## Reflective Teaching Practice

### The B-D-A Framework

- **B**efore: Structures the learning experience by engaging the student **B**EFORE, **D**URING and **A**FTER patient encounters or other clinical experiences.
- **D**uring: Communicates that you are mindful that the student is there to learn, not just to “tag along”, and that you have given some thought to how learning can occur.
- **A**fter: Reflects on how you can help prepare the student.

| **BEFORE** | • Prepare the student to engage in the clinical experience • Identify learning demands • Establish student’s relevant knowledge & skills • Establish or clarify learning objectives • Identify relevant and appropriate resources • Reflect on how you can help prepare the student |
| **DURING** | • Observe student interaction with patients and other health care professionals • Ask student to be mindful of questions or issues that arise during patient encounters or other clinical experiences • Reflect on how you can guide or assist the student during the clinical experience, as necessary |
| **AFTER** | • Invite the student to self-assess performance • Encourage and respond to student questions or concerns • Provide constructive (formative) feedback • Encourage the student to reflect on their goals for future learning • Discuss relevant resources to support further learning and improvement |

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Evaluation or Feedback?

**Evaluation** tells the learner how well or poorly they performed.
- Great job!
- Needs improvement.

**Feedback** tells the learner why you think they did such a great job or need improvement. In other words feedback should always be constructive – helping the learner to achieve goals and learning objectives.

Find more resources for clinical educators online! FID.medicine.arizona.edu

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### Constructive Feedback Essentials

1) **Invite self-assessment as part of a feedback conversation.**

Engage the learner in a conversation about their development rather than simply telling them how they are doing. To obtain a baseline for providing formative feedback, ask the student to describe what they did well and what they found particularly challenging or would like to improve.

2) **Describe relevant, observable behaviors.**

Describe relevant, observable behaviors to help the learner understand the specific knowledge, skills or attitudes that motivate your feedback.

3) **Include corrective and complimentary comments.**

Learners benefit from knowing what they did well and what they need to improve. Providing a rationale (above) transforms a compliment or correction into constructive (helpful) feedback.

4) **Provide strategic guidance.**

Discuss resources and opportunities that may support the learner’s further development and specifically to address challenges identified in the feedback conversation.

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### Constructive Compliment Example

It’s great that you use the case presentation process to seek clarification of medical knowledge, like when you asked about the sepsis criteria when presenting on our hypertensive, febrile patient today. I also feel more confident in your abilities because you’re not afraid to ask for help with procedural skills. Today, you did an excellent job on the knee exam for our elder patient with rheumatoid arthritis because you asked me to model how to do it first and then incorporated what you learned into your exam.

### Constructive Correction

Emergency Medicine has a specific case presentation format that we use. We present information in a different sequence than how we’re taught to interview patients. Your case presentations have not consistently followed our format. For example, your presentations today tended to start with a complete history of the present illness rather than a succinct reason for the emergent visit.

### Advice

Here’s a guide that lays out the emergent case presentation format. It might help you to use this while presenting or review it just before you present. I’ll give you more feedback after you’ve had a chance to present using the guide. And, please continue to contribute to the discussions among residents and attendings. We often learn by thinking things through together.

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