

Appendix 1: Description of the feedback training session

Group size: 8-12 supervisors (2 trainers)

General introduction (15-20 min)

The session started with a short introduction, explaining the training's importance and purpose and providing high-quality feedback. The trainers advised the supervisors to begin/guide feedback conversations with residents by asking questions, such as '*What would you like to talk about?*' or '*Did you define your goals in advance?*'. Furthermore, they showed how to identify all CanMEDS roles and their related competencies in residents' performance and explained that assessing key competencies is like putting on different pairs of glasses. Aspects of the quality of feedback, such as specificity and completeness, were discussed throughout the session.

Video fragments (3-5 min)

Video fragments of different resident-patient encounters and selected fragments of the series *House M.D.* were shown on a big screen. While watching the video fragments, supervisors had to decide which competency they would like to focus their feedback on. Subsequently, they were asked to identify strengths and points for improvement for the resident with that competency in mind.

Practicing (5-10 min)

Supervisors took turns practicing giving feedback to the resident in the video fragment. One of the trainers played the role of a resident. The other supervisors were instructed to formulate tips for the practicing supervisor. During the first round, the trainers set an example by playing both the role of supervisor and resident.

When participants raised questions about what would have happened if the resident had responded differently (i.e., ignorant, attacked, emotional), the trainers asked the participant to take on the supervisor role. At the same time, one of them played the role of the resident responding in that particular way.

Discussions (5-10 min)

After practicing, the trainers asked the practicing supervisor to reflect upon what went well and what could be further improved. Additionally, the other participants were asked to share their tips. Discussions about what or how others would have said were facilitated. The trainers provided a safe and open atmosphere, in which participants were encouraged to try different feedback styles. After the discussion, we showed another video fragment, and another supervisor took a turn practicing. Around six video fragments were shown, so over half of the participants got the opportunity to practice themselves. The others learned from actively engaging in the discussions and thinking along.

Appendix 2: Questionnaire filled out by residents about the quality of feedback

Name resident:

Date:

Year of residency:

Name supervisor:

Rotation:

Please indicate below in which situation you just received feedback:

†Oral Presentation

†Critical Appraisal of a Topic

†Patient encounter

†Morning report

†Shift

Indicate to what extent you agree with the statements	Completely agree			Neutral			Completely disagree		
1. The supervisor’s comments helped me focus on areas I could improve.	1	2	3	4	5	6	7		
2. The supervisor showed me how to critically assess my own work.	1	2	3	4	5	6	7		
3. The supervisor commented not just what was wrong, but also what to do about it.	1	2	3	4	5	6	7		
4. Feedback was provided that I could use in future situations.	1	2	3	4	5	6	7		
5. The supervisor offered opportunities to clarify their comments.	1	2	3	4	5	6	7		
6. The feedback comments made me think further about the topic.	1	2	3	4	5	6	7		
7. The supervisor acknowledged my good points or ideas.	1	2	3	4	5	6	7		
8. The supervisor indicated what I did well.	1	2	3	4	5	6	7		
9. The supervisor recognized the effort I had made.	1	2	3	4	5	6	7		
10. The supervisor gave feedback that I couldn’t understand.	1	2	3	4	5	6	7		
11. The feedback was inconsistent or contradictory.	1	2	3	4	5	6	7		

This questionnaire is based on the validated questionnaire:
Lizzio A, Wilson K. Feedback on assessment: students' perceptions of quality and effectiveness. *Assess Eval High Educ* 2008;33(3):263-275.