

Constructive feedback: How to have the difficult conversation

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● Prepare for a timely, goal-oriented, forward-thinking discussion.



OFFERING FEEDBACK gives you the opportunity to guide others' clinical and professional development. If you're a preceptor, you provide feedback to help guide novice nurses to achieve goals and ensure that they deliver efficient, safe, quality care.

But not all conversations about performance are easy. Most people find delivering positive feedback easier than constructive, developmental feedback (suggestions for improvement). And, of course, negative feedback should be avoided; it serves only to criticize and hurt the recipient. Several practical strategies can help you effectively deliver feedback.

Be prepared

Before beginning the conversation, be prepared with appropriate observations. For example, take 5 minutes to think about the specific actions or behaviors you

saw or the conversations you heard. Those observations are the basis for your discussion. Then think through what you want to say, and deliver your feedback as a discussion rather than a quick comment.

Select a neutral, private location for your conversation; avoid giving corrective feedback in front of others. Actions that place a patient at risk must be addressed immediately, but when possible, wait to have the conversation after leaving a patient's room or the nursing station.

Be timely

Timely feedback can't always be delivered immediately because of privacy and confidentiality concerns, but the sooner it's delivered, the more useful it will be. Try to plan your conversation so that it doesn't interrupt workflow. You want to allow time for the nurse to reflect on the events and action plan, which will promote confidence building rather than performance defeat.

Be goal-oriented

Before starting the conversation, revisit the goals established for the nurse, then structure the feedback

so that he or she understands which outcomes aren't being met. By keeping the goal in mind, you can focus on the behaviors that need to be corrected, making the feedback relevant to the situation. For example, perhaps a goal is that the nurse will be able to independently manage a six-patient assignment by week four of orientation. Consider what behaviors you've observed that would prohibit him or her from meeting that goal (not explaining procedures to a patient, not prioritizing patient care appropriately), and share those observations.

Be direct

In the past, the "feedback sandwich" method (positive, negative, and then positive statements) was recommended for difficult conversations about performance. However, some recent opinions indicate that it may not be

the most effective approach because the constructive feedback gets lost in the “sandwich,” muddying the message and diminishing its value.

Instead, present feedback (using “I” rather than “you” statements) that describes observed problematic behavior or actions, explains the impact of that behavior, and offers recommendations for change.

Observed behavior: I noticed that the procedure wasn’t clearly explained to the patient before beginning.

Impact: This made the patient uncomfortable because she didn’t know what to expect.

Recommended change: Next time, I would suggest taking a moment to review the procedure with the patient before beginning.

Be curious

Make sure the nurse receiving the feedback is involved in the discussion. A reciprocal conversation makes it clear that your feedback is specific to the nurse’s behavior; you’re not making global observations about behaviors observed in the clinical setting. Pose questions that ask for clarifying remarks about why the nurse did or did not perform a particular action. For example, “I noticed you were uncertain about how you should prioritize the needs of the patient receiving total parenteral nutrition. What questions do you have about total parenteral nutrition and managing patient care needs?”

Presenting the observed behavior as a question promotes self-reflection and provides a learning opportunity for the nurse to assess the situation and detect problems. In turn, questions allow the nurse to make connections between performance expectations and observed behaviors. Use the dialogue as a starting point to identify next steps for meeting desired goals.

Be forward-thinking

A critical element of constructive feedback is offering actionable next steps. For example, “Tomorrow, I want you to identify patient needs as those that are time sensitive and require skilled nursing interventions or those that ancillary staff can do. This will help you more efficiently prioritize patient care.” This approach turns a difficult conversation into a meaningful, focused, personalized, clear, and productive experience.

Positive results

Preceptors should be prepared to engage in conversations that include discussing both observed behaviors and recommendations to guide practice. Providing your constructive feedback in a structured approach can yield positive goal-oriented results. ★

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