

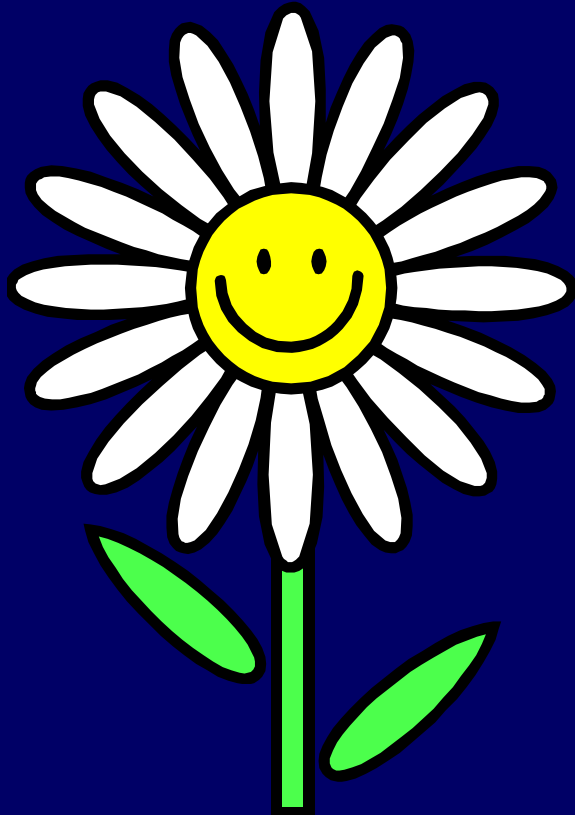
Giving & Taking Constructive Criticism: You Can't Get the Gold Without It

Missouri League for Nursing April 10, 2008

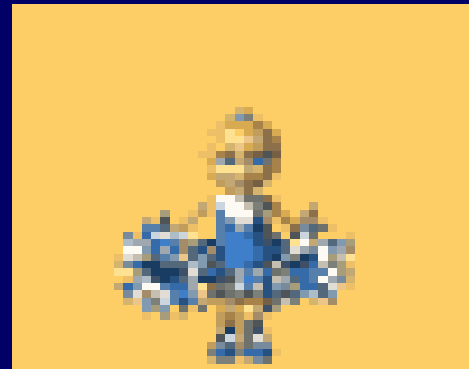
Rosalinda Alfaro-LeFevre, RN, MSN

www.AlfaroTeachSmart.com





Thanks!



GROUND RULES

Feel free

Tell us about problems.

OK to Parallel Process

Have fun! (Keep it down.)

We're all experts / We're both responsible

Check your egos and cell phones at the door.

**Download Strategies, Tools, & This PowerPoint
Presentation (for the next two weeks) from
www.AlfaroTeachSmart.com
(Click on publications)**





BRAIN-BASED LEARNING

- Your brain can think faster than I can talk
- You can read faster than I can talk
- Looking at the same thing from various perspectives = increased learning & insight
- Active participation = retention
- Humor reduces stress and helps us learn

Think, Pair, Share*



* Developed by Professor Frank Lyman at the University of Maryland in 1981. Read more at:

http://www.eazhull.org.uk/nlc/think,_pair,_share.htm

EXPECTED OUTCOMES

- 1. Discuss factors influencing how criticism is received.**
- 2. Use strategies designed to help you use criticism as means to personal growth.**
- 3. Improve your ability to give and take constructive criticism.**

GET FOCUSED

What's In Your Handouts

GIVING & TAKING CRITICISM

- **Central to peer review, clinical evaluation, performance improvement, and Magnet Status**
- **Essential for success today**
- **A basic skill that must be learned early**
- **Section in Alfaro-LeFevre (2008)**

KEY POINTS



- **How we think and behave is a complex issue that's closely linked to self-esteem.**
- **Being told we could be better thinkers, improve in some way, or approach things differently often brings up intensely uncomfortable feelings of being wrong or not good enough.**

Key Points



- **Gut reactions cloud key issues and paralyze our ability to be objective.**
- **Knowing how to provide constructive criticism in a supportive way can make the difference between alienating others and motivating them to improve.**

KEY POINTS



Knowing how to respond to criticism—to be objective and work through the negative aspects of criticism—reduces stress and helps us grow.

Think, Pair, Share*



* Developed by Professor Frank Lyman at the University of Maryland in 1981. Read more at:

http://www.eazhull.org.uk/nlc/think,_pair,_share.htm

QUOTES FROM THE TRENCHES

“Let’s face it. Compliments feel good, but they’re often fleeting and may be about as sincere as “Love your dress.” Criticism has the potential to make you grow. I doubt that any of the world’s great ideas came as a result of the statements, “You’re doing a great job” or “I wouldn’t change a thing.”

Class, P (2006) The Walking Wounded. Nursing Spectrum, 9(21), p. 3

“We discovered that as nurses begin to ask for the feedback on their communication skills, there’s a process in which both parties discuss their communication real-time, so there’s on- going physician-nurse feedback.”

“Nurses practice the reciprocal feedback process first. Then, they apply it to their colleagues, care team members at the bedside (NAs, etc) and also the interdisciplinary team, using worksheets for MDs. This has been very effective in improving MD-RN relationships.”**Ruth Hansten, *Relationship & Results Oriented***

Healthcare

“Poor speaker... Too nervous... Your writing is too vague.... There was a time when barbs like these went straight to my heart, piercing it through, and through. For days and sometimes weeks, I walked around mortally wounded, sure I would never dare to write or speak in public again. It was only after the sting subsided that I began to think about the criticism. Once I did, if I thought it hit the mark, I acted on it, and as a result often ended up a better editor or writer. (When you get criticism) distance yourself and give yourself time. Thank the person if it’s valid....some one cared enough to take time.”

(Class, 2004)

Not What You Know, What You Share.....

You Have Great Power in Your Hands

“What matters most to students isn’t how much you know, but how much you share. Your simplest actions and smallest words have the potential to influence their world forever. ...with very little effort, you can be viewed as a ‘superstar’ to students. They admire someone who loves being a nurse, cares about their patients, and is willing to share their experiences. We work every day with wonderful nurses who want to dispel the myth that ‘nurses eat their young.’”

—Elizabeth Henneman, RN, PhD, & Joan Roche, APRN,

© 2008 www.AlfaroTeachSmart.com

HUMAN NATURE

- **Personality greatly impacts how you give and take criticism.**
- **Emotions during criticism cloud ability to be objective and learn**
- **Stress and fatigue also cloud objectivity**

HUMAN NATURE

- No one likes to be “wrong”
- Criticism = gut defensive reaction
- We want/need that positive feedback

Accepting Criticism

- For us, usually means student or participant evaluation of our performance
- **Many of us try to please everyone**
- We often get criticized when we've taken risks or for the very thing we are doing for well thought-out reasons.

Strategies for Evaluation Forms

- Design them carefully to get feedback on various aspects of the course/program (see example after PowerPoint slides here)
- Should encourage people to write positive, as well as negative comments
- Look at them statistically
- Don't look at them when you're tired

EMAIL FROM A NOVICE SPEAKER

I got the evaluations from the program and am feeling all emotional. I got 75% excellent, 20% good and the rest poor. The 5% poor hurt my feelings. Their comments were things like "You shouldn't start program by focusing on negative" I started with the statistics about nursing burn-out and shortages. Why I can't glory in the positives probably deserves some therapy on my part. Overall, the Education Coordinator was very positive. She hoped I would consider returning in the future, so it will be ok. Just wanted to share with someone who understands....

STATISTICS

- **95 % of the participants thought the speaker in the previous slide was good or better! (Yet she felt bad).**
- **The 5% who thought she was poor probably didn't want to come, are disgruntled workers or sat together influencing each other's attitude.**

GIVING FEEDBACK

- **Relationships matter: Without mutual trust, feedback is unlikely to be viewed constructively.**
- **Get most trusted person to give negative feedback**
- **Positive feedback from supervisors and role models make significant impact**

GIVING FEEDBACK

- **Stress that you're here to help them succeed, not to look for problems.**
- **Ask them what they think first**
- **Get them involved in letting you know what you can do to help them succeed**
- **You do get a second chance**

WORDS MATTER

“May I give you some practical advice?”

versus

“I want to give you constructive criticism.”

WORDS MATTER

- Replace constructive with practical, helpful, or useful.
- Replace criticism with advice, feedback, recommendation, suggestion, observation, or opinion.
- Use the above in informal situations, especially when offering unsolicited advice.

FOCUS ON BEHAVIOR

1. Use “I” statements and tell them what you (and others) observe.
2. Find out reasons behind behavior---
“Help me understand what you’re trying to accomplish”
3. Address patterns, not single incidences

Have Them Watch TV

1. American Idol
2. The Apprentice
3. You Think You Can Dance?
4. A myriad of others

REMEMBER

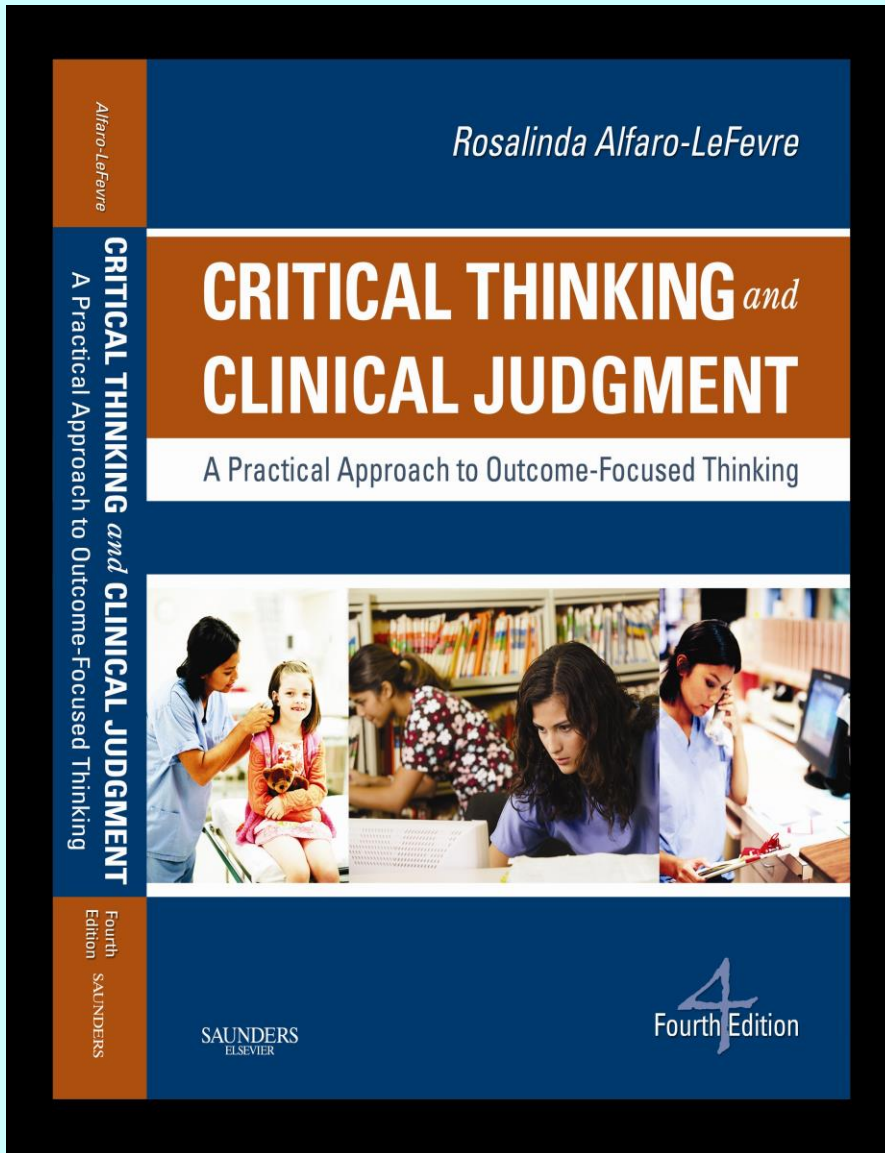
- There's usually a bit of truth to every criticism.
- You can't please everyone
- Confidence, objectivity and willingness to focus on what can be learned is key

Good Resource

Two worksheets designed for nurses to get feedback from physicians are available free from Ruth Hansten, PhD RN FACHE, principal of *Relationship & Results Oriented Healthcare* (a company with a significant track record in improving outcomes and clinical performance). Contact her at www.hansten.com. (Mention this program).

EXPECTED OUTCOMES

- 1. Discuss factors influencing how criticism is received.**
- 2. Use strategies designed to help you use criticism as means to personal growth.**
- 3. Improve your ability to give and take constructive criticism.**



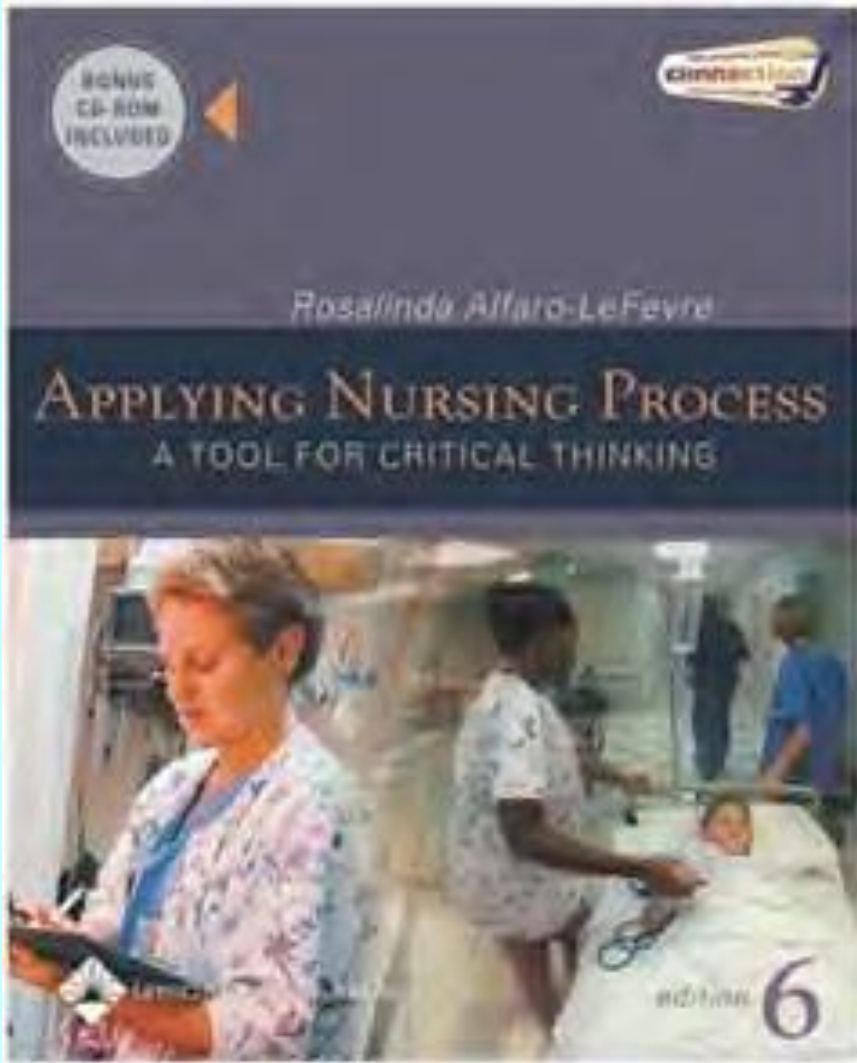
CT Book (2008) Saunders/Elsevier

USA: 800-325-4177

www.us.elsevierhealth.com

CANADA: 866-896-3331

www.elsevier.ca



NP Book (2006)

Lippincott

www.lww.com

USA: 800-638-3030
CANADA: 800-223-2300



Bibliography

Alfaro-LeFevre, R. (2006). Applying nursing process: A tool for critical thinking (6th ed.). Philadelphia: Lippincott- Williams & Wilkins

Alfaro-LeFevre, R. (2008). Giving and Taking Constructive Criticism in: Critical Thinking and Clinical Judgment: A practical approach to Outcome-focused thinking, 4th ed.). Philadelphia: Elsevier-Saunders

Alfaro-LeFevre, R. (2008). Evidence-based Critical Thinking Indicators. Available at <http://www.alfaroteachsmart.com/cti.htm>

Class, P (2006) The Walking Wounded. Nursing Spectrum (FL ED), 9(21), p. 3

Henneman, E., & Roche, J. Eight ways to nurture a new student. Retrieved June 2, 2002 from <http://community.nursingspectrum.com/MagazineArticles/article.cfm?AID=5948>

Rich, P. Giving and receiving feedback. Retrieved 2/20/2008 from <http://www.selfhelpmagazine.com/articles/growth/feedback.html>

Walters, J. The 4-1-1 On Constructive Criticism. Retrieved 2/20/2008 from: <http://www.inc.com/articles/2001/08/23257.html>