

How to Give Difficult Feedback



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Giving feedback is arguably the most important dimension of coaching. It is through feedback that people are able to see themselves as others see them and change their behavior. But giving feedback so that it will be properly received and acted upon requires technique.

First, you need to be able to create a climate of trust, openness, and positive regard.

Second, you need to avoid coming across as evaluative or judgmental, which tends to create resistance or defensiveness. Fortunately, this is a skill that can be developed.

Consider the following situation: You are the departmental chair and have five staff physicians that you collectively meet with on a regular basis. However, one of your physicians—James—is consistently arguing his points during the meeting in a way that offends his colleagues.

The other physicians are starting to complain to you about James and his communication style. You also are becoming frustrated with the situation and need to give James some feedback, some difficult feedback.

You realize that no matter how accurate your feedback, if James becomes defensive or distrustful, he will not accept it and it will have no constructive impact. It must be given so that the person receiving it can hear it in the most objective and least distorted way possible, understand it and choose to act on it or not.

Here are six guidelines that will help you achieve this result.

1. Describe behavior, not intentions

Keep in mind that underlying any action or behavior is a person's intention. When James interrupts a colleague to make a point, in his mind the behavior is congruent with some specific intention, e.g., to correct an error in thinking.

A problem arises when you attribute your interpretation of his intention to the observed behavior. An individual's intentions are private, and unless he explains them, you can only conjecture what they are.

Imagine that you were to sit down with James and say the following, "I want to talk to you about the way you are handling yourself in our meetings. You seem to want to be right all of the time and this is causing some problems within the group."

Here you are interpreting James's intention, but since his intention is private and unspoken, your interpretation of it could well be wrong. Ascribing motives to James's behavior will tend to put him on the defensive and focus his energies on justifying his actions.

The opportunity for him to objectively assess his behavior will be lost and the feedback, regardless of how insightful it is, will not be taken to heart. You must describe what you observe and avoid interpreting the intention behind it.

2. Be specific

When you are giving feedback, James needs to know exactly what behavior you're talking about and what that behavior means to you.

Suppose that in your feedback session you said to him "You were inconsiderate in the way you treated Mary during our last meeting." Without a more explicit reference, even if James wanted to change he would not know what specific behavior you were referencing.

Alternatively, you might to say "When Mary was

starting to tell the group about her idea for changing attending rotation times, you interrupted and said her idea wouldn't work. In my opinion, that was not considerate."

Whether or not James agrees with you is not the point; at least he knows what specific behavior you're referring to and what being inconsiderate means to you.

3. Avoid global labels

Effective feedback avoids using global labels that categorize the whole person, e.g., "You're incompetent" or "You're uncaring." When giving difficult feedback, you must refer to the person's behavior, not their worth as an individual.

When someone has a global label applied to them, it is very difficult to respond objectively. It may be true that the person acted in an incompetent or uncaring manner in a specific situation but that does not make them an incompetent or uncaring person.

Applying a global label casts you in the role of a judge, which invariably engenders a defensive response. James is not inconsiderate; he just behaved in an inconsiderate manner during the meeting.

4. Immediacy is key

As with many things, timing is everything. Whenever possible, difficult feedback should be given immediately after the event or as close to it as circumstances will allow.

In James's case, if you wait for a few days to give feedback about his inconsiderate interaction with his colleagues, he is more likely to respond with "I don't remember saying that."

Given the hectic schedule of most physicians, the press of daily events can quickly blur memories of a particular event. When the event is fresh in everyone's mind, feedback is like a mirror of the person's behavior reflected back to him.

It's natural to procrastinate giv-



Giving feedback is arguably the most important dimension of coaching.

360-Degree Feedback

What Can It Do for Medical Group Practices?

By Jean Fagan, MPH, MS.Ed, CEC

Robert Burns, National Poet of Scotland, once said "O would some power the gifte gie us to see ourselves as others see us! It would from many a blunder free us, and foolish notions."

360-degree feedback is such a "gifte." It gives those who use it in the workplace a chance to see themselves as others may see them, including subordinates, colleagues and superiors. Its popularity has increased so much in recent years that it is now commonly used by many businesses, including some of the nation's largest corporations.

What is 360 feedback?

As the name suggests, 360-degree feedback puts the participant figuratively in the center of a circle. Those who work next to, under or above the participant provide structured, confidential feedback. The participant also completes a self-assessment, the results of which are compared to the feedback.

The unique feature of 360-degree feedback is that it can give participants new knowledge about how those they work with perceive them. It can show participants that their own views about themselves and how they interact with others may be very different from how others see them.

This information, in turn, can give participants new insight into their strengths and weaknesses as supervisors, co-workers and employees. It can also reveal problems they never knew existed and for which they never sought solutions.

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Medical group feedback

So does this technique from corporate America have anything to offer medical group practices? Moreover, can it successfully be adapted for use by physicians and other members of the practice? The answers to both these questions are a resounding “yes.”

Most physicians evaluate themselves by looking at the number of patients they have and/or their clinical outcomes. Many physicians also look at factors such as how prestigious their practice is, how many articles they have published, and what leadership positions they have attained in medical associations and other organizations.

These factors can certainly help physicians assess their medical knowledge, clinical skills, recognition among peers and reputation. But, they have limits when it comes to helping them understand how well they work with others in the practice. And the quality of working relations between physicians and other members of the practice can profoundly affect operational efficiencies, staff loyalty, professional satisfaction and overall morale. It can even affect patient care.

Consider the following scenario.

A physician regularly performs in-office procedures with assistance from ancillary medical staff. The physician always speaks loudly during the procedure. He does this to ensure everyone clearly hears and understands him. He is not doing it out of anger or disrespect for the staff. In fact, he thinks very highly of the staff.

However, staff members do not see it this way. They think the physician speaks loudly because he is either angry at them or does not have confidence in them. As a result, they are often anxious and frustrated when working with him.

In fact, his loud voice actually distracts them from fully processing his comments and directions. This situation could, ultimately, lead to an error. At the very least, the staff is suffering undue stress and morale problems that could cause some of them to eventually leave the practice. This is clearly not what the physician wants. But he has no idea the staff is feeling this way.

360-degree feedback can give physicians like this one valuable insight about their interactions with other members of the practice and how those interactions can affect their performance, and the performance of others. Most importantly, it can help them identify “blind spots.”

Other members of the practice, including office staff, administrators and ancillary medical personnel, can also use 360-degree feedback to examine their own interactions with others and how they may affect performance.

Setting goals

360-degree feedback usually takes place annually. An outside facilitator can be very useful in streamlining and managing the process from start to finish. The facilitator can also help participants interpret the results and determine what actions, if any; they should take in response to them.

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ing feedback when it's negative. Such delay can be useful if you are angry or fear losing control of your feelings during the process; but most leaders delay because they fear hurting the other person's feelings. Keep in mind that "here-and-now" feedback is the most effective.

5. Focus on behavior that can be changed

Many individual behaviors are habitual and could be described as a personal style developed through years of behaving and responding in certain ways.

Feedback on this kind of behavior is often frustrating because it can be very difficult to change and even if it can, will require many interventions over an extended period of time. As a rule, feedback should be aimed at behavior that is susceptible to change in the short-run.

In James's case, the question to ask yourself is, "Is this behavior situational, or is it demonstrated everywhere and therefore part of a fundamental personality trait?"

Many behaviors can be easily changed through feedback if the person has a conscious desire to change in order to be more personally or professionally effective. Focus on changing behavior that is under the person's immediate control rather than to try to change their fundamental personality.

6. Never give feedback when you are angry

Finally, it is assumed that the primary motivation for giving feedback is to help the other person. When you are angry, however, the motivation may be tinged with the desire to let the person know they have “made you angry.”

In such a situation it's impossible to lay the necessary coaching foundation of trust, openness, or positive regard. Angry feedback is generally

futile, even when it is valid, because the receiver will reject it in order to protect his or her personal integrity.

So, there it is; how to give difficult feedback. While you may not remember all of these guidelines during the stress of the moment, reviewing them just prior to giving someone difficult feedback will significantly increase your chances of success.

Some guidelines may be more important to keep in mind than others—e.g., it should be specific and descriptive, not evaluative—but all six will be important at some point.

Coaching without giving feedback is like trying to help a person get somewhere without providing them any directions. Follow these guidelines, and make sure your intentions are positive.



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A facilitator will begin by teaching group practice members about the value of the process and how the process works. He/she will obtain input from select practice members on what areas should be examined for each participant getting feedback. The facilitator will then prepare and distribute self-assessments to the participants and questionnaires to those providing feedback, collect the results and prepare reports for each participant.

The reports will contain results from the self-assessments in relation to the feedback given. The facilitator will then meet privately with each participant to reflect on the results, ask clarifying questions and discuss potential steps toward positive change, where change is indicated.

360-degree feedback is not a panacea for all the interpersonal problems that can arise in a medical group practice. But it can be extremely useful in helping members of the practice better understand themselves and each other's work style preferences, sensitivities, attitudes and perceptions. This understanding, in turn, can help them improve their interactions with each other and build a healthier, more productive and more satisfying work environment.

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