**Feedback**

**The ARCH That Supports Clinical Teaching Quality**

ARCH

# Ask...

what the learner felt about his or her performance - pros and cons

# Reinforce...

parts of the self­ assessment the student got right

# Correct...

errors in learner performance or self -assessment

# Help...

the learner devise a plan for follow­ up or next steps



**Principles of Feedback:**

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Establish learner andpreceptor expectations Limit feedback to 2-3 specific behaviors/session Positive feedback is as important

**When to Give Feedback:**

e

Immediate is Best End of the day

End of the rotation-summative

Medical learners maymiss akey finding or communicate ineffectively - not meeting established standards or expectations. Or they may perform very well on a specific task. Either way. it's the preceptor's job to guide or reinforce the student'sbehavior wijhdirect feedback. meaning that it's clear. behavior-specific. timely and received.

Preceptors are likely to deliver direct feedback when using aneasy-to-remember model- such as ARCH.

Before our preceptor and learner drive across the ARCH (above)- preceptors must know that context makes a big difference in feedback's effectiveness. One major element of context: establish and communicate learner and teacher expectations! Sometimes this is called "priming' or·setting the stage•.

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**Reference**

**Baker D.. ARCH F'eedback Model for Clinical Teachers. The Orange Grove: Florida's Oigital Library. accessed June l. 2015 at**

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