

Feedback among Nursing Professionals: A Narrative Review

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ABSTRACT

Feedback is one of the essential components in nursing curriculum. If the feedback to be effective it should be given in regular manner on their performance in a supportive environment. The nursing educators and supervisors should ensure they provided feedback in a timely manner and specific to the learner's performance. Specific feedback highly valued by the learners when compared to nonspecific evaluative feedback. It provides opportunity to self-assess their skills and capabilities and also it provides direction that increase motivation, confidence, self-esteem, cognitive skills and behaviours. Effective feedback gives confidence and reassurance to the patients and family members. In today's busy medical field providing feedback is a challenging one, if a person not received feedback about their performance, they might assume that he/she has no areas for improvement. So the nursing professionals should give importance to feedback in their learning process and implement a mechanism by which the quantity and quality of feedback is monitored.

Key words: Feedback, Nursing Supervisor, Educator, Students

INTRODUCTION

Feedback is a process of communication that helps the person consider a modification of behavior and gives information about how they are perceived by others. ^[1] Feedback motivates the person to perform well by giving information about their performance and also clarifies any deviations between the *preferred* and the *actual* behaviour. ^[2] McKimm study (2013) showed that if the person not received feedback about their performance, they might assume that he/she has no areas for improvement, they actually expect feedback from someone whom they respect or trust for knowledge, attitudes or clinical competence. ^[3] In Segoe (2013) study showed that feedback is one of the necessary skill needed in nursing practice, if the educator fail to give feedback it will sends a non-verbal communication and this lead to mixed message and false assessment.

^[4] In general nursing professionals receives feedback from various sources mainly from nursing educators and supervisors, co-staffs, patients and their family members.

Jamshidi et al. (2016) mentioned in his study the education of nursing is mostly a combination of theoretical and practical learning, which helps them to gain knowledge, skills and the attitude for providing care. ^[5] According to the study Burgess & Mellis (2015) feedback is one of the essential skill in nursing, but these skills of giving and receiving of feedback are rarely taught to students. Providing feedback helps the students to know, how they are performing and enable them to restructure their understanding and build powerful ideas. ^[6] Nichol & Macfarlane-Dick study (2006) showed that feedback give information to educators to re-think their pattern of teaching in response to the student's needs. ^[7]

The main aim of this paper is to outline the strategies, importance and challenges of feedback among nursing professionals, because *nursing* is a profession that involves a *life-long learning process*. By knowing the importance of feedback they can alter their thinking and behavior patterns. [8]

FEEDBACK:

Hastings & Redsell (2006) have described feedback as “A two-way process in which an educational supervisor or group appropriately shares with the learner information based on observation, with the aim of enabling the learner to reach the defined goal.” [9]

Feedback is vital part of education and adult learning. It is an analysis of the work done, which will help to point out the strengths and weakness also guide us to reach the goal. [10] The feedback lies somewhere between praise and criticism of a person’s behavior. It is easy to provide feedback in a positive manner, but the best feedback should be constructive and helpful to the nurses. [11]

Hattie & Timperley (2007) presented one of the useful models of feedback as ‘Feed Up, Feed Back, and Feed Forward. The learner considers three questions in this model.

Feed Up: Where am I going (what are my learning intentions?)

Feed Back: How am I going (what does the evidence tell me?)

Feed Forward: Where to next (what learning activities should I do to make better progress?). [12]

Criteria for feedback

The following criteria were listed in the book entitles as *The Good Consultation Guide for Nurses* by Hastings & Redsell (2006)

Persons are motivated when the feedback is descriptive of the behavior that can be changed rather than their personality, it should be specific with examples, where areas needs improvement rather than providing in general. It should be immediately soon after the performance, so

that the event will be fresh in everyone’s mind. Lastly it should be selective and sensitive by focusing one or two key issues rather than more at a time. [9]

Characteristics of Giving and Receiving Feedback:

These skills are important in ongoing development in nursing professionals mostly during learning situations. [13] It helps the learner to develop the competence and confidence at all stages. [3] Giving feedback is something sharing your thoughts about another person and enabling them to reflect on the information which is helpful and make changes based the feedback given. [13]

The following guidelines were listed by Jones (2004) in his book entitles as *Oxford Textbook of Primary Medical Care*.

Guidelines for giving Feedback: Feedback should be given only when you assure that your feedback will be accepted by others, try to give immediately after the performance and start with positive feedback before giving any negative one. It should be descriptive, by explaining why the specific behavior needed to change and how it will be helpful to achieve the goal. Before giving any feedbacks try to ask yourself ‘why you are giving this feedback, suggest alternative or desirable behavior when you give negative feedback.

Guidelines for receiving Feedback: Actively listen to the feedback which is given and respect the person who given feedback. Consider the constructive elements in the feedback given, sometimes you may not clear with the feedback given, at the time ask for repetition and to clarify with examples that are easily understandable. Try to receive both negative and positive feedback in positive manner and ask for suggestions, how to modify or change the behavior according to the feedback given. At last don’t forget to thank them for their efforts made to give feedback. [14]

SCOPE AND BENEFITS OF FEEDBACK IN NURSING

Feedback between nursing students and educators:

For Students: Feedback is a two-communication of information in learning, based on the assessment made the educator provides specific information to students that fill the gaps in learning. [15] Providing timely, regular and specific feedback enables students to learn from their mistakes, it helps them to maximize their potential and professional development and also it provides direction that increase motivation, confidence, self-esteem, cognitive skills and behaviours. [3,16,17] It clarifies the areas where actions to be taken to improve performance; and it provides opportunity to self-assess their skills and capabilities. [3,18]

For nursing educators: feedback is an essential part of academic and career developmental process. [17] Cleary et al. (2013) mentioned in his study the students feedbacks are reflection of the learning from theory and clinical it will help the educator to improve their quality and modify the teaching process according to the learners needs. [19] The student's evaluation of the educator occurs throughout the learning process, they might receive written or verbal feedbacks. The educator should always be prepared to respond student's feedback without any defensiveness and assure them providing a good and effective teaching. [19]

Nurse and Patient/family members

For nursing professionals: Because of their nursing professional socialization and strong achievement needs, they want to deliver high quality care to their patients. In order to achieve this they need a feedback on frequent basis to know when and what they are performing well, this need to compare them with their colleague staffs and their own past good performances. [20] From the feedback received they will know how they are performing and revise them what are the new responsibilities they can consider in future. [2] It helps to develop their confidence level that they are moving in a right way. [20] This kind of quality feedback help to rate realistically about their clinical

performance and it will minimize if there any poor practices. [2]

Feedback from patient and family members: This is one the useful source of information many of the nurses mostly do not solicit for it. [21] As a nurse she should actively listen to their words, this needs critical thinking to understand from the patient's perspective. She should utilize the tone of patient's voice and always give time while on conversation, request for the feedback from patients and family members to clarify what observations she had been made is correct or not. This kind of listening minimizes the misunderstandings between them and lead to effective use of time and accurate information. [22] In most of the time the patient and family members expect feedback from nurses about their health; the feedback from nurses will help to reassurance. So the nurse should give specific feedback to their need what they really want to use it, example: I can tell you're getting little stronger everyday because yesterday you raised you hands till shoulders, but today it was above your head. [21]

Nursing Supervisor and Nursing staff:

Nursing Supervisor: Feedback is a powerful tool for supervisors, which assists them in motivating behavior. Some of the supervisors find difficult to give negative feedback to nurses because they fear this will upset them. But it is necessary to provide them feedback to know where they really need improvement, so it should be given in a manner neither hurtful nor resented to the individual. Some supervisors fail to give positive feedback to nurses when they are doing good work. Providing positive feedback will be most important reward they get from their jobs. [23]

Nursing Staff: In order to respond the supervisor feedback most the nurses may jump into a defensive response, but the best approach for this is to carefully listen what and why it is shared to us. Active listening is an important type of communication as we mentioned above, so they should consider the alternative solution from the

supervisor. Sometimes the nursing supervisors forget to provide feedback, on that time it the responsibility of the nurses to ask for feedback in frequent basis to improve their quality performance and correct any mistakes have been made. [24]

CHALLENGES AND ITS SOLUTINS WHEN GIVING AND RECEIVING FEEDBACK:

As a Nurse providing feedback to someone is a challenging work in today's busy and complex medical field. [25] Even if we want to provide feedback with good intentions, it often seems difficult to find time and space to provide feedback to learner. Chaou et al. (2017) note the effect of giving and receiving feedback in busy clinical environment is known to only small proportion. Some of the main challenges faced by the nursing professionals are mentioned below. [26]

Space between giving and receiving of feedback: Hattie & Timperley (2007) described "Feedback involves both the giving and receiving, by teachers and learners, and there can be gulfs between these". [12] According to Anderson (2012) study, feedback is one of the essential components in nursing education, but these skills are rarely taught to nursing students. Providing effective feedback is challenging, most of the nursing educators and supervisors give only little preference for this. In this competent medical field, feedback to clinical nurses really helps to develop their performance well, but the feedback provided by the supervisors are only little or no formal training in this aspect. [27] In Clynes & Raftery (2008) study showed that nursing educators and supervisors want to maintain a positive relationship with their students, so they avoid giving negative feedback will affect their relationship. [17] Wilkinson et al. (2013) noted sometimes when giving and receiving feedback the individual traits such as their confidence or insecurity, extroverted or shy, factual or sensitive, structured or spontaneous, can affect feedback. In the

study of Burgess & Mellis (2015) mentioned feedback mostly helps to improve the student's knowledge, skills and behaviour, if the feedback provided accurately it will narrow the gap between actual and desired performance. [28]

The way of Constructive feedback given: Providing a positive feedback will be pleasing for all, but a negative/constructive feedback will be disappointing. According to an earlier study of Burgess & Mellis (2015) the student's errors in clinical training should be quickly brought to their attention, providing a constructive feedback to them, requires skill and understanding the process. [28] Thoo et al. (2004) noted if the feedback focuses too much negative things of the learners, it will make them discouraged and sometimes the feedback fails due to anger, defensiveness or embarrassment on the part of learner, so on that time it is the responsibility of the nursing educator to remember their experiences how they received feedbacks during their training and provide feedback accordingly. [29] A study conducted by Sender Liberman et al. (2005 in the medical literature reveals, majority of the educators more comfortable when providing positive feedback than a negative one (91% and 64%, respectively). [30] Wilkinson et al. (2013) noted that negative feedback will be successful when the nursing educator given in a manner of starting with positive followed by negative and finish with positive feedback, this will maintains the trainee's attention and also they feel comfortable. [31]

Challenges in receiving feedback: According to the studies of Rafiee et al. (2014); Burgess & Mellis (2015) many students complaints that they dissatisfaction with the amount and quality of feedback they receive from their educators. [28,32] Clynes & Raftery (2008) noted the dissatisfaction mainly due to lack of time or the nurses' inability to give feedback. [17] Yonge et al. (2002) conducted a study and he surveyed 295 nursing educators for basic clinical skills, he found out 75% of them

experienced stress mainly due to overwork and associated with not getting adequate feedback and guidance, lack of time and more responsibility. [33] As per the earlier study of Clynes & Raftery (2008) mostly the lack of feedback process are identified as inadequate supervisor training and education. [17] Wilkinson et al. (2013) mentioned in his study if constructive feedback is given to improve performance; it should be given in a private setting. Most of them won't accept even if the educator professionally handled the situation to given negative feedback in public settings. Ultimately without feedback, learners may harm patients. [31]

CONCLUSION

The feedback is really helpful to the nurses to actively participate and engage in their work and to grow up their communication skills, which will help them to competence with their colleagues. In today's busy situation we won't get enough time to give and receive feedback from others, if we start practicing in our daily practice, it will be helpful to achieve our targeted outcome in a timely manner.

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