

**NBME Assessment of Professional Behaviors Program:
Guide to Implementation**

June 2006

Background The Assessment of Professional Behaviors (APB) program was initiated by the National Board of Medical Examiners® (NBME®) to develop an instrument for use by institutions to assess and improve professional behaviors as they are manifested in work and educational settings.

The APB program uses a Web-based survey instrument designed to assess behaviors relevant to the medical profession across a range of training and practice. For initial development, an Instrument Design Task Force was convened early in 2004 and collaborated to refine a pool of behaviors that had been gleaned from the literature and public sources; the pool continues to be refined and modified based on extensive work with focus groups. The APB instrument is designed for use within a multisource feedback (MSF) process.

The APB instrument is currently undergoing development, testing, and refinement. Our commitment is to continue research to ensure the quality of the instrument and its utility for assessing professional behaviors using an MSF process.

When partnering with academic institutions, the NBME will provide a standardized instrument, background research and analyses to deliver the highest quality assessment, guidelines for implementation, individual and aggregated feedback reports, and interpretation guidelines for participant results. While this document contains recommendations, decisions about program implementation and use of feedback will ultimately be made by the partnering institution.

Overview

MSF is a process that typically incorporates survey instruments and relies on the readiness of multiple groups of participants to provide objective and candid feedback in an environment of trust. As such, it is not an assessment that is separable from institutional culture, educational curricula, or policies and local objectives. Implementation requires commitment to thoughtful preparation, initiation, and follow-through, and continuous improvement of processes. In order for the process to succeed, it must be sustained and repeated, and requisite resources must be pledged.

The APB survey instrument is intended as a practical means for assessing professional behaviors within an MSF process. It is administered via the Web and ideally should be integrated with local evaluation systems.

Using an MSF process with the APB survey instrument allows different groups (eg, peers, other health care professionals, attending physicians) to provide information that can be used to:

- Assess individuals and provide information about groups, educational and clinical microsystems and environments
- Provide feedback so that individuals can develop Performance Excellence Plans (PEPs) or improvement plans

- Provide information so that educators can consider training, curricular, or policy changes

The next sections provide a framework for thinking about purpose, rationale, and readiness to introduce an MSF process. The checklist that follows provides links to relevant details relating to guidelines for integrating the NBME APB program into your institution's existing assessment processes.

Purpose and Rationale

The primary purpose of using the NBME APB program within an MSF process is to provide specific formative feedback to guide the development of an improvement plan or PEP. As an instrument for formative assessment, the APB program is **not** designed for use in high-stakes decisions.

There are many reasons to consider this type of assessment. Rationales must be built around institutional or program goals. These include, for example:

- Providing explicit expectations for professional behavior
- Promoting self-reflection, self-monitoring, and self-improvement from and about self, peer, and coworker review throughout medical training and practice
- Increasing the information available to educators to monitor and enhance the professional progress of students and residents, and to modify curricula and training
- Assisting institutions (eg, residency training programs) in addressing some accreditation requirements

Readiness

The MSF process begins with assessing readiness for the first cycle and “ends” with evaluating readiness for subsequent cycles.

How ready is your institution/program to introduce a new evaluation system?

Readiness is “the degree to which 1) the organization goals are congruent with multisource feedback and 2) members, both leaders and individual contributors, believe the resulting behavioral feedback adds value.”¹

As you prepare for this type of assessment process, consider:

¹ Bracken DW, Timmreck CW, Church AH. The handbook of multisource feedback: The comprehensive resource for designing and implementing MSF processes. San Francisco: Jossey-Bass, 2001.

- *Who will lead the APB program?* A single leader or small group of leaders should be identified to make basic decisions and to support and guide the program through implementation. This same group can review each cycle and make necessary improvements for subsequent cycles. The commitment and ongoing involvement of the leadership team are critical. Communication from this team should inspire trust and project the values that underlie the system of behavioral assessment.
- *Who will administer the program?* The work will require that one person be identified as the Program Coordinator (see [Identify implementation support team](#)). This person will need support to ensure that observers and observees are identified, assignments are made, and queries are handled.
- *How often will surveys be administered?* Surveys should be administered based on logical observation periods. In the ideal situation, without personnel rotation, twice per year is recommended in the educational setting; however, if classes, rotations, or work schedules result in more frequent turnover, the observations should be completed at the end of the rotation period. MSF can require substantive resources for implementation and become burdensome to those involved. It is important to ensure that the survey instrument will not be overused, resulting in evaluation overload and reduced participation. Observers need sufficient time and opportunity to make observations before responding to the survey. Those assessed need to believe that observers are capable of providing a valid assessment.
- *How often will feedback be provided?* Feedback should be provided twice yearly, although this also may vary based on local practices and needs. Sufficient time must be allocated to deliver feedback as well as to develop and implement a plan for identified areas in need of improvement.

Other critical factors in implementing an MSF process:

- **Experience** – Considerable experience with all aspects of MSF is necessary to customize it to fit local culture. Therefore, it must be anticipated that iterative improvements will be made over time; local experimentation within the bounds of best practices is vital.
- **Training** – Training and experiential learning at all levels of participation, both before and after direct participation, will be essential for program success. NBME will provide participating institutions with orientation and implementation guidance.
- **Safeguards** – Numerous safeguards should be considered and implemented to ensure program integrity and help create an environment of trust around the process. These include: widespread agreement about the intent of using MSF; use of security systems with industry standards to protect data; compliance with information confidentiality agreements; and constant vigilance for misuse of derived information, introduction of bias, and decision-making based on incorrect or unreliable information.

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Preparation and Planning

Locale and Support Team

Identify Implementation Support Team (IST)

An Implementation Support Team (IST) is a diverse group of people who will provide institutional leadership and direction as well as be directly involved in the processes. The roles and responsibilities of the IST will be to:

- Develop and implement a communication plan
- Orient participants
- Oversee implementation
- Monitor participation
- Troubleshoot and resolve problems
- Develop and implement a plan for guiding individual feedback
- Review process and evaluate program success
- Define and implement program improvement plan
- Partner with other groups to ensure continued support for the program (eg, physician groups, risk management staff)

The IST is headed by the *Team Leader* who should be responsible for all high-level aspects of implementing the APB program to ensure its success. A *Program Coordinator* should be designated as responsible for all administrative aspects of the APB program at the institution. Other possible IST members include associate deans, program directors, clerk coordinators, preceptors, mentors, residents, students, and other health care professionals.

Orient IST members

The IST should be established as early as possible so that its members are involved in the decision-making and communication processes from the beginning and are aware of their key roles and responsibilities. Most of the orientation of this team will occur through planning meetings with NBME staff. Depending upon the survey delivery method chosen by the institution, orientation to a new administrative system might be required, or at least a new segment of a system may need to be learned. Administrative system orientation will be accomplished either with the assistance of NBME staff, survey/assessment delivery vendors, or both, depending upon the method of delivery chosen by the institution or program.

In order to facilitate the orientation of participants, IST members must have an understanding of the following:

- Purpose of the program
- Plan for implementation
- Administrative system
- Assignment process
- Behaviors to be assessed and appearance of survey forms
- Feedback reports
- Processes and procedures for feedback
- Program evaluation plan

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Ensure integration with other related institutional processes

In adopting MSF, consideration needs to be given to the following:

- How does this tool add to, replace, or complement the tools currently available for assessing similar or related constructs? Does it integrate well from a values perspective with policies and institutional initiatives?
- How does MSF fit into the curriculum or match with existing policies? There should be a match between the objectives of the curriculum and MSF and its items as a tool for assessment. For example, in an undergraduate course that teaches aspects of professionalism, physician wellness, and peer review, MSF may be an appropriate assessment tool to ensure that students gain a very real opportunity to undertake peer assessment.
- Can the tool be integrated with existing survey instruments that might be in use, or does it require accessing another information system?

How will these instruments be used for formative assessment? What are the implications of “poor,” “satisfactory” and “excellent” performance? How will existing institutional mechanisms for handling poor performance be used with a program that is not designed for high-stakes assessment?

Decide on communication strategies

It is necessary to carefully assess the communication means available for introducing and reinforcing the importance of this new assessment. In this, consider the way(s) the organization communicates with its students, faculty, and other health care professionals, such as:

- Organization-wide e-lists
- Newsletters
- Personalized letters
- Face-to-face meetings (eg, departmental, curriculum, residency education)
- Orientation and training for observers and observees

Also, consider what works and what does not work in the organization when identifying potential communication methods. Will the messenger(s) be the dean, department head, or clerkship coordinator?

Both the clarity and the consistency of the message are critical as well. Communicate your reasons for adopting the NBME APB instrument for assessment and feedback, potential applications and uses for the information, the security and confidentiality of the information, and the implications of the assessment for the participants.

Other Participants

Identify participants

Participants in the NBME's APB program should include students, residents, faculty, and other health care professionals as appropriate. Survey instrument forms have not yet been developed for patients. Participants may have one or more of the following roles: observer, observee, mentor, feedback facilitator, and supervisor.

Observers are participants that the institution has deemed eligible and suitable to observe professional behavior and complete surveys. Potential observers include but are not limited to: medical students, residents, faculty, attending physicians, nurses, nurse practitioners, physicians' assistants, administrative staff, ward clerks, page operators, and other health care workers such as occupational therapists, pharmacists, and physical therapists. Participants currently ineligible for the observer role include patients and patients' family members.

It is important that observers have sufficient opportunity to observe the behaviors being assessed, as real or perceived quality of feedback can be undermined if either observers or observees feel there has been insufficient opportunity for observations (see [Define the period of observation](#)).

The NBME recommends that surveys be completed by at least six to eight observers from each observer group (eg, nurses, peers, etc.) before any individual observee receives feedback. This number is based on studies conducted over many years in medical contexts and is intended as a starting guideline rather than as a hard-and-fast rule. The quality of feedback can be affected by an insufficient number of observers.

Observees are participants whose behaviors will be observed and recorded by observers. These include medical students, residents, and faculty who are affiliated with the participating institutions.

Mentors are participants trained to guide and advise observees on development and execution of Performance Excellence Plans (PEPs) (see [Prepare a plan for improvement...](#)). They should be recognized role models familiar with the overall purpose of the relevant professionalism initiatives and skilled in imparting advice. Mentors may also serve as facilitators.

Facilitators are participants trained to provide feedback to individuals and groups. They may be mentors, supervisors, ombudsmen, or others (eg, peers), respected and deemed appropriate to discuss with participants the feedback obtained through the survey instrument.

Supervisors are those who have administrative responsibility for participants and have the authority to access information about them. They are responsible for sign-off on PEPs.

Motivate participants

Motivation should be considered at many levels. Questions to consider, and possible answers that may influence the implementation/orientation, include the following:

- What will motivate observers to take the time to provide thoughtful responses?
 - Assigning only individuals with whom the observer actually interacts/knows
 - Limiting the number of surveys assigned to any one observer in a given time frame
 - Informing the observer of how the information will be used to give feedback

- What will motivate observees to use the feedback to guide self-improvement?
 - Trusting that the assigned observers actually observed his/her behavior
 - Having specific examples of how to improve his/her behavior
 - Understanding that improvement will be documented
- What are the implications of not participating for either the observer or the observee?
 - Missed opportunity to give constructive feedback to others
 - Missed opportunity to participate in overall improvement process
 - Missed opportunity to learn from others and improve upon self-reflection
- What are the implications to the observer/observee in terms of progression?
 - Participation could be a requirement in an academic course
 - Participation could impact other official performance reports (eg, letters of recommendation, deans' letters)

Orient observers/observees

Orientation of all potential participants is critical to success. Given that the purpose of MSF is both to assess and to guide improvement, orientation and training will enhance the instrument's effectiveness, support reliability and validity of the data, and ensure that participants have a common understanding of the process and expectations so they might achieve the maximum benefit as observers and/or observees.

Observers and observees will ask about the purpose of the NBME APB program and the validity of the derived feedback. It is important to tell them that the instrument is currently being developed, tested, and refined, and that the validity investigation is ongoing. As such, its use at this time is to provide formative feedback to assist observees in developing PEPs or improvement plans and to inform curricular or policy changes. However, participants' opinions about the quality of the survey items and the value of the feedback will contribute greatly to future improvements.

It is important that observers and observees know what to expect when the assignments arrive, and what to do if they are confused or uncertain about the assignment. Commonly asked questions and guidelines for responses include:

- What do I do if I am not able to observe the observee during this observation period?
 - It is not expected that all behaviors be observable for every observer/observee pairing. Select "Unable to Rate" on the survey or inform the observee that there is a mechanism to opt out.
- Why is my time limited for filling out the surveys?
 - The time frame for completing the survey is ultimately determined by the institution (see [Define the assignment time frame](#)).
- How many assignments should I expect and how often?
 - Care will be taken to ensure that any individual observer is not overtaxed. It is estimated that it will require five to ten minutes to complete one survey form for one observee. Your local IST will use reasonable assignment strategies to ensure that the number and frequency of surveys do not become burdensome. It is recommended, as a starting practice, that no observer complete more than six surveys within a month, particularly if the assignments occur on a regular basis.
- Are my answers confidential?
 - Yes, all survey responses will be confidential. However, keep in mind that free-text comments are not screened and will be read directly by the feedback recipient, which may compromise confidentiality if identifying remarks are made. When providing comments, focus on objective, constructive statements regarding the behaviors of the feedback recipient.

- Can my answers have a negative impact on the observee's career?
 - The feedback to observees is formative. Feedback that reflects egregious acts or expressions of dire concern about an observee should be provided through other institutional mechanisms.
- How are my observers chosen/assigned?
 - This will depend on local implementation (see [Decide who will select observers](#)).
- How will the information be used?
 - It will be used to help the observee develop a PEP or improvement plan and to coach the observee.
- Who collects/maintains the information?
 - This will depend upon local implementation (see [Determine delivery method](#)).
- Why should I fill out these forms? What do I get in return? Is this mandatory or optional?
 - Your participation in this process will help improve the performance of others in a constructive manner. While it is an investment of your time, your institution or program believes that overall participation in the APB program will improve the educational and/or work setting. In addition, you may receive feedback about your performance as an observer, so the process can be continuously improved based on your experience and input. Mandatory or optional participation is decided by your institution or program.
- When can I expect to see feedback from individuals who observed me? Do I need to share my feedback with anyone? Who else automatically has access to feedback about me?
 - Feedback from others will be aggregated into group results to protect confidentiality; it will be provided to a facilitator who will review it with you in a face-to-face meeting close to the end of the observation period. The NBME will have access to de-identified data for research purposes. Decisions about feedback facilitators or mentors are made by your institution or program.
- Whom do I contact if I have problems accessing the forms?
 - This will depend upon the vendor used for survey delivery and implementation systems determined by your institution or program. You may also contact your Program Coordinator if you experience problems.

Proper orientation includes effective communication about the purpose of the APB program, the merits of using an MSF process, expectations of all participants, and a forum to address participant questions and concerns. Orientation to the survey format and items is also necessary. Prior to the observation period, all participants should be provided with a complete list of the behaviors and should be encouraged to review them. This will serve to inform observers of the behaviors that they will need to assess and to inform observees of the behaviors on which they will be assessed. Optimally, all observees should be required to complete a self-assessment, which includes all behaviors appropriate for their level of training.

Orient mentors/facilitators/supervisors

The primary role for mentors, facilitators, and supervisors is to provide feedback to the individual observees and to ensure that an improvement plan or PEP is developed (see [Individual Observee](#)).

Survey Administration

Select items and construct surveys

The NBME APB instrument has multiple forms that are tailored to the training level of the observee as well as the opportunity for interaction with the observer. Each form has three sections:

1. **Relational Section** – This section contains six relational items to help assess factors that may enhance or interfere with objective observation.
2. **Behavioral Section** – This section contains 15 to 30 behavioral items rated on a five-point scale of how frequently the behaviors are observed.
3. **Global Section** – This section contains three to five items to assess higher-level constructs related to the specific behaviors.

Participating programs will have the opportunity for limited item selection from the current forms and item pool. Selected decision makers should review the potential items and evaluate the alignment between the items and the institution's curriculum and assessment strategy.

When selecting items, consider whether the behaviors are observable among the observee cohort in the specified setting. It may be useful to consult with observees and observers in selecting items. This will help ensure buy-in from participants and provide them with insight into the professional behaviors expected. Over time, as MSF is repeated, further item development will facilitate sampling from other domains. In the short term, observers may make use of the comment boxes to provide feedback to individual observees about areas not yet covered by the current item pool.

Determine delivery method

The surveys are designed to be administered through e-mail with some flexibility in selecting delivery vendors. In an effort to accommodate systems currently in place in institutions, the NBME is working with vendors who already have a presence in medical schools and residency training programs to deliver surveys, provide feedback, and provide de-identified data to the NBME for analysis. Integration of surveys into an institution's "homegrown" system is also a possibility, provided the institution has the resources to incorporate the surveys, develop feedback, and provide the NBME with de-identified data for analysis. If smaller programs elect to use paper surveys, it will be the institutions' responsibility to fulfill data entry requirements and provide the NBME with de-identified data for analysis. E-mail reminders should be incorporated into any delivery system to follow up with participants who have not completed their assignments.

Define the period of observation

The period of observation may coincide with a rotation or a course when the observer and the observee have the opportunity to work together on a regular basis. The observation period could also span more than one course or rotation. Longer periods of observation will allow greater opportunity for the observer to observe behaviors. In industrial settings in which MSF is used, it is common to require that employees work with and know each other for at least six months. The observation period should be at least four to eight weeks of close interaction, recognizing that observers and observees may have worked together previously (see [Identify participants](#)).

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Define the assignment time frame

The assignment time frame defines when the survey will be available to the observer for completion. The observer should have sufficient opportunity to record his/her observations but should not be able to delay completing the survey for too long after the period of observation has passed. As time goes by, the observer may tend to complete the survey more from memory of interactions with the observee or a general impression of the observee, and less from specific observations. A two-week assignment time frame is recommended, ideally one week on either side of the end date for the period of observation.

Decide who will select observers

Observers can be identified by: (a) the Program Coordinator; (b) the observee; or (c) the observee with agreement by the Program Coordinator.

Having a Program Coordinator who knows the group of participants well enough to make the assignments gives the institution the greatest amount of control, but also requires significant administrative time. If this option is chosen, the Coordinator should be someone who is well known to individual participants and is also continually informed by faculty or other administrators about schedule changes.

Having the observee select his/her observers puts more control in the hands of the observee and may lessen the administrative burden of keeping track of who can observe whom and when. It may also make observees feel more comfortable with the observation process, since they know the pool of people potentially observing them. There is a perception that if observees select their own observers, their feedback will be skewed positively. In fact, one study found little variation in ratings when observees selected their own observers as opposed to having their observers assigned.² Practically, it may be difficult for someone other than the observee to identify his/her observers.

Alternate possibilities for observer selection include the following: (a) observers can submit a list of those whom they believe they can observe during a specified time period, at which point the Coordinator makes the assignments; (b) observees can submit a list of people they believe should observe them during a specified time period, at which point the Coordinator makes the assignments; or (c) a combination of *a* and *b* — observer and observee can each submit a list that is then matched by the Coordinator (or a computer program) at the time of assignment.

The Coordinator should be able to make changes to the assignments, which may include changes in assignment start/end dates, observer/observee combinations, and observer/observee information (eg, training level). The method by which changes are made will depend on the delivery system.

Establish procedure for sending and monitoring surveys

Once observees and observers have been identified, the Coordinator will handle the necessary logistical work to ensure that surveys are sent, typically by e-mail.

It is very easy for people to ignore e-mail notices. It is critical that the Coordinator monitor the system to ensure that each observee's surveys are completed in a timely fashion. Using the same

² Ramsey et al. 1993 "Use of peer ratings to evaluate physician performance." JAMA 269(13): 1655-1660.

title for all e-mails may be a helpful way of ensuring that the e-mails are not missed or disregarded as spam.

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Send Surveys and Monitor Progress

When you are ready to begin the program, consider sending the self-assessment forms first. If your institution has elected to permit observees' input to the assignment process, you already should have received observee selections and assignments should be ready. If the Leader/Coordinator has determined the assignments and your communication plan was comprehensive and inclusive, observers should be ready to receive their surveys.

It is critical that progress be monitored to track response rates, both overall and for individual observers/observees. It will also be important to track notices from observers who were unable to observe an assigned observee to determine if a valid reason for not observing has been submitted. A high rate of participation is necessary to ensure quality feedback for each observee.

Feedback and Improvement

Review the unique aspects of multisource feedback

There are unique aspects to feedback in an MSF process that distinguish it from traditional feedback. For example:

- In contrast to assessment focusing on knowledge and skills, MSF typically concentrates on values and behaviors. Whereas knowledge and skills might be viewed as remediable, values and behaviors might be viewed as character traits less amenable to change. Feedback facilitators require different preparation for conversations related to values and behaviors.
- MSF commonly relies on preserving the confidentiality of observer responses. Communicating information in the feedback session that has not been transmitted through other social channels may be surprising and disturbing to the observee.
- Much of the information is provided by peers and others with whom the observee may have to continue to interact quite intimately. Poorly communicated feedback could create conflicts in these relationships. Care is needed to ensure that feedback reinforces the benefits of participating in the MSF process.

For these and other reasons, careful preparation should include acknowledging the potentially sensitive content of the feedback, anticipating the reaction of the observee, and preparing the feedback facilitator (see [Prepare for and conduct the feedback session](#)).

Ensure proper use of multisource feedback

All participants share the responsibility of ensuring confidentiality, proper use, and interpretation of the information collected through MSF. Some participants may adopt simplistic interpretations of results, label individuals, or attribute high or low ratings to a single causal factor. Prevention of negative consequences, especially due to unsound interpretation, is important.

Even though the stated purpose of the APB program is formative, ***it may be inappropriate to ignore information collected during the MSF process that is deserving of critical and timely attention.*** Such information should be coupled with evidence and/or data collected through other means to fully understand its implications. Punitive action should be reserved for information that is corroborated by other data obtained in a manner consistent with established institutional policies and processes.

Individual Observee

Determine appropriate information for communication to participants

The feedback provided to participants is pivotal for any successful program. Well-presented and -delivered feedback can drive behavioral improvement and other salutary effects. To help maintain the confidentiality of observer responses where appropriate, present the information most clearly and efficiently, and protect against adverse impact, follow these guidelines:

- Decide first what information will be provided as feedback. Feedback may be available in numeric, graphic, or free-text formats.
- Information should not be provided if confidentiality of observer responses was promised, and the identity of the individual observer might be revealed either directly or inadvertently. Provide feedback for a particular item within an observer group only if the number of observers in the group is greater than three.
- Depending on the purpose of the program, some measure of cohort-level variation in performance can be useful in helping observees measure their performance relative to that of their peers.
- Well-designed graphic displays can promote more effective communication of patterns in multisource feedback than can tables of numbers. The NBME is developing graphic displays to show performance relative to peers and self-ratings relative to those provided by others.
- Free-text comments, by their very nature, may reveal the observer's identity. It should be emphasized to all observers that their unscreened free-text comments may be viewed by the feedback recipient. Observers should be asked to provide objective, supportive comments related to the behaviors of the observee

Determine appropriate feedback methods

Feedback can be provided using any combination of online and print resources and face-to-face meetings.

It should be standard procedure to deliver feedback to participants in a face-to-face, one-on-one meeting, and to delay providing any potentially sensitive feedback prior to that meeting, as there is potential for miscommunication or misinterpretation in the absence of a trained feedback facilitator. Participants should receive paper or online feedback reports to review prior to the face-to-face meeting; reviewing the feedback reports in advance should help feedback recipients and facilitators formulate specific behavioral goals to discuss during the feedback meeting. If a face-to-face meeting is not possible, it is recommended that some other feedback procedure be followed to avoid mistakes, misinterpretation of information, or miscommunication (eg, group meetings to review the printed *Feedback Interpretation Guidelines*.)

Determine who will provide feedback and when

Individuals designated to provide feedback to observees may include:

- The preceptor for the rotation in which MSF takes place
- The Program Director
- A mentor
- Someone who may not have an official "evaluating" role within the program (perhaps someone trained to coach and help participants develop a self-improvement plan)

Selection of the individual best able to help the observee understand and use the feedback to improve performance should be determined by the potential consequences, the formative nature of the feedback, and who has access to the feedback. The training requirements of the feedback facilitator and criteria for readiness to provide feedback should be considered.

Feedback should be provided as close to the completion of the observation period as possible.

Prepare for and conduct an effective feedback session

Facilitator preparation for the feedback session is critical; it requires the following:

- Carefully reviewing the *Feedback Interpretation Guidelines* to understand the presentation of the feedback and its appropriate use.
- Carefully reviewing feedback from all sources, particularly noting discrepancies between self- and others' ratings. Large discrepancies may indicate problems with self-assessment ability or resistance to the need for change. Observees who rate themselves much higher than their peers (ie, overestimate performance) are more likely to be demotivated by an MSF experience than are those with smaller discrepancies between self- and peer ratings.
- Triangulating information to determine whether there are patterns across observer types (ie, peer vs. other health care professional). If available, information from non-MSF sources (eg, preceptor evaluations) may also be helpful.
- Identifying potential resources to support the observee's PEP or improvement plan.

The facilitator should establish an appropriate climate for the session by:

- Ensuring that the observee is prepared for the meeting and understands the goals
- Allowing sufficient meeting time in an appropriate location
- Being respectful, trusting, supportive, friendly, open-minded, and nonthreatening
- Eliciting thoughts and feelings (from observee) before feedback is given, particularly asking the observee about his/her feelings about the process, what was done well, and what could be improved
- Being nonjudgmental but focused on improvement
- Focusing on the information and specific behaviors and assisting the observee in understanding the message
- Suggesting and/or providing the resources necessary for improvement
- Eliciting the observee's reaction to the feedback and suggestions for improvement
- Enabling the observee to develop a PEP or improvement plan with an opportunity either to repeat the observation process or to discuss progress periodically
- Ensuring that the observee understands and agrees with what has been discussed as well as any consequences

Not all observees will believe that the feedback is accurate and meaningful; it may be interpreted as critical or threatening. The observee may resist the feedback, particularly if it is perceived as biased and not helpful to his/her personal/professional goals or expectations of the training process.

Observee acceptance and use of MSF feedback to guide improvement is likely to be enhanced with appropriate mentoring, support, specific goals setting and monitoring. Meta-analysis of industrial psychology MSF studies suggests that improvement over time may be minimal. It is most likely to occur when the feedback indicates that change is necessary and observees have a positive feedback session, perceive a need to change their behavior, react positively to the feedback, believe change is feasible, set appropriate goals, and take action to improve. In management settings, managers who worked with a coach were more likely than other managers to set specific goals, solicit ideas for improvement, and show improvement.

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Prepare a plan for improvement and document individual outcomes—the Performance Excellence Plan (PEP)

During the feedback session, the facilitator should help the observee develop a PEP or improvement plan. It may be useful to use the form provided below or one that you have specifically developed for your institution.

By the end of the feedback session, a PEP or improvement plan should be initiated, if not completed. It should have a timeline with specific goals for improvement. It may be sensible to have the observee agree to improve specific behaviors taken directly from the survey form. The observee should be asked whether he/she commits to the goals, and sign the plan. A follow-up session is recommended to ensure a level of accountability for the plan.

Clearly, coaching someone with more positive feedback for most items will be very different from coaching someone whose feedback might be perceived as negative. It is important first to find out how an observee self-assesses — high self-assessors might perceive feedback as negative, even if it is positive, but falls below their expectations. Furthermore, even high performers can identify areas for improvement. In developing the PEP or improvement plan, it is best to identify a small number of areas for major change and a small number of areas for minor changes. It will be important to develop a realistic time frame for the changes to be made and manifested.

Sample Performance Excellence Plan

CHANGE Describe specific, observable changes that you intend to make as a result of participating.	TIMELINE (1) When will you begin?	TIMELINE (2) When do you think you will see results?	RESOURCES REQUIRED Identify the resources you will draw upon to make the change. Consider people, equipment, time managers, and courses that might be helpful.	IDENTIFIABLE RESULTS How will you know that the results have been attained?
1. Major change				
2. Major change				
3. Minor change				
4. Minor change				

Signature (Observee) & Date

Signature (Facilitator) & Date

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Individual Observer

It is important that feedback also be provided to observers. Observers should be made aware of whether or not they have met the expectations of the APB program by reviewing their rate of completed assignments. A certain level of completion is expected, and if the observer does not meet the program expectation, a plan for improvement should be discussed and implemented; appropriate follow-up should also occur. If the observer has met the program expectations, he/she should be commended. Information about individual observer rating/observation practices should also be reviewed. If there is consistent evidence that an individual observer's ratings/observations are completely divergent from others' or seem too lenient or harsh, it should be brought to the observer's attention during the feedback session.

Many of the same recommendations for conducting observee feedback sessions are applicable to observer feedback sessions, including the following:

- Ensuring that the observer is prepared for the meeting and understand the goals
- Allowing sufficient meeting time in an appropriate location
- Being respectful, trusting, supportive, friendly, open-minded, and nonthreatening
- Eliciting thoughts and feelings before feedback is given, particularly asking the observer about his/her feelings about the process, what was done well, and what could be improved;
- Being nonjudgmental but focused on improvement
- Focusing on the information and assisting the observer in understanding the message
- Suggesting and/or providing the resources necessary for improvement
- Eliciting the observer's reaction to the feedback and suggestions for improvement
- Ensuring that the observer understands and agrees with what has been discussed as well as any consequences

Feedback Facilitator/Mentor

Feedback to the facilitator can be accomplished by obtaining direct, timely feedback from the observee, perhaps shortly after the feedback session is held. Consider developing a questionnaire using the bullets in the [Prepare for and conduct the feedback session](#) section. The observee could judge the effectiveness of the session based on whether or not the facilitator adhered to those specified guidelines. Follow-up feedback should also be collected in terms of the improvement resulting from the feedback provided and the PEP or improvement plan developed. Follow-up feedback should also be collected regarding the effectiveness of any mentor who may have played a role in helping the observee to carry out his/her PEP or improvement plan.

Aggregate Feedback

Determine aggregate-level information to be reported

MSF can provide important information for system- and program-level analyses. Research is needed to elucidate the best methods, but the following kinds of questions may be important to your program and should be considered:

- How do observees perform relative to each other?
- Do observers have enough opportunities to observe?
- How do the MSF participants in your program perform relative to those in other programs or at other institutions?

- Do the patterns of relationships among the participants conform to your expectations?
- Is it possible to find sufficient observers for each observee?
- Do participants receive an adequate level of supervision?
- Are supervisors modeling appropriate behaviors to subordinates?

Examples of aggregate data that could be reported include the following:

- Response rates among observers
- Relative institutional performance
- Distribution of individual performances within the institution

Process Review and Improvement

Prepare a plan for obtaining programmatic feedback

Within each program, it is critical to work toward process improvement. Interviews, group meetings, or focus groups involving all participants or a representative sample are excellent sources of information. Information helpful for improvement of the NBME APB program and MSF process includes the following:

- Reactions of participants to survey and feedback content and quality
- Major problems or impediments that were encountered
- Suggestions for modifications of the APB program or MSF process
- Impact of the process on participants
- Anticipated and unanticipated consequences
- Applications of the feedback for purposes of self-improvement
- Resources that are required at the institutional level to support self-improvement
- Information that can be shared with the NBME to improve the overall program

Review feedback and implement desired changes

All participants in the process should have an opportunity to provide feedback on the strengths and weaknesses of the program, as well as any ideas they might have for modifying it. On an institutional level, this information should be used to revise the program for the next iteration and to inform the wider community of users in other organizations.

The NBME will assist participating institutions in conducting focus groups and collecting information to inform the quality of its APB program, the MSF process, and this document as part of its commitment to continuous improvement.

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Additional Reading

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