

TABLE 3-8

TEAMSTEPS STRATEGY TO IMPROVE ACCURACY OF HAND-OFFS: "I PASS THE BATON"		
I	Introduction	Introductions include your name and role; be sure to include the patient and family member if they are present.
P	Patient	Describe the patient (eg, name, age, gender, location).
A	Assessment	Diagnosis, chief complaint, vital signs.
S	Situation	Current status including response to treatment and any recent modifications to the plan of care; include code status and any uncertainty that exists.
S	Safety	Provide laboratory results and identify any other factors that may potential impact patient safety (eg, falls risk, allergies, alerts such as isolation).
the		
B	Background	Provide a history, including medications, comorbidities, family history, previous health conditions.
A	Actions	Describe actions taken or to be taken and why.
T	Timing	Describe the urgency, prioritize planned actions, and discuss timing of the stated plans.
O	Ownership	Indicate who is responsible for what, including health care providers, patient, and family members.
N	Next	Next steps include modifications and alternatives to the plan.

reducing the gap between current performance and desired outcomes.⁶³⁻⁶⁶ While feedback is widely used in medical and health education, research on the factors that contribute to its impact on performance is limited.^{64,67} Despite the widespread use of feedback in medical and allied health education, many clinicians and students alike report receiving little training on how to give feedback.^{66,68}

STOP AND REFLECT

- Think of a time when you received feedback that you did not find very helpful.
- Think of a time when you received feedback that you found very helpful.
- What was different about these 2 instances? What made one effective and one not so effective?

Feedback about communication skills can be especially challenging, as feedback is most effective when directed toward simple tasks, tasks with clear-cut goals and outcomes, and tasks where direct observation of the performance is possible.^{63,69,70} Given that communication in complex medical environments is seldom simple, it is useful to discuss ways to make feedback more effective.

As was described in many of the communication frameworks discussed previously in this chapter, creating a safe, supportive environment is essential for feedback to be helpful for learners. It is important to establish a situation where

the presenter of feedback (typically the instructor) conveys to the recipient of feedback (the learner) that they are working together to improve performance.^{63,66,69} Feedback should be given honestly and with keeping the goal of learning in mind.⁷¹ Using questions to prompt reflection, as discussed in Chapter 2, also ensures that the learner is an active, integral participant in the feedback session. Effective feedback requires planning, should be given in a space with adequate privacy, and requires the appropriate allotment of time.⁶⁶

Feedback appears to have the biggest impact on the learner's behavior when it is based on the presenter's direct observation of a specific task. Feedback should be judgment-free; it should be focused on specific observable behaviors, not on the person. Feedback is more effective when both the observer and the learner know each other well and share the same cultural background.⁶⁹ Effective feedback is specific, presented in adequate detail, and non-threatening to the learner.⁶⁹ The effectiveness of feedback also depends on the skill level of the person receiving the feedback, with the biggest impact being on learners whose initial performance is poor, who are in the early stages of their professional development, and who demonstrate a willingness to set specific goals for improvement.^{69,72} Feedback should not only indicate what is not going well, but should also include how the performance or the communication can be improved. Further, it should be offered in a timely manner; not waiting until errors build or are forgotten and frustrations mount. Receiving feedback allows the learner to fine-tune his or her own self-assessment. Learners who perform well may underestimate their skills, whereas learners who perform less well may overestimate