PURPOSE
To follow best practice Multi-Source Feedback (MSF) scheme implementation by introducing into the existing five-year Vocational Training Program (VTP) with a view to establish the trainees’ life/career long practices of self-directed learning and reflection.

METHOD
- Clarity of why – because we want to develop reflective practitioners
- Discipline of how - MSF encourages reflection
- Consistency of what – internal integrity

Adapted from Simon Sinek’s book Start With Why; Part 2, Chapter 5: ‘Clarity, Discipline and Consistency’
A literature review of multi-source feedback as it was introduced in the United Kingdom (UK) health system for recertification processes together with engaging the leading provider of MSF in Australia (CFEP) demonstrated the absolutes in best practices.

Introducing MSF into the existing VTP required a re-negotiated approach to MSF (with the governing body of the VTP) that proposed de-coupled feedback and reports approach from the existing summative assessment policies and practices.

An additional element, that of the value of debriefing to MSF participants, was identified. Agents to deliver this feedback were proposed as the trainees’ mentors. Training of mentors as de-briefers commenced. MSF debrief training is to be proliferated just-in-time through meetings and congresses as well as elearning interventions throughout 2018.

‘Feedback is a process whereby learners obtain information about their work in order to appreciate the similarities and differences between the appropriate standards for any given work, and the qualities of the work itself, in order to generate improved work.’ (Boud and Molloy 2013)

RESULT
Acceptance of and understanding by many senior health professionals of MSF as a non-summative tool (as it is used in the UK) remains low. Revalidation (yet to be finalised in Australia) will mandate reflective CPD practices. Until this is legislated and regulated in Australia, a working knowledge and understanding of this approach is not expected in the general population of health professionals.

MSF has been approved to be introduced in the VTP in 2018. The de-coupling of MSF results from the summative assessment process has also been approved by the course governors. A train-the-trainer session has been provided to staff and key stakeholders in July 2017. Training of all stakeholders in the VTP system will continue through the last quarter of 2017 and throughout 2018 and training of mentors as de-briefers has commenced with the Mentor Co-ordinators.

Further de-coupling from the VTP progression (apart from trainees being required to participate) is advised as research has shown (Jawahar & Williams, 1997 Murphy & Cleveland, 1995) that whether it is used as summative/administrative or formative/developmental has a substantial impact on both the rating accuracy and acceptance of feedback.

CONCLUSION
Until there is a comprehensive understanding of the value of MSF as a non-summative process which encourages reflective practice, the use of MSF as a positive tool will remain misunderstood. With the introduction of MSF into the VTP, supported by mentors as de-briefers, it is expected that new graduates of the VTP will be able to positively influence their senior colleagues and increase the uptake of MSF as a lifelong practice.

References:
Boud, D. & Molloy, E. (Eds) 2013, Feedback in Higher and Professional Education Understanding it and doing it well. Routledge Sydney