


Educating Medical Students in Receiving Feedback: The Importance of Self-Reflection [Response to Letter]

This article was published in the following Dove Press journal:
Advances in Medical Education and Practice

Andrew Matthews¹
Jeffrey H William² 

¹Department of Medicine, Clinical Fellow in Hematology-Oncology, Perelman School of Medicine, University of Pennsylvania Health Systems, Philadelphia, PA, USA; ²Division of Nephrology, Department of Medicine, Harvard Medical School, Beth Israel Deaconess Medical Center, Boston, MA, USA

Dear editor

In Response to Oliveira et al:

While we agree that self-reflection is vitally important in applying feedback, our workshop focused on the ability to appropriately receive feedback in the moment (or in “real-time”). The skills taught in the live session were geared toward this clinical environment—when feedback provided may be brief and less formal than standard feedback sessions.

We would disagree regarding the requirement of measuring self-reflection in our study. Even if we accept the premise that self-reflection is necessary, it is certainly not sufficient for processing and applying feedback. Oliveira et al echo work by Stone et al¹ suggesting that an OSTE may be sensitive to changes in skills that are easy to incorporate immediately into practice while other areas may require practice and reflection. It may well be that once skills from our session are practiced and reflected upon, performance would indeed increase further. We do agree that it would be intriguing to build on this work by measuring the longitudinal impact of our workshop at the conclusion of clinical rotations.

A larger study that incorporates a self-reflection exercise and its ability to augment behavior change would be laudable. However, objectively adjudicating the quality of reflection in a rubric-like format, such as the OSTE rubric devised for this study, and validated by others,^{2,3} would be difficult. Measuring behavior change would also have been a welcome outcome of this study, though it would have been challenging to parse out whether the behavior change was from our workshop alone or from the additional unique experiences of each student during their clinical years. Rather, our workshop was designed to present a skillset for receiving feedback that our students would be able to refer to and practice throughout their clinical training and beyond.

We would also disagree with the notion that this approach is only applicable to undergraduate medical students. In fact, the ability to receive feedback inspired the content of a popular book entitled *Thanks for the Feedback*,⁴ in which two Harvard Law School professors describe the many situations in which we are presented with and respond to feedback in our lives. As the spirit of lifelong learning looms large in medicine, where we strive to always do better by our patients, we would argue that the ability to receive feedback applies to trainees and experienced practicing physicians alike.

Correspondence: Jeffrey H William
Harvard Medical School, Beth Israel
Deaconess Medical Center, Division of
Nephrology, Department of Medicine,
Boston, MA, USA
Email jhwillia@bidmc.harvard.edu

Disclosure

The authors have nothing to disclose in this communication.

References

1. Stone S, Mazor K, Devaney-O'Neil S, et al. Development and implementation of an objective structured teaching exercise (OSTE) to evaluate improvement in feedback skills following a faculty development workshop. *Teach Learn Med.* 2003;15(1):7–13.
2. Morrison EH, Boker JR, Hollingshead J, et al. Reliability and validity of an objective structured teaching examination for generalist resident teachers. *Acad Med.* 2002;77(Supplement):S29–S32. doi:10.1097/00001888-200210001-00010
3. Trowbridge RL, Snyderman LK, Skolfield J, et al. A systematic review of the use and effectiveness of the objective structured teaching encounter. *Med Teach.* 2011;33(11):893–903. doi:10.3109/0142159X.2011.577463
4. Stone D, Heen S. *Thanks for the Feedback: The Science and Art of Receiving Feedback Well (Even When It is off Base, Unfair, Poorly Delivered, and, Frankly, You're Not in the Mood)*. Penguin Books, 2015.

Dove Medical Press encourages responsible, free and frank academic debate. The content of the *Advances in Medical Education and Practice* 'letters to the editor' section does not necessarily represent the views of Dove Medical Press, its officers, agents, employees, related entities or the *Advances in Medical Education and Practice* editors. While all reasonable steps have been taken to confirm the content of each letter, Dove Medical Press accepts no liability in respect of the content of any letter, nor is it responsible for the content and accuracy of any letter to the editor.

Advances in Medical Education and Practice

Dovepress

Publish your work in this journal

Advances in Medical Education and Practice is an international, peer-reviewed, open access journal that aims to present and publish research on Medical Education covering medical, dental, nursing and allied health care professional education. The journal covers undergraduate education, postgraduate training and continuing medical education

including emerging trends and innovative models linking education, research, and health care services. The manuscript management system is completely online and includes a very quick and fair peer-review system. Visit <http://www.dovepress.com/testimonials.php> to read real quotes from published authors.

Submit your manuscript here: <http://www.dovepress.com/advances-in-medical-education-and-practice-journal>