Overcoming Minnesota Nice: Protected Time for Peer Feedback
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Providing feedback to physicians increases self-awareness and promotes behavioral change, which may result in better patient care. Unfortunately, at our institution, residents received intermittent, anonymous written feedback, and only 50% reported satisfaction with this feedback, compared to the national average of 70%. We sought to increase the frequency and quality of resident peer feedback and also increase residents’ comfort engaging in feedback. To accomplish these goals, we led weekly, chief resident-facilitated feedback sessions at each of our four clinical sites. We protected ten minutes once a week and instructed residents to write down and discuss their weekly goals and progress. We led discussions once a month on the attributes of high-quality and actionable verbal feedback. We collected data before and after the intervention with resident surveys. These surveys showed an increase in participation in weekly verbal feedback from 13% to 69% and an increase in resident comfort with giving feedback from 49% to 75%. The percentage who felt their peer feedback was useful increased from 74 to 79%. 81% believed that peer feedback had caused a change in their practice compared to 71% at baseline. This innovative and ongoing project has changed the culture of resident feedback at our hospital and was accomplished through chief resident-facilitated discussions, protected time for feedback, and the accountability of weekly written goals.