2018-11-08: Mixed Messages or Miscommunication? Relationship between Assessor’s WBA Scores and Written Comments

The following links were shared during the chat:

- Writing Medical Student and Resident Performance Evaluations: Beyond “Performed as Expected” [http://pediatrics.aappublications.org/content/133/5/766](http://pediatrics.aappublications.org/content/133/5/766)
- Narrative descriptions should replace grades and numerical ratings for clinical performance in medical education in the United States [https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3836691/](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3836691/)

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**MedEd Chat @MedEdChat 8 hours ago**
Welcome to the #mededchat (US) I am your moderator for the next hour @alliance4clined #meded

**MedEd Chat @MedEdChat 8 hours ago**
The #mededchat topic & questions will be announced in a moment...for now, please introduce yourselves #meded

**Gary Beck Dallaghan @GLBDallaghan 8 hours ago**
@MedEdChat Gary here in North Carolina still recovering from #AAMC18 #mededchat

**MedEd Chat @MedEdChat 8 hours ago**
If you are tuning in to the #mededchat, remember to use the #meded AND #mededchat hashtag and try to answer with the Topic numbers (T1, T2, T3)

**MedEd Chat @MedEdChat 8 hours ago**
We will assume that all of your tweets are your own during this hour unless otherwise stated #meded #mededchat

**MedEd Chat @MedEdChat 8 hours ago**
T1: Of what value are written comments on #medstudent and resident patient care performance evaluations? #mededchat #meded

**Gary Beck Dallaghan @GLBDallaghan 8 hours ago**
@MedEdChat T1 #mededchat I think it depends on how honest the preceptor can be. If they are meant to be formative and constructive critiques are made, great. Many summative evals are empty platitudes. #meded

**Alliance4ClinEd @Alliance4ClinEd 8 hours ago**
@GLBDallaghan @MedEdChat T1 #mededchat Summative evals for #medstudents go into the MSPE, so no clerkship director will harm their chances with so-called negative comments.
What about for resident performance? Many times those also seem to lack depth. Or at the very most say "read more". How does that help them?

#mededchat #meded

The #mededchat topic & questions will be announced in a moment...for now, please introduce yourselves #meded

RT @MedEdChat: T1: Of what value are written comments on #medstudent and resident patient care performance evaluations? #mededchat #meded

RT @MedEdChat: Join the #mededchat on Thursday, 11/8 at 9PM Eastern/NYC as we discuss We will be discussing Mixed Messages or Miscommunication:

@Alliance4ClinEd @GLBDallaghan T1 What about for resident performance? Many times those also seem to lack depth. Or at the...

Welcome to #mededchat

I remember receiving many unhelpful generic comments as a learner, so now I always try to give feedback on specific incidents/behaviors, both in writing and in person verbally

@MedEdChat T1- They can be extremely valuable to students, especially if teachers have training in writing comments and if comments are explicitly meant for formative feedback. #mededchat

Jennifer from San Diego, multitasking on call again

I like to use the open text boxes on student/resident evals to make “educational prescriptions” ... eg “here’s what I want you to practice over the next few weeks...”

T1 I found this interesting recommendation that builds off of Lou Pangaro’s R-I-M-E schema as a way to write comments... #mededchat

#mededchat needs to do a better job in giving deep and meaningful feedback-getting at deliberate practice. No NBA player ever got better by being told to simply read more, I bet. #mededchat
RT @BJBRoman: @MedEdChat @Alliance4ClinEd @GLBDallaghan #meded needs to do a better job in giving deep and meaningful feedback.

I like to use the open text boxes on student/resident evals to make “educational prescriptions” ... eg “here’s what I wa...

Do any #medstudents or residents come back and ask you to change those because it might make them look bad? #mededchat

T1- and when specific deficiencies are observed, it is vital to document. Otherwise, learners are presumed to be doing well by course/program directors. Same for evals of teachers by learners. #mededchat

Unfortunately yes. With all the pressures of the match, they are fearful that even one “negative” comment will harm them. We need to focus on learning #mededchat

We have added a box specifically for this purpose on the clerkship assessment forms at @MedicalCollege of Wisconsin. This box doesn’t go to the MSPE. #mededchat

T1 In so doing are you advocating for more forward feeding of #medstudent performance across clerkships (particularly the block schedule variety)? #mededchat

It doesn’t help. Milestones with behaviorally anchored descriptions haven’t helped as much as we hoped. #MedEd #MedEdChat

I have never experienced that, maybe because the comments have a more neutral feel... #mededchat

When I do verbal feedback I ask the students/residents what they want to keep working on for rest of rotation or next time on wards. I include “we discussed working on ___” in comments to help remind them too #mededchat

written feedback as narrative can be very helpful for formative/summative purposes, in current imperfect system. In future, competency by design @Royal_College will encourage written feedback of observed performance as a tool for coaching (eg instructive)
Gary Beck Dallaghan @GLBDallaghan 8 hours ago  
@LeighPatterson @MedEdChat @Alliance4ClinEd  
That's partly because you are just using another scale...it just has more words in it for the anchors. Busy preceptors figure that out pretty quickly. #mededchat

MedEd Chat @MedEdChat 8 hours ago  
T2: As this study from Sebok-Syer highlights, there is often "hidden code" in narrative comments. What impact might this have on #medstudent trust in evaluations? https://t.co/ScGOx6UydD #mededchat #meded

Gary Beck Dallaghan @GLBDallaghan 8 hours ago  
@myheroistrane @Alliance4ClinEd  
But you think they are specific enough to help the learner improve? #mededchat

Leigh Patterson @LeighPatterson 8 hours ago  
@Alliance4ClinEd @myheroistrane @MedEdChat  
We have a formal policy for addressing #medstudents who wish to contest these. Very few actually changed #mededchat

MedEd Chat @MedEdChat 8 hours ago  
#mededchat  
T1 Good idea!

Marty Muntz @mmteacherdoc 8 hours ago  
@Alliance4ClinEd  
Personally? Absolutely. This is truly “need to know.” We have an obligation to current and future patients to ensure competence. And to our students to push them to addressing learning/skill gaps. #mededchat

Gary Beck Dallaghan @GLBDallaghan 8 hours ago  
@MedEdChat  
I don't know if it would erode trust, but it would certainly motivate them to get those coded comments more often

Leigh Patterson @LeighPatterson 8 hours ago  
RT @GLBDallaghan: @LeighPatterson @MedEdChat @Alliance4ClinEd  
That's partly because you are just using another scale...it just has more...

Alliance4ClinEd @Alliance4ClinEd 8 hours ago  
RT @mmteacherdoc: @Alliance4ClinEd  
Personally? Absolutely. This is truly “need to know.” We have an obligation to current and future patie...

Alliance4ClinEd @Alliance4ClinEd 8 hours ago  
T2 #mededchat  
Some @COMSEPediatrics members wrote this piece about foregoing grades altogether in clinical #meded for narrative comments. Thoughts? https://t.co/22BAmEgzTz

Leigh Patterson @LeighPatterson 8 hours ago  
@GLBDallaghan @MedEdChat @Alliance4ClinEd  
Agee completely. My favorite directions for colleagues - tell the learner what they did well (and should continue to do); what they should do differently tomorrow; and WHY doing it differently is important #mededchat
Marty Muntz @mmteacherdoc 8 hours ago
@DrJenChen4kids @myheroistrane @MedEdChat I also do this. Hope it shows residency directors that the student is good at self-assessment & dedicated to ongoing professional development. #mededchat

Paul Haidet @myheroistrane 8 hours ago
@GLBDallaghan @Alliance4ClinEd @MedEdChat When a music student has a lesson, the teacher makes specific recommendations for what and how to practice, thus attempting to enable high quality practice. I try to do that too. #mededchat #meded https://t.co/oMGoQqzRtc

Alliance4ClinEd @Alliance4ClinEd 8 hours ago
T1 #mededchat This is a great plan for #feedback as you have given direction for an immediate change. How successful are you at following up with them regularly?

Celeste Royce @croyce628 8 hours ago
@MedEdChat T1 #mededchat they are frustratingly unhelpful. time constraints work against a comprehensive assessment, and the use of summative comments in the MSPE limits honesty.

Alliance4ClinEd @Alliance4ClinEd 8 hours ago
RT @croyce628: @MedEdChat T1 #mededchat they are frustratingly unhelpful. time constraints work against a comprehensive assessment, and the...

Jennifer K. Chen, MD FAAP @DrJenChen4kids 8 hours ago
@MedEdChat @Alliance4ClinEd @GLBDallaghan Hah, the ubiquitous “read more…” Better to set specific goals like doing 5 PREP (peds boards) practice questions or reading 1 article relating to a patient next week...I like bringing in Peds in Review because they include questions for reinforcement #mededchat

Marty Muntz @mmteacherdoc 8 hours ago
@BJBRoman @MedEdChat @Alliance4ClinEd @GLBDallaghan I definitely agree. And we also need to teach students/residents about growth mindset. And transition our system to “assessment for learning” instead of “assessment of learn.” Current system rewards students/residents for hiding their weaknesses. #mededchat

Brenda Roman @BJBRoman 8 hours ago
@Alliance4ClinEd @COMSEPediatrics T2. If narrative comments were truly focused on the growth of the student, then yes, but I fear that in most cases it would not happen. #mededchat

Paul Haidet @myheroistrane 8 hours ago
T2: need to consider the relational context in which eval comments occur: weaker relationship = students nore likely to look for hidden meanings and code words. Stronger relationship = students more likely to adopt true meaning of the words. #mededchat

MedEd Chat @MedEdChat 8 hours ago
RT @mmteacherdoc: @BJBRoman @MedEdChat @Alliance4ClinEd @GLBDallaghan I definitely agree. And we also need to teach students/residents about...

Marty Muntz @mmteacherdoc 8 hours ago
@GLBDallaghan @MedEdChat Or avoid certain “coded comments” - such as “punctual” and “completed tasks assigned to him/her”. Kiss of death. #mededchat
RT @myheroistrane: T2: need to consider the relational context in which eval comments occur: weaker relationship = students more likely to...

@Alliance4ClinEd T2 With the struggles identify preceptors can you think of any solutions to strengthen the physician to learner relationship? #mededchat

@mmteacherdoc Wow - if we do this and #MakeUSMLEPassFail, we’ll truly transform #meded #mededchat

T2 Perhaps a greater change needs to occur then at the GME level to ensure program directors are on the same page. Otherwise it will always be business as usual. #mededchat

Wow - if we do this and #MakeUSMLEPassFail, we’ll truly transform #meded #mededchat

This is where a longitudinal longer term relationship is important #mededchat

I think it’s also difficult for many clinicians (operating at unconscious competence level) to write useful comments, because it is hard to articulate what is specifically wrong; they just know that it’s wrong. #mededchat

T3: What can be done to help preceptors bring "hidden code" into the light of direct, honest comments? #mededchat #meded

@Alliance4ClinEd @myheroistrane @MedEdChat T2 longitudinal relationships, getting to know one another off the clock. as the preceptor, sharing what motivates you, what your passions are both in and out of medicine.

There’s this too: https://t.co/NbGjJmGLSz
T2: Still relatively new to writing comments, so I had no idea it was “bad” to put things like “helpful to team” or “cares about their patients” compared to other descriptors. Unfortunately not every #medstudent meets those baseline descriptions! #mededchat

@GLBDallaghan T3 I think @mmteacherdoc put it very succinctly in that we need to shift the focus of assessment of learning to assessment for learning. Also, if the ultimate goal is the well-being of the patient, wouldn’t every #medstudent and resident want honest feedback? #mededchat

@mmteacherdoc Agree to a certain degree. But speaking mainly as a UME person, it’s pretty easy for us to blame the GME folks. What if we all changed our practice in UME? GME would be comparing apples to apples. #mededchat

#mededchat: do you think it that aspect also is due to time constraints- we don't have time to reflect on our own practice, let alone reflect, interpret, and communicate our thoughts on learners' performance. #mededchat

@DrJenChen4kids @MedEdChat T2 So do you think a resource of helpful hints in writing narrative comments would come in handy? Is it different depending on the specialty? #mededchat

@BJBRoman @Alliance4ClinEd @myheroistrane @Alliance4ClinEd @GLBDallaghan @myheroistrane @admsep @COMSEPediatrics T3. Unfortunately it is a universal problem and simply the fact that education, in any world, is undervalued #mededchat
Marty Muntz @mmteacherdoc 7 hours ago
@GLBDallaghan @MedEdChat I thought @angeladuckw hit it right on the head at #AAMC18. Med school is the first time many students are not “top of their class/shining star.” Hard to hear/consider/use constructive comments well for some. We haven’t taught this well, I don’t think. #mededchat

MedEd Chat @MedEdChat 7 hours ago
RT @mmteacherdoc; @GLBDallaghan @MedEdChat I thought @angeladuckw hit it right on the head at #AAMC18. Med school is the first time many st...

Paul Haidet @myheroistrane 7 hours ago
@croyce62 Absolutely. All of this happens in a systemic context, and every system is designed to get the results it gets. #mededchat

Leigh Patterson @LeighPatterson 7 hours ago
@MedEdChat T3 we need to engage around generational differences with both #learners and #faculty. Both groups must ask themselves “what did the other hear me say/not say?” #MedEdChat

Paul Haidet @myheroistrane 7 hours ago
Yup. We already have narrative based medicine... perhaps it’s time for narrative based education... #mededchat

Jennifer K. Chen, MD FAAP @DrJenChen4kids 7 hours ago
@MedEdChat T3: Verbal feedback is important - gives you a chance to see how the learner reacts and hopefully avoid potential misunderstanding. The learner shouldn’t be surprised by what they read in written evals. #mededchat

Marty Muntz @mmteacherdoc 7 hours ago
RT @myheroistrane: T3 training can help; @acgme has been running courses to help with this. #mededchat https://t.co/Wf2K6EP6KK

Alliance4ClinEd @Alliance4ClinEd 7 hours ago
@LeighPatterson @MedEdChat T3 We actually published a nice book on that very topic to help with the generational divide https://t.co/XyFw3grpIb

Stephanie Starr, MD @StephRStarr 7 hours ago
RT @GLBDallaghan: @MedEdChat T3 I think @mmteacherdoc put it very succinctly in that we need to shift the focus of assessment of learning t...

Stephanie Starr, MD @StephRStarr 7 hours ago
RT @mmteacherdoc: @GLBDallaghan @MedEdChat I thought @angeladuckw hit it right on the head at #AAMC18. Med school is the first time many st...

MedEd Chat @MedEdChat 7 hours ago
RT @Alliance4ClinEd: @LeighPatterson @MedEdChat T3 We actually published a nice book on that very topic to help with the generational divid...

MedEd Chat @MedEdChat 7 hours ago
We have about 5 more minutes left in our discussion. Please feel free to give some final thoughts #meded #mededchat
Some @COMSEPediatrics members wrote this piece about foregoing grades altogether in clinical #mededchat for...

I found this interesting recommendation that builds off of Lou Pangaro's R-I-M-E schema as a way to write...

Wow - if we do this and #MakeUSMLEPassFail, we’ll truly transform #mededchat.

There’s this too: https://t.co/NbGJjMGLSz

We actually published a nice book on that very topic to help with the generational divide...

Final Thoughts: Seems to me narrative comments lack the specificity of being useful just like behaviorally anchored Likert scales. #meded has a long way to go to get past this I fear.

That’s a wrap...I will post the #mededchat transcript tomorrow morning on https://t.co/mJivoK9NyX on the Resources page. Thanks everyone for participating! #meded

If we-attendings and learners -could encourage deliberate practice that @angeladuckw discussed, it would go a long way in asking for and receiving meaningful feedback. https://t.co/X4VTVwqtud
Gary Beck Dallaghan @GLBDallaghan 7 hours ago
RT @croyce62: @Alliance4ClinEd @LeighPatterson @MedEdChat #mededchat  T3 feedback was hard to give before the digital generational divide an...

Marty Muntz @mmteacherdoc 7 hours ago
I think we need to teach growth mindset to our students & residents during orientation week. Then provide opportunities to practice receiving/considering/incorporating feedback over & over before clerkships. Harder to start doing this the longer we wait. #mededchat

Celeste Royce @croyce62 7 hours ago
RT @BJBRoman: #mededchat If we-attendings and learners-could encourage deliberate practice that @angeladuckw discussed, it would go a l...

Stephanie Starr, MD @StephRStarr 7 hours ago
RT @Alliance4ClinEd: T2 #mededchat Some @COMSEPediatrics members wrote this piece about foregoing grades altogether in clinical #meded for...

Teresa Hartman @thartman2u 6 hours ago
RT @MedEdChat: That's a wrap...I will post the #mededchat transcript tomorrow morning on https://t.co/mJivoK9NyX on the Resources page. Tha...

Mohammed Alkhalifah @Alkhalifaa 26 hours ago
RT @BJBRoman: #mededchat If we-attendings and learners-could encourage deliberate practice that @angeladuckw discussed, it would go a l...

Rebecca Lundh @RebeccaLundhMD 3 hours ago
RT @mmteacherdoc: I think we need to teach growth mindset to our students & residents during orientation week. Then provide opportunities t...