

Remediation for Learners in Health Care Professions: a Mid-Course Correction

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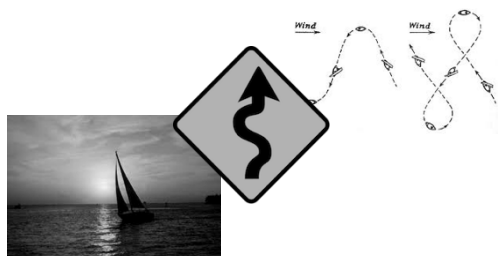
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Objectives

- Define remediation
- Describe principles of remediation, and thresholds for initiating actions based on competency-based assessments
- Practice skills in advanced feedback
- Practice skills in appreciative coaching for remediation purposes, and apply them to your own cases

A midcourse correction



Remediation is not a 4-letter word!

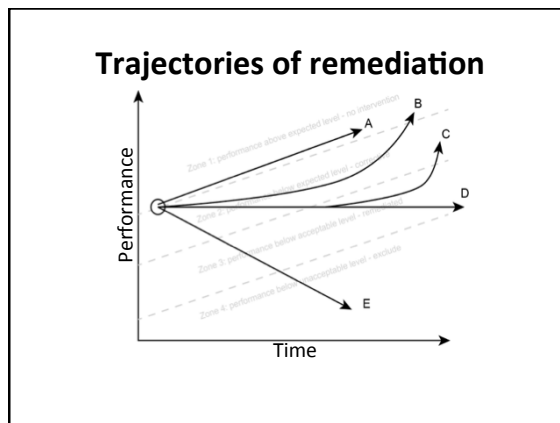
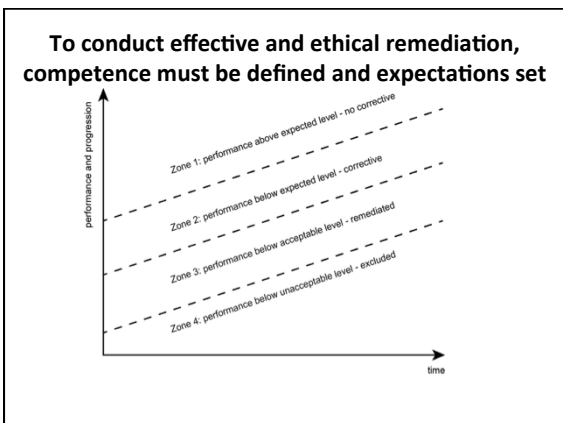
Remediation is the action taken to remedy a situation



- A problem has come to the attention of others
- A correction must be made
- The stakes can be very high
- There is an ethical dimension

TRIZ

How would you design a system that would *guarantee* that 80% of your learners fail out of your training program?



Necessary Resources

Who are key participants in remediation?

- Frontline observers
- Remediation coaches
- Arbiters


“If we will be quiet and ready enough, we shall find compensation in every disappointment.”

- Henry David Thoreau

CASES

Alan

- Taken aside by prior attending: “he’s awkward”
- You have seen this yourself re: his interpersonal communication
- Appears very anxious



Dolores

- Mid 3rd year student
- Downcast eyes during rounds, little interactivity with team, checks cell phone a lot
- Presentations lackluster



Juan

- Compelling backstory
- Engages well with team, can manage patients well with direction
- Fund of knowledge lacking



Michael



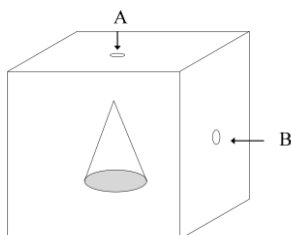
- Early 2nd year resident
- Did not order chest CT for two different pts with recurrent pneumonia
- Did not order antibiotics swiftly for pt with ESLD and cellulitis

Case discussion: Diagnosing the Challenge

- What makes this situation challenging?
- What behaviors are we observing?
- What additional information or skills are needed?
- Where are we getting stuck?
- In what ways are **we** contributing to making things more challenging?

REASONS FOR POOR PERFORMANCE

Cone in the box




Ladder of Inference



- I take actions based on my beliefs
- I interpret the data, draw conclusions, and formulate beliefs
- I select "data" – my observations
- Observable "data"

For the struggling learner



- I roll my eyes and cut off the student's presentation (after 5 seconds)
- He doesn't know what he is doing!
- Family history should always precede social history
- The student's presentation did not follow the usual H&P structure

Appreciative Coaching



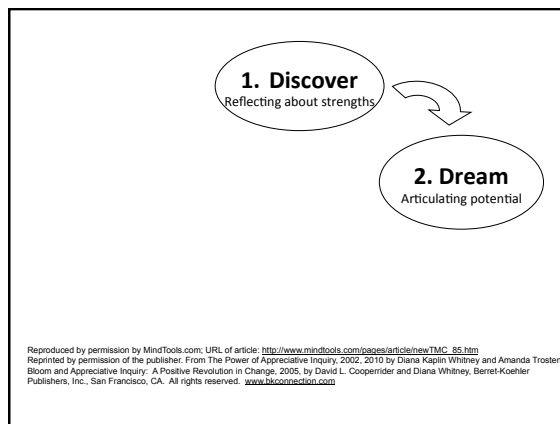
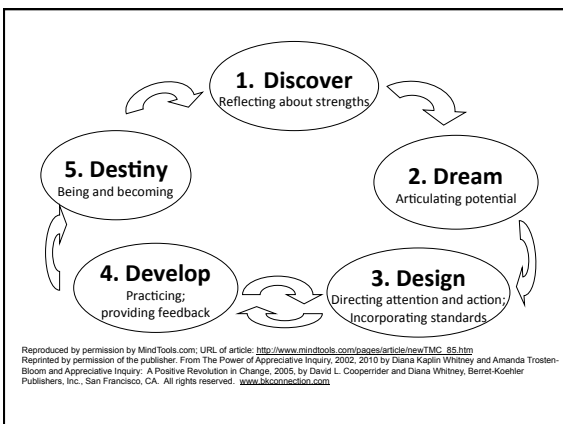
Appreciative Inquiry (AI)

AI involves, in a central way, the art and practice of asking questions that strengthen a system's capacity to apprehend, anticipate, and heighten positive potential

Cooperrider DL, Whitney D 2005 A Positive Revolution in Change: Appreciative Inquiry

Coaching Process

1. Ensure that the coach's and the learner's basic needs are addressed (sleep, nutrition, exercise, emotional support)
2. Help learner identify core beliefs - initial open ended inquiry
3. Work together to align behaviors to those positive beliefs

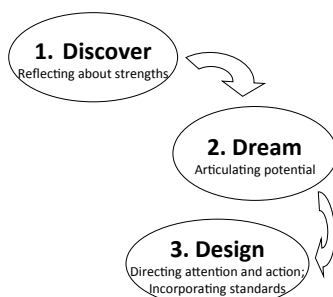


Initial Open-Ended Inquiry

- What do you value about yourself, your relationships with patients and colleagues and the nature of your work?
- Describe a high point or peak experience in your work up to now.
- What one or two things do you want more of in your work life? Your personal life?
- Describe the characteristics of the most exemplary clinicians you have seen.

Discover/Dream

1. *Analyze* and form a *working diagnosis* (or diagnoses) about the nature of the learner's or colleague's difficulty
2. Then **ask** the learner: what skills do you think are necessary for you to succeed?
3. If there is a gap between 1 and 2, **respond**, and, as in giving constructive feedback, **tell/teach** your perception of the difference



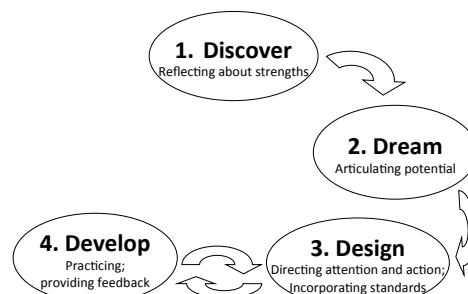
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Reasons for Poor Performance

- Non-academic issues:
 - distraction, poor insight, poor motivation, psych. disorder, performance anxiety, substance abuse
- Inadequate knowledge base
- Inadequate problem-solving strategies
- Poor organizational/time management skills
- Inadequate communication skills

Design an overall plan

- Elicit performance goals from supervisors
- Determine which resources will help the learner toward the goal of competence
- Determine timeline and consequences: learner accountability and buy-in
 - **By when** do you believe you will need to master these skills?
 - **If you don't achieve them**, what do you expect will happen?



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About Feedback

Courage is what it takes to stand up and speak,
 Courage is also what it takes to sit down and
 listen.

— Winston Churchill



What is Feedback?

Feedback is specific, nonjudgmental information
 comparing a trainee's performance with a
 standard, with intent to improve performance

Feedback in (Medical) Education

- Optimal reinforcing: corrective ratio is 4:1
- Students like praise, but want specific guidance when they make mistakes
- Tie feedback to learner's goals
- Understand the learner's position
- Don't overdo the amount of feedback

Rudy et al, Eval Health Prof 2001; Kernant et al, Am J Med 2000; Hewson and Little, JGIM 1998; Sostok et al, Acad Med 2002

Feedback Steps

- Set up
- Gather information/observe
- ARTful feedback
 - Reinforcing and corrective
 - Formative or summative
- Next steps

Bienstock et al, Am J Ob Gyn 2007

Set Up

- Create a permissive environment for maximal learning
 - In context of learner-teacher relationship
 - Dialogue rather than downloading
- Features
 - Close to the event
 - In accordance with learner's goals
 - In accordance with learner's readiness

ARTful Feedback

- Ask
 - Self-assessment
- Respond
 - Actively listen
 - Use empathic words
- Tell
 - Your own assessment and thoughts ("I statements")
 - Specific behavioral terms

ARTful Reinforcing Feedback

- Ask: What do you think you'd like to **keep** doing?
- Respond: gently redirect learner from self-criticism, and take the opportunity to agree or reflect the learner's self-assessment
- Teach: your own assessment (if anything to add)
- The ART cycle continues: ask for reactions to your feedback

ARTful Corrective Feedback

- Ask: What would you like to **stop** doing?
- Respond, Teach (remaining nonjudgmental!)
- Continue the ART cycle

For challenging situations, try:

- Asking about **intention** (cultural sensitivity)
- Responding with empathy or a summary
- Teaching your perception of how intention and impact differ

Next Steps

- Together develop specific improvement strategies
- Schedule follow-up appointments
- Learner summarizes what was effective, what needs to be improved, timeline for changes, and how progress will be assessed
- Document content of the session
- High-stakes situations

Closing thoughts & preparing for "tomorrow"

- Closing exercise: briefly describe one skill to be used upon return to home/ workplace
 - What preparation is needed?
 - What resources can you gather, for the remediation and for yourself?
 - How will you elicit feedback on how it went?