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Exploring Students' Use of Feedback During Occupational Therapy Level II Fieldwork Experiences

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ABSTRACT

Researchers confirmed that the use of feedback assists with the improvement of students' confidence and performance. Multiple studies focus on the provision and acceptance of feedback; however, it was not known if, or how, students internalized the feedback to apply it successfully. Since there is a difference between providing feedback and the interpretation of its true message, this phenomenon was studied to add empirical knowledge regarding students' feedback interpretation. This qualitative study explores the perceptions of how students interpret information received from Level II fieldwork educators and what meanings students attributed to the feedback. The use of phenomenological methodology guided the collection of information-rich data through reflective statements and semi-structured interviews. Twenty-three occupational therapy and occupational therapy assistant graduates volunteered to participate in the interviews. Verbatim transcripts were coded to identify themes and patterns. Participants identified indicators verifying the correct application of feedback, as well as situations affecting the interpretation and application of feedback provided during an experiential learning opportunity. The findings facilitate guidance for educators and students to understand factors that could affect feedback application.

BACKGROUND

Clinical skills are best taught and learned in real-life situations (Spencer, 2003; Perron et al., 2012) and the idea that students in various healthcare professions benefit from regular feedback in clinical settings is widely accepted (Billings, Kowalski, Cleary, & Walter, 2010; Burr & Brodier, 2010). Best practices in feedback delivery have been the focus within the literature to guide supervisors to enhance learning during experiential learning opportunities (Larsen, Patel, Evans, & Saiman, 2013). However, more recently, attention has also been paid to the critical issue of learner receptivity to feedback to determine if students accept the feedback provided to them (Eva et al., 2011; Watling, Driessen, van der Vleuten, Vanstone, & Lingard, 2012).

Provision and acceptance of feedback is necessary to learn the required skills and behavior to become competent clinical providers. For example, Cottrell, Thammasitiboon, Cannarella, Jacques, and Shumway (2008) revealed that 90 third-year medical students were six times more likely to be confident after receiving feedback from a fieldwork educator. Furthermore, Hanson (2011) conducted a qualitative study to interview 60 Level II fieldwork educators revealing themes supporting the use of feedback during hands-on learning experiences. Hanson identified that feedback was an effective tool for students to gain insight to change clinical skills and behavior for the client's benefit. Furthermore, when engaging in real-life learning opportunities, such as Level II fieldwork experiences, feedback was useful to correct mistakes to ensure proper learning for future applications (Balconi & Scioli, 2012). Ultimately, feedback is needed to assist learners to become aware of the skills needed to achieve consistent and quality clinical performance to meet client needs (DeLima Thomas & Arnold, 2011; Grieveson, Kirton, Palmer, & Blamer, 2011).

Not only is feedback essential for the development of hands-on clinical skills and professional behavior, it also assists with the development of coping skills (Deasy, Doody, & Tuohy, 2011) and is an effective method to guide students through experiences. Elliot et al. (2009) found that feedback was psychologically reassuring, and individuals sought feedback even when they were told it would not benefit their performance. Even if the feedback was considered negative, the participants agreed that it facilitated the development of professional skills to deliver effective client care (Grieveson et al., 2011). Feedback was necessary to help students become aware of progress made during the experiential learning opportunity and provide insight into the quality of the client care they provided (Hattie & Timperley, 2007).

The occupational therapy literature includes empirical studies focused on the use of feedback with students within the classroom and fieldwork settings. Studies by Adler and Gavin (2010) and Knecht-Sabres (2010) focused on the use of experiential learning within the classroom necessitating the use of feedback to develop hands-on skills, while studies by Lew, Cara, and Richardson (2007) and Richard (2008) indirectly examined feedback by exploring the reasons for student failures during Level II fieldwork experiences. In addition, articles written by Ferraro Coates and Crist (2004) and Hanson (2011) discussed the need for feedback during the Level II fieldwork portion of occupational therapy education to transfer newly learned clinical skills. However, recent occupational therapy literature is lacking in its focus to discuss feedback acceptance, interpretation, and application during experiential learning opportunities.

Fieldwork educators become disappointed if students do not apply the feedback provided to them, which in some cases may lead to failure of this experience (Lew et al., 2007). However, a study by Burke (2009) provided insight into how frustrating it may be for the students themselves to effectively use feedback provided to them. These studies provide evidence that both the provider and receiver of feedback may enter a frustrating and detrimental experience. This feedback disconnect between provision and application supports the need to investigate the factors that affect the ability to accept, interpret, and use feedback effectively to facilitate a learning experience.

In a landmark article by Ilgen, Fisher, and Taylor (1979), a four-stage process was discussed to illustrate what happened cognitively when an individual received feedback. This process included an evaluation of the 1) perception of feedback; 2) acceptance of feedback; 3) desire to respond; and 4) expected intended response. Ilgen et al. (1979) identified that an interruption could occur at any one of these stages causing the student to inaccurately use feedback to learn an unfamiliar skill. Unfortunately, most students claim to understand the feedback given to them, but do not accurately implement the behavioral change that demonstrates appropriate application of the intended message (Larsen et al., 2013). The correct interpretation of the feedback provider's intended message may help ensure the student's acceptance and application of feedback.

In summary, even though feedback is considered a key strategy used to teach skills and behavior, there is little published research focused on students' interpretation of feedback provided to them. The value of receiving feedback is supported by the literature; however, missing from the growing literature is an examination of the factors that influence how feedback is handled, as well as exploration of why students react and respond differently to feedback affecting the student's ability to apply it as originally intended (Burke, 2009; Jensen & Daniel 2010; Watling et al., 2012).

Problem Statement and Purpose of the Study

Feedback studies focus on the provision and acceptance of feedback; however, it is not known if, or how, students internalize the feedback provided to apply accurately in real-life client situations. Students receiving feedback from supervisors during experiential learning activities may not appropriately respond to the feedback given to them by a supervisor. Since there is a difference between providing feedback and the interpretation of its true message, there is a need to explore the phenomenon of student use of feedback. This includes the exploration of what situations, experiences, and factors influence student interpretation of the feedback provided to them and what meanings they attach to the comments.

The purpose of this study was to explore perceptions of how occupational therapy and occupational therapy assistant students interpreted information received from Level II fieldwork educators and what meanings students attributed to the feedback. Since the experiential learning experiences directly prepare students for clinical practice, educators need to understand how students interpret and make meaning of feedback to apply concepts and skills learned within the classroom.

In response to the identified problem, the following research questions guided the study:

- What are the experiences, thoughts, and feelings of occupational therapy and occupational therapy assistant students while receiving feedback during the Level II fieldwork portion of their education?
- How did occupational therapy and occupational therapy assistant students interpret and make meaning of the feedback received during the Level II fieldwork portion of their education?

METHOD

Research Design

Qualitative phenomenological methodology was used to provide an in-depth examination of the experience of receiving feedback from Level II fieldwork educators and the interpretations made of this experience from the participants' viewpoint. Level II fieldwork experiences provide supervised hands-on experience in delivering occupational therapy services to clients (AOTA, 2012). Institutional Review Board (IRB) approval was received and written informed consent obtained from each participant.

Role of the Researcher

The professional relationship between the researcher and the participant was an instructor/student role when the participant was enrolled in their respective occupational therapy assistant or occupational therapy programs. Ethical concerns about the professional relationship were addressed in three ways. First, only those volunteers who graduated from their program of interests were eligible to participate in the research study to eliminate the power relationship over the participants. In other words, the researcher no longer had any ability to influence grades or completion of the program if the volunteer decided to participate or decline. Second, the IRB and voluntary participants reviewed informed consent forms that included predetermined semi-structured interview questions to determine potential conflicts of interest. Finally, to eliminate misrepresentation, participants reviewed completed interview transcriptions and final manuscript to confirm how quotes were used and how they were interpreted through the development of themes.

Participants

Voluntary participants included occupational therapy assistant and occupational therapy alumni from two southeastern occupational therapy programs who completed and graduated from their programs within six months of the scheduled interviews. The term "alumni" indicated the participant graduated from their respective program, which included the successful completion of the didactic and fieldwork portions of the occupational therapy education. In addition, voluntary participants confirmed they received some sort of feedback during the Level II fieldwork portion of their occupational therapy education including hospital, school-based, and rehabilitation settings.

Procedures and Data Collection

Invitations were sent to a total of 75 occupational therapy and occupational therapy assistant graduates by postal service, text messages, and private messaging via social media sites asking to respond if interested in participating in the study. Selection of eligible participants was based upon the participant's positive response, completion of a Level II fieldwork rotation within six months of the scheduled interview, the ability to attend a web-based or face-to-face interview, and saturation and repetition occurring within the data. A total of nine occupational therapy graduates and 14 occupational therapy assistant graduates (n=23) participated. All participants were informed that they could leave the study at any time.

A purposive selection was used to interview 23 participants to gather data about receiving feedback during an experiential learning opportunity, such as the Level II fieldwork portion of their occupational therapy education. This study occurred in two parts. The occupational therapy assistant participants' data collection occurred in 2013 as part of a dissertation requirement (Rathgeber, 2014); whereas the occupational therapy participants' data collection occurred in 2016 as a follow-up study. These targeted groups could reflect meaningfully on the experience of receiving feedback during their occupational therapy Level II fieldwork rotations. These participants also had the benefit of time and distance to reflect upon the phenomenon since they were interviewed within six months after graduation of their respective programs.

Instrumentation

Since there was nothing known about how students interpret and make meaning of the experience of receiving feedback during the Level II fieldwork portion of an occupational therapy education program, questions were asked regarding the phenomenon using an open-ended interview process. The researcher participated in the study by interviewing the participants. The graduate participation included providing written reflective statements (see Appendix A), as well as participating in a 60-minute private interview session responding to semi-structured and probing questions focused solely on experiences in their Level II fieldwork (see Appendix A). Questions were provided to the participants at least seven days in advance for initial review. This process was chosen to uncover insights of experiences of receiving feedback during Level II fieldwork education and to comment on the impact of that feedback. These one-to-one interviews also provided an opportunity to investigate factors that impacted feedback acceptance and changed recipient behavior. Participants were encouraged to speak openly about the experience of receiving feedback during Level II fieldwork rotations to reveal how they interpreted and used the feedback they received.

Data was collected using face-to-face and web-based synchronous video interviews in a private setting at the convenience of the participant. The interviews were recorded with the participant's permission and transcribed verbatim by an external source to increase validity of the data. Written notes were taken to capture non-verbal cues and language to add more depth to the interview data.

Data Analysis

Reflexive journaling was initiated by the researcher prior to beginning the study to bracket out the researcher's experiences to offset preconceived notions. Bracketing allows a method of reflection to provide self-awareness of the researcher's reactions and reflections, along with the acknowledgement of the researcher and participant relationship to develop strategies to manage potential bias while maintaining objectivity during data collection and analyses (Jeanfreau & Jack, 2010; Munhall, 1994). Strategies suggested by Chan, Fung, and Chien (2013) were followed during the literature review process, as well as the data collection and analysis (see Appendix B). Peer discussion provided feedback of journal entries to identify potential bias and discuss objectivity.

Random fictitious names with a three-digit number were assigned to each corresponding interview transcript to protect the participant's privacy. To further ensure the rigor of analysis, each participant reviewed a draft of the transcribed interview to recheck and verify the information. This process of member checking confirmed that the interpretations of the participant's experiences reflected his or her perspective and provided an accurate interpretation of the data (Patton, 2015).

Data analysis from reflective statements and interview questions was consistent with analysis experts (Miles, Huberman, & Saldana, 2014; Patton, 2015) by using a constant comparative coding process followed by theme development. Verbatim transcripts were compared with notes taken during each interview to include non-verbal expressions of communication. An audit trail was kept of all processes used to develop themes (see Appendix C). Peer review was utilized to check codes while organizing data, ensure saturation, and check development of themes to ensure accurate reflection of the data. Resultant themes of participants' responses were congruent with the body of evidence about how effective feedback should be provided in a clinical learning situation.

RESULTS

Four themes emerged: (a) lack of feedback leads to lack of learning; (b) misunderstood meanings affect the learning process; (c) both extrinsic and intrinsic cues confirm correct application; (d) non-verbal communication affects feedback acceptance, interpretation, and application.

Lack of Feedback Leads to Lack of Learning

This unexpected theme evolved out of the questions intended to explore what it was like to receive feedback; however, many participants focused on what it was like to not receive feedback from their Level II fieldwork educators. Participants reported they experienced overwhelming negative feelings, such as feeling lost, scattered, scared, cautious, disappointed and angry when they did not receive feedback either during or after working with clients in their Level II fieldwork experiences. Further statements from participants provide examples of negative feelings.

...no feedback is worse than negative feedback because you don't know how you are doing. Getting no feedback is not good because you don't know where you stand...I didn't know what my strong or weak areas were. (Participant 4)

You would hate to not know that you did a crappy job because they did not give any feedback. You could think you did great but would not know if they did not give feedback. It would be like an injustice. You may walk away thinking 'that was great, and I did a great job', but...they [supervisor] did not think you did a great job. I would want to know. Just like when you take a test, you want to know if you passed or not. (Participant 8)

There were some instances when I felt like they could have given me more feedback than what I was given. I sometimes felt like they did not have enough time to spend with me to provide that feedback. (Participant 10)

A study conducted by de Beer and Martensson (2015) confirmed that lack of feedback does not support a change in behavior or skills and, therefore, will have a negative impact on the learning process.

Misunderstood Meanings Affect the Learning Process

The question arose by Quinton and Smallbone (2010) that asked if the student actually understood the meaning of the feedback they received so that they may understand the intended message. When participants were asked to reflect upon situations when they made attempts to interpret feedback, they revealed experiences and feelings when misinterpretations occurred that affected feedback in different ways.

A participant experienced a situation when her personality was misinterpreted that may have affected her openness to receiving feedback by others:

My fieldwork educator told me "...be aware... your personality [is] nonchalant [and] can come across as...lazy, but it could be perceived wrong." The meaning I attached to this feedback was that she thought I was lazy and [my fieldwork educator] did not want others to perceive me the same way. I felt that she was afraid that others would not bother to give me feedback if I needed it if they had this perception of me. (Participant 1)

A participant experienced a situation when she misinterpreted the type of treatment her supervisor wanted for a patient, as described by telling the following story:

My supervisor asked me to try to incorporate sensory activities into the child's treatment. After the session, my supervisor told me that I did not follow through with her instructions exactly. I asked if she (the supervisor) was talking about proprioceptive input and she said that she was talking about vestibular. I misunderstood because she was talking about giving input to the patient and my (thoughts) went to proprioceptive right away, and in her mind, it went to vestibular. (Participant 2)

Another participant experienced a situation when she misinterpreted an emotional response by her supervisor:

At the end of the session, my supervisor started crying. What I did not know was that the patient had said something to her that made her upset. Instead, I thought I did something that made her feel like a failure. You tend to be very sensitive during this stressful experience and I automatically felt it was my fault. It wasn't until the next day that she shared that it was the patient who upset her. She never realized that I blamed myself. (Participant 16)

Both Extrinsic and Intrinsic Cues Confirm Correct Application

Participants were asked to talk about how they knew that they correctly applied feedback given to them. Comments from participants gave an in-depth understanding of the perception of correct application of feedback during this hands-on learning during their Level II fieldwork experience by describing both extrinsic and intrinsic indicators.

Participant 4 discussed *extrinsic* indicators to confirm correct application of feedback: “He did a chuckle and told me that he was impressed.” Participant 16 expressed an *extrinsic* indicator when stating, “direct positive feedback is one of the clearest signs that you appropriately applied the feedback.” On the other hand, Participant 6 identified an *intrinsic* indicator when describing confirmation that she applied feedback correctly. She stated, “It was definitely internal because I felt less stressed.”

Finally, participants also interpreted a decrease in the amount of feedback given to confirm they were applying the feedback correctly. Participant 4 stated, “I also took it that if she was not saying anything then I must be doing well, and I must be excelling [at] what I am doing.” Another example is presented below:

I would look over to make sure I was doing the right things before doing it and he would nod his head and say it was good. After, we would walk out of the patient’s room he would sometimes let me know it was much better but would also tell me things I could have done differently. At one point, he would just stand in the corner and let me do everything. Once he was not all around me, I knew I got it and he trusted me. (Participant 6)

Non-Verbal Communication Affects Feedback Acceptance, Interpretation, and Application

Participants were asked to reflect upon what factors affected their ability to accept and accurately interpret the feedback provided to them by their Level II fieldwork educator to apply the feedback as it was originally intended. This final theme focused on identification of factors that affected the acceptance, interpretation, and application of feedback during Level II fieldwork experiences.

The (supervisor’s) tone of voice and attitude...can really deflect people or reel them in. People are more receptive when eye contact is made. I would say whether the feedback is immediate as opposed to trailing off in the distance and bringing it up later...it loses its importance. Furthermore, a downside to feedback can be miscommunication or misinterpreting the true meaning of the feedback whether by (the person’s) tone of voice, eye contact, or details of feedback. (Participant 4)

I think their voice. If they sound like they are attacking you then you are going to get nervous and not take anything in. I think their facial (expression) also affects the interpretation. If they look like they are mad, then it is not good. I definitely think if they talk to you like you are a person and are calm, then I definitely hear it better. (Participant 11)

If I knew my supervisor's body language was good...I felt like I would be receiving good feedback. Even if the feedback was geared towards improvement, I would interpret from them that it was coming from a genuine place. On the flip side, if I felt like my supervisor was stressed out...then I felt like some of their feedback was affected by what was going on with their emotions. This made me question the credibility of some of the things they may have said. (Participant 16)

I was given verbal and non-verbal feedback from everyone.... Having the feeling that we are all working together is a good sign and indicator that things are being done right. If you don't feel like part of the team I would be wondering what I was doing wrong. (Participant 17)

My supervisor would give me feedback throughout the day...it was more conversational with feedback given about what I did and what I could do better. Talking back and forth about the feedback and what it meant to me helped me interpret the feedback. (Participant 21)

DISCUSSION

Individuals use feedback to learn about themselves, to develop insight and perceptions, and reshape behavior to meet the requirements of the professional culture, and without feedback, learners most likely develop less expertise as a clinician (Hoffman, Hill, Homes, & Frietas, 2005; Kaymaz, 2011). Scheerer (2003) supported this idea when sharing comments of occupational therapy students, "they wanted feedback, they valued feedback, and they appreciated feedback" no matter how it was given to support further learning (p. 209). Therefore, it is important to understand what affects the acceptance, interpretation, and application of feedback so that educators may influence the development of clinical skills of their students.

This study explored how participants knew they accepted, interpreted, and applied feedback correctly. This exploration of how students interpreted and made meaning of the experience of receiving feedback during the Level II fieldwork portion of the occupational therapy education program occurred during semi-structured interviews.

The first theme evolved out of the questions intended to explore what it was like to receive feedback; however, an unexpected theme developed when some participants revealed that they did not receive feedback from their supervisors. Several participants stated that learning was accelerated using feedback, whether it was positive or negative, and that no feedback was detrimental to the learning experience. Feedback facilitated the skills needed to become a competent therapist, and participants who did not receive feedback were disappointed.

Furthermore, the second theme identified that feedback acceptance may be affected by misunderstood meanings that require clarification. It is important that students clarify the intended message of the feedback to ensure they are interpreting the feedback in the same manner as it was originally intended. In other words, if a student misunderstood situational cues then the student and the supervisor are not involved in the same

learning process affecting desired behavioral changes. The best learning environment occurs when there is clarification of what meanings were applied to feedback to avoid confusion. Misunderstandings affect the true meaning of feedback provided to students and misdirected intentions may waste valuable time and effort. When students did not understand or interpret the feedback they received it was difficult to reflect or act upon accurate information to improve the ability to learn. Therefore, the shared stories in this theme provide insight into the true intentions of feedback.

While it became obvious through interviewing participants that some participants misinterpreted some meanings of feedback, it was less clear how the participants knew they understood the feedback they received to apply it correctly. Due to misinterpretation of feedback, it was important to explore indicators that cued participants to confirm they understood the feedback given to them by the Level II fieldwork educator. The third theme identified that accurate interpretation was confirmed by both extrinsic (such as verbal and non-verbal communication) and intrinsic (such as the feeling of accomplishment) cues. These cues were important to identify if the student understood the feedback correctly to accurately interpret and apply feedback since they have limited time in supervised experiential settings, such as Level II fieldwork, before graduating from a professional education program.

The final theme identified several factors that influenced acceptance, interpretation and application of feedback, which included:

- ongoing discussion,
- provider's tone of voice while giving feedback,
- ability of both parties to make eye contact,
- provider's body language during the feedback process,
- a sense of professional comradery that occurs when you are part of a team.

However, thematic analysis of this study leads to the identification of two significant factors, one extrinsic and one intrinsic. The extrinsic factor (tone of voice) and the intrinsic factor (feeling part of the therapy team) influenced the acceptance, correct interpretation, and appropriate application of the feedback as it was originally intended. Several factors emerged from this theme; however, the identification of *tone of voice* (encouraging vs. condescending) and *feeling part of the team* influenced participants to accept, interpret, and use the feedback given.

All themes contributed to the participants' ability to apply feedback during their Level II fieldwork learning opportunity to develop clinical skills to meet the needs of their clients; however, the most significant discovery was that the identification of *tone of voice* and *feeling part of the team* influenced participants to accept, interpret, and use the feedback given. When supervisors used an "encouraging" or "understanding" tone of voice then participants reported they tended to accept feedback. However, when supervisors used a "condescending" or "accusatory" tone of voice then participants reported they tended to shut down, therefore, not accepting the message. The feeling of being part of the team also affected some participants' ability to accept feedback. The

perception of being respected as a member of the therapy team influenced the acceptance and use of the feedback provided.

As discussed by Watling et al. (2012), educators may frame experiences in ways that assist with the acceptance, interpretation, and application of feedback. It can be a time-consuming and nearly impossible task to reach out and educate Level II fieldwork educators on the importance and impact of providing purposeful feedback. Therefore, academic programs may consider focusing on educating students to recognize the factors that influence their ability to accept and understand the meaning of the feedback to guide them through the process of applying feedback to these real-life situations. Encouraging student learners during their academic program to understand factors that influence these processes of feedback may improve clinical performance. Academic programs should take these factors into consideration to provide in-class scenarios and simulations prior to beginning experiential learning opportunities. Including objectives of giving and receiving feedback may be considered just as important as the application of traditional hands-on skills using clinical simulation, service learning, and fieldwork opportunities. This may be a productive step toward achieving the important goal of improving receptivity to feedback.

Limitations

Typically, individuals who volunteer to participate in research studies wished for the researcher to understand his or her perceptions (Munhall, 1994). Participants who volunteered want to be helpful and may consent to an interview without realizing they were providing information that may have been exaggerated. This type of limitation was also discussed in a study by Perron et al. (2012). To eliminate this phenomenon, the interviewer strongly advised the participants to share exact experiences of receiving feedback during Level II fieldwork. The interviewer explained to the participants that the study's results would not be useful if they were a distorted perception of what occurred. However, this phenomenon may have limited the participants to speak freely.

A second limitation was the prior contact the researcher/interviewee had with the participants as their instructor. The interviews could have been collected by someone unknown to the participants or collected via de-identified surveys. Another possible limitation was that this study occurred from a retrospective viewpoint that could have affected the accuracy of recall. When a researcher gathers participant viewpoints retrospectively, the description may not be the same as if the participant experienced it firsthand; however, the advantage is that the participant may provide a more detailed description since they were able to reflect upon the experience and include feelings, thoughts, and opinions (Hycner, 1985).

Implications for Education and Research

The findings of this research study have implications for professional practice in clinical professions and further research. Through reflective statements and interviews, occupational therapy and occupational therapy assistant graduates shared stories to help others understand the phenomenon of receiving feedback during their Level II fieldwork experience. Since the results of this study focused on how occupational

therapy and occupational therapy assistant students made meaning of the feedback they received and how they knew they applied it appropriately, a replication of the study should occur with diverse participants, perhaps with a variety of clinical professions that utilized experiential learning activities, like Level II fieldwork education, to facilitate clinical skills and professional behaviors.

This study collected independent data sets of occupational therapy and occupational therapy assistant graduates. Further exploration would provide more information to determine if there was a difference between entry-level doctoral and masters level students, as well as graduate and undergraduate programs. This varying level of education may reveal different perspectives and viewpoints.

Another recommendation for further research is for the study to occur as the feedback occurred. This study occurred from a retrospective viewpoint. When gathering the participant's viewpoint retrospectively, the descriptions may be different from the original experience (Hycner, 1985). An interview of the Level II fieldwork educators and the students would provide more accurate information than only looking at the students' perspective of receiving feedback. To explore both perspectives concurrently would add more insight into the two-way process of feedback.

In addition, further research should focus on the ability to determine if students are prepared and ready to accept feedback in order to change professional behaviors. This study did not address student readiness to accept, interpret, or apply feedback.

The final recommendation for future research is to focus on the factors affecting interpretation of feedback, and to focus on the exploration of the implications of non-verbal communication and its effect on the acceptance of feedback. Several factors emerged from this study; however, the identification of *tone of voice* and *feeling part of the team* influenced participants to accept, interpret, and use the feedback given. Further investigation of non-verbal communication would be of great interest and value to add opportunities for practice within an occupational therapy program curriculum including training of both classroom instructors and fieldwork educators.

CONCLUSION

Fieldwork educators strive to provide useful feedback to students and invest an enormous amount of time and energy to learn strategies to deliver feedback; however, what students do with the feedback once it was given was questioned (Hauer & Kogan, 2012). Studies found that feedback must be accepted (Ryan, Brutus, Greguras, & Hakel, 2000), interpreted (Storch & Wigglesworth, 2010), and ultimately applied to shape skills and behavior to treat clients.

It is important to prepare students to receive feedback as it was intended to improve their ability to develop clinical skills. Ultimately, academic programs do not always have control over how experiential learning supervisors provide feedback but can teach students to focus on the intent of the feedback and disregard the factors that may negatively impact their ability to appropriately accept, interpret, and apply feedback.

Faculty may include role-playing scenarios to prepare students in the classroom or supervised service learning opportunities to practice giving and receiving feedback in an appropriate manner. It is important for students to identify factors that influence acceptance, interpretation, and application of feedback to improve their clinical performance.

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Appendix A

Reflective and Semi-Structured Interview Questions

Reflective Statements: Prior to the interview, the participants provided written reflective statements of feedback experiences to reveal thoughts on the following questions via secured email or postal mail:

- If you could describe what feedback means to you, what would you say?
- What did you like the most and least about receiving feedback during your Level II fieldwork experiences?

Semi-Structured Interview Questions: A prepared list of interview questions provided to the participants in advance to probe into experiences, thoughts, and feelings of what it was like to receive feedback during an experiential learning opportunity. Such questions included:

1. Reflect upon a time you received feedback during your Level II fieldwork experience.
 - What was the purpose of the feedback?
 - What did you expect from your supervisor during the feedback process?
2. One of the things that I am interested in finding out is how receiving feedback makes someone feel during their Level II fieldwork experience.
 - What was it like to receive feedback as a student during your Level II fieldwork experience?
 - How did you respond to the feedback?
3. I am interested in finding out what individuals did with the feedback once they received it from their Level II fieldwork educator(s). Think back of what you did with the feedback when you received it.
 - At the time, how did you interpret the feedback you received?
 - What indicators did you receive that gave you an idea that you applied the feedback correctly?
 - What situations affected the interpretation of feedback?
4. What would you do differently if you were providing feedback to a student who was participating in a Level II fieldwork?

Appendix B

Reflexive Journaling Questions

Journal questions to develop strategies to achieve bracketing (Chan, Fung, & Chien, 2013):

Strategy for Mental Preparation:

- Why am I curious about this topic?
- What do I know about feedback provided during a Level II fieldwork experience?
- What preconceived notions or experiences do I have about students receiving feedback in the classroom and/or fieldwork experience?
- What preconceived notions or experiences do I have about students accepting feedback in the classroom and/or fieldwork experience?
- What preconceived notions or experiences do I have about students applying feedback in the classroom and/or fieldwork experience?

Strategy for Deciding the Scope of the Literature Review:

- What understanding do I have about the topic to justify the proposed research?
- Why do I feel that I have enough literature to support the proposed research?

Strategy for Planning Data Collection:

- What have I done to prepare for interviews?
- How will I capture accurate participant responses to reduce misinterpretation?
- How did I prepare the interview questions to focus on participant responses?
- How will I address the need for clarification or elaboration without influencing or guiding the participant response?

Strategy for Planning Data Analysis:

- How will I ensure accurate participant viewpoints of their interviews?
- How did I avoid distorted codes and themes to represent accurate participant responses?
- Who will serve as external peer auditors to ensure accurate interpretation of the codes and themes?

Appendix C

Audit Trail for Theme 4

Theme	Categories	Representative Quotations
Factors Influencing Application of Feedback	Ongoing Discussion	My supervisor would give me feedback throughout the day...It was more conversational with feedback given about what I did and what I could do better. Talking back and forth about the feedback and what it meant to me helped me interpret the feedback. (Participant 21)
	Provider's Tone of Voice	The (supervisor's) tone of voice and attitude in which things are said can really deflect people or reel them in. (Participant 4)
	Eye Contact	People are more receptive when eye contact is made. (Participant 6)
	Body Language	If I knew my supervisor's body language was good...I felt like I would be receiving good feedback. Even if the feedback was geared towards improvement, I would interpret from them that it was coming from a genuine place. On the flip side, if I felt like my supervisor was stressed out...then I felt like some of their feedback was affected by what was going on with their emotions. This made me question the credibility of some of the things they may have said. (Participant 16)
	Sense of Team Comradery	Having the feeling that we are all working together is a good sign and indicator that things are being done right. If you don't feel like part of the team I would be wondering what I was doing wrong. (Participant 17)