

LOaD BeFORE a Plan:  
A Structured Feedback Technique

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Feedback, defined as “information that a system uses to make adjustments in reaching a goal”, is an essential element of medical education.<sup>1</sup> Students desire feedback and rate teachers who provide feedback higher than those who do not provide feedback.<sup>2</sup> Numerous behaviors have been associated with providing better feedback. However, there are few methods that describe how to incorporate these individual behaviors into an overall system. Three examples include the transtheoretical model with PEARLS, the TIPS model, and STP.<sup>3-5</sup> However, only one of these models, the PEARLS method, systematically advises the teacher to address the emotional aspect of feedback.<sup>4</sup> In one study, those attending physicians who routinely attempted to discuss the emotional responses of learners were more than 4 times more likely to be highly rated on a feedback scale.<sup>6</sup> This PEARLS method, however, is adapted from the doctor patient communication literature and is not intuitive when giving feedback. One other area of communication where the emotional component is emphasized is risk communication, where the emotional/empathic aspect is often referenced first. Subsequently, we developed a new method of feedback to incorporate many of the known individual feedback behaviors into one system, including the emotional/empathic aspect. We call this system “LOaD BeFORE a Plan”, which is an acronym for

Label as feedback  
Open ended question  
Diagnose the learner  
Be empathic  
Feedback  
Observations supporting feedback  
Reaction of the learner to the feedback  
Evaluate again for acceptance, and finally,  
agree upon a Plan.

With our system, there are several preconditions that the teacher must address prior to the session. First, the goals, objectives, and expectations should have been communicated well to the learner at the beginning of the learning activity. Second, the teacher should have recorded and verified observations made from direct observations of the learner’s behavior. Lastly, the teacher arranges for a private session to conduct the feedback session.

The session begins by labeling the session as feedback. Then, the teacher asks an open ended question to facilitate a discussion. This might be as simple as “how do you think clinic went today?” Using the learner’s response, the teacher then diagnoses the learner into 1 of 3 categories, which is based on the transtheoretical model of behavior change<sup>4</sup>, relabeled as:

- No insight (precontemplator): “Everything is great!”
- Insight without acceptance (contemplator): “I should know that, but the clinic was backed up.”
- Insight with acceptance (action phase): “I should know the blood pressure goal for this patient and will review the goals.”

Of course, with some learners you always get “everything is great!”, so it is necessary to probe deeper with a specific question, such as “How did you handle Mr. Jones HTN today?” Again, the answer is used to diagnose the learner.

By diagnosing the learner's readiness to improve, the teacher can provide a more effective feedback and plan.

No insight: The goal is triangulate evidence of a problem.

Insight without acceptance: The goal is to make a case for importance.

Insight with acceptance: The goal is to facilitate the plan for improvement.

When actually delivering the feedback, the acronym BeFORE is used:

**Be empathic**: Give the learner the impression that the teacher understands the learner's situation.

**Feedback**: The teacher gives the learner the specific, behaviorally based feedback based on their meeting/not meeting the learning objectives.

**Observations**: The teacher provides the learner with the evidence (observations previously recorded) they have that the learner has or has not met the learning objectives.

**Reaction**: The teacher then allows the learner to react to the feedback, "What do you think about what I have just told you?"

**Evaluate**: Based on the learner's response, the teacher re-diagnoses the learner (insight with/without acceptance, no insight).

Finally, the teacher and the learner make a **plan**. The plan is based on the learner's readiness to improve. If the learner has no insight, the goal is to convince the learner that the problem exists. If the learner has insight without acceptance, the goal of the plan should be for the learner to recognize the weakness is one that does require improvement and is a higher priority over the reasons the learner has given for not wanting to change. Lastly, if the learner has insight with acceptance, then the teacher should facilitate an improvement plan. Ideally, the plan should come from the learner with teacher guidance.

#### References:

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## The details of the LOaD BeFORE a Plan

Prior to a feedback session:

- Communicate and negotiate goals, objectives, and expectations with the learner
- Make and record observations of the learner's behavior
- Arrange for a private session to give feedback

Opening the feedback session:

- Label as feedback. "I'd like to give you some feedback on your performance to this point/about this patient/etc."
- Follow with Open ended question, e.g. "How do you think this has gone so far?"

Diagnose the learner, based on their response:

- No insight
- Insight without acceptance
- Insight with acceptance

If you get nothing on the answer to your open ended question:

- Probe deeper with a more specific question, e.g. "What about how you handled Mr. Jones' mental status change?" Then diagnose the learner.

Give BeFORE. Feedback, using the steps

- Be empathic. "I know how difficult being an intern can be..."
- Feedback. Give your specific, behaviorally based feedback based on the their meeting/not meeting the learning objectives
- Observation. List the observations that support your feedback.
- Reaction. Assess for the learner reaction, e.g. "How do you feel about that?"
- Evaluate. Evaluate the learner's readiness to change again.

Leave with a specific plan

- Appropriate to the readiness for improvement
- No insight: Triangulate the evidence for a problem
- Insight without acceptance: Make case for importance
- Insight with acceptance: Facilitate plan for improvement with the learner
- Preferably made by the learner