostic factors
  – Reliably orders appropriate ancillary studies prior to sign-out

Let's Practice!
A Scenario

- It’s mid-November and your fellow is reviewing Pap smears. The test shows atypical cells and you ask him about recommended followup. He says, “I have to review those guidelines again.” Think about what feedback you would provide...

Providing Feedback and Calibrating in a Learner-Centered Manner

- Explicitly frame physician development as a normal developmental process
- Focus on next steps
  - Use milestones!
- Switch from discussion to dialogue
- Frame the process using Self-Determination Theory

*Caveat: We will focus mostly on typically developing residents; additional strategies may be needed for those who need additional help
*Caveat: We will not review common feedback suggestions — e.g., timely, specific, focused on behaviors that are changeable, etc

Self-Determination Theory

“There is an inherent human tendency to develop toward self-directed and autonomous regulation of behavior.”

“For a high level of intrinsic motivation (initiative), people must experience satisfaction of the needs both for competence and autonomy”

SDT and Intrinsic Motivation

<table>
<thead>
<tr>
<th>Amotivated</th>
<th>Extrinsic motivation</th>
<th>Intrinsic motivation</th>
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<tbody>
<tr>
<td>Least autonomous</td>
<td>Identified Regulation</td>
<td>Most autonomous</td>
</tr>
<tr>
<td>Integrated Regulation</td>
<td>Regulated Regulation</td>
<td>Identified Regulation</td>
</tr>
<tr>
<td>Interdependent Regulation</td>
<td>Weakly identified Regulation</td>
<td>Weakly integrated Regulation</td>
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</table>

SDT themes in facilitating initiative

- Sense of autonomy
  - Space to make choices
  - Allowing decisions
- Competence
  - Tasks are difficult but can be accomplished
  - Mild to moderate stress without major fear
- Relatedness
  - Formative and summative feedback
  - Not demeaning
  - Team integration and leadership
Autonomy Support is Important

- Autonomy-supportive effects
  - Catalyze greater intrinsic motivation
  - Encourage desire for challenge
  - Improve affect in learners and supervisors
  - Decreased stress
- Autonomy-limitation effects
  - Learners lose initiative
  - Material is not as well learned
  - Decreased learner and job satisfaction
  - Depression, possible suicidal ideation


Learner Competence

- Challenge the learner
- Should increase competence
  - Out of comfort zone
  - Extends prior knowledge or skill
  - High chance of success
- Should be supportive
  - No penalty for failing
  - Not high stakes for the learner

Autonomy isn’t everything...

Learner Relatedness

- Team cohesion
  - Roles and expectations are clear
  - Leadership assigned
  - Strive for despite scheduling challenges
- Shared experiences
  - Via your own past experience
  - Via reflection after current events
- Encourage connectedness
  - Within team, other HCPs, patients

Providing meaningful feedback in SDT

- How to provide feedback without challenging initiative?
- Maintain autonomy
  - Ideally feedback is sought out
  - Direct to the issue via reflection
- Maintain competence
  - Additions, not all incompetent
- Maintain relatedness
  - Constructive, relatable
  - Considering multiple viewpoints

Sense of Autonomy

- Threats to autonomy already present
  - Residents can be overridden by plans of others often
  - Residents want to feel like their ideas drive their patient care and learning
  - Residents need helpful ideas from others to drive their patient care and learning
### Sense of Competency

- How do we help residents focus on next steps while avoiding thwarting a sense of competence for their current developmental level?

### Sense of Relatedness

- What could we do that would inhibit a sense of relatedness and should be avoided?

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### Let’s Practice!

![Image of three people discussing]

### How Learners Should Feel

- Encouraged to give opinions, make decisions
- Challenged AND praised
- Part of the team
- Good about what they do

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### Wrap Up
Feedback Through A Self-Determination Theory Lens

Scenario 1

You are supervising your fellow doing a bedside FNA on a patient with a thyroid nodule. Your fellow encounters some unexpected bleeding after removing the needle, and the patient complains of more pain than expected. The fellow seems flustered, and abruptly tells the patient that this shouldn’t hurt much, then looks at you. You are sure that the fellow was in the right spot and got a good sample, but didn’t apply enough pressure right away.

How can you support the patient and fellow in this situation, and give the fellow feedback on procedural and communication techniques using SDT framework?

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**Scenario 2**

Your fellow is called by an oncology attending to report on the tissue diagnosis from a lymph node biopsy in a patient with suspected lymphoma. The fellow gives the oncology attending the diagnosis report from your computer system, but is unable to answer the attending’s follow-up questions. The attending calls you later to ask about the details, and also mentions that your fellow rambled a lot and didn’t really come out and say that she didn’t know the answers.

How could you give meaningful feedback to your fellow?

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