

# HOW TO GIVE CONSTRUCTIVE COACHING FEEDBACK

This resource provides language examples and advice for preceptors offering constructive comments to residents in the Competence by Design (CBD) coaching model.

## CONSTRUCTIVE FEEDBACK

Constructive feedback is an essential part of coaching learners and helping them achieve their learning goals. Research has shown that building an educational alliance with your learner can make learners more responsive to feedback.<sup>1</sup>

## EDUCATIONAL ALLIANCE

An educational alliance is a mutual understanding that all are working collaboratively towards a shared goal. It begins with meeting the learner as a person, refining and supporting their learner-centered goals, and reframing feedback as a dialogue with the learner.<sup>2</sup>

## WHEN TO GIVE FEEDBACK

In-person interactions are a great opportunity for coaching feedback. If the moment does not allow for it, set aside time with your learner to facilitate those conversations. Timing matters, so the sooner feedback can be initiated, the better.

## WHERE TO GET SUPPORT

You may, on occasion, find yourself unsure of how to proceed with a feedback conversation. When in doubt, it's always a good idea to connect with your rotation leads and/or program directors for some guidance, and to make sure that they are aware of the situation.

## THE CBD COACHING MODEL - RX-OCR<sup>3,4</sup>

How to offer feedback with Rx-OCR (Relationship/Rapport, Expectations, Observe, Coach, Record/Reflect)

### RELATIONSHIP/ RAPPORT

Establish an educational **relationship/rapport** ("educational alliance") to establish a safe learning environment.

Some learners may feel vulnerable or embarrassed when preceptors identify areas for improvement in their performance. While this is a natural reaction for anyone, how can we prepare the learner for receiving feedback?

#### **Establish feedback expectations ahead of time.**

- Explaining to your learners that a coaching approach to feedback (where the intent is to support and improve collaboratively) is used with everyone may help learners prepare themselves mentally and emotionally.

#### **Explain why feedback is offered.**

- While it may seem obvious, it can be helpful to reiterate that feedback is offered to learners to support them. It's a good reminder for everyone that identifying areas in need of growth can help the learner and preceptor work together to improve in measureable ways.

#### **Examples of relationship building:**

- "As your preceptor, I'll be offering you feedback throughout your placement with us. Let me explain what that will look like in practice."
- "I think we all want to be perfect, myself included - but I want you to know that we're all always learning. I offer coaching feedback to help my learners grow - do you have any questions about that?"

# EXPECTATIONS

Set *expectations*  
for an encounter  
(discuss learning goals).

Set expectations about what you're offering (feedback) and whether they are open to receiving it (permission).

While feedback may be a necessary intervention, intentionally including a phrase that asks for the learner's consent can invite the recipient to feel more at ease.

Asking permission might mean that they decline. In which case, consider offering to meet later in the day to discuss your thoughts.

## Examples of asking for feedback permission:

- "Can I offer you some feedback on how you approached X?"
- "Is now a good time for feedback? We can talk at the end of the day as well."
- "Let's go over some feedback about X - when do you want to chat?"

# OBSERVE

Observe the resident  
and their work  
(directly or indirectly).

Think back on your observations of the resident and their work. Focus on their actions rather than interpreting their intentions.

## Examples of observations:

- "I noticed that you interrupted the patient a few times"
- "I see you do X before Y – how can we streamline your process?"
- "When you mentioned X, I noticed the patient responded with Y"
- "I notice you have been late for clinic twice this week, and patients have been annoyed at having to wait."

# COACH

Coach the resident  
for the purpose of  
improving their work.

Invite the learner to reflect on their work, and collaboratively determine actionable goals for how the learner can plan to progress. When setting goals, it may be helpful to connect your feedback to key competencies.

## Examples of coaching:

- "What went well, and what could have gone better?"
- "Let's figure out a plan for the future - where should we start?"
- "What kinds of support would you like from me as you improve?"
- "I think you did X really well! How did you feel about it?"

## Examples of setting actionable goals:

- "How can we make this even better - what are 2 things we can work on?"
- "Okay, next week, let's chat about how you've worked on X and Y."
- "Why don't you chat with X today, and ask how they conduct this exam?"

## The power of "but..."

Affirming and celebrating learner successes is a key part of relationship building. In feedback conversations, however, they are often followed by a "but" statement that takes away from the positive message. Consider "and" instead!

**Instead of** "You did great with X, **but** I noticed you do Y - let's talk about that."  
**Try** "You did great with X, **and** with a bit of work on Y, you'd be even better!"

## RECORD/ REFLECT

*Record* a summary  
of the encounter  
and *reflect*.

Formally documented feedback, such as Entrustable Professional Activity (EPA) forms, can feel intimidating for preceptors offering it, as well learners receiving it. Often the most influential feedback arises in informal conversations with your learner.

However, when you discuss actionable goals and plans for improvement, it can be beneficial to share a written summary of your discussion with the learner to offer transparency and reminders down the line.

### Examples of recording and reflecting:

- "Great. I'll send along a quick summary of our 2 goals in an email after this, so we can both refer back to it.
- "I'm looking forward to checking in on your progress next week - I'll make a note of what we discussed today, and email it to you. Can you let me know if my notes missed something?"

## RESOURCES

For more faculty development resources on Competence by Design (CBD) and Competency-Based Medical Education (CBME), please access our CBME webpage via [hyperlink](#) or QR code.



For questions related to CBD's implementation at UBC, please contact:

- Dr. Parvathy Nair - CBME Co-Lead at [parvarthy.nair@vch.ca](mailto:parvarthy.nair@vch.ca)
- Dr. Howard Lim - CBME Co-Lead at [hlim@bccancer.bc.ca](mailto:hlim@bccancer.bc.ca)

For general CBME administrative questions email [pgme.cbme@ubc.ca](mailto:pgme.cbme@ubc.ca)

## REFERENCES & ACKNOWLEDGEMENTS

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[4] Richardson D, Landreville JM, Trier J, Cheung WJ, Bhanji F, Hall AK, Frank JR, Oswald A. Coaching in Competence by Design: a new model of coaching in the moment and coaching over time to support large scale implementation. *Perspect Med Educ*. 2024;13(1):33–43. doi: <https://doi.org/10.5334/pme.959>

Developed by the Office of Faculty Development in collaboration with Dr. Janet Greenman (PGME Faculty Development lead) and Drs. Parvathy Nair and Howard Lim (CBME Faculty Leads).