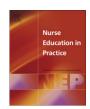
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A step ahead: Teaching undergraduate students to be peer teachers

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ABSTRACT

Nurses have a responsibility to share knowledge with others. However, many are reluctant to undertake teaching, feeling unprepared for the responsibility. With this in mind, a semester-long compulsory core unit was designed and implemented in 2009 to equip final year students with knowledge and skills to enable facilitation of teaching and learning in practice. As part of the summative assessment, third (final) year students taught vital signs in first year skills laboratories. To evaluate the strategy, the Peer Teaching Experience Questionnaire (adapted from Iwasiw and Goldenberg, 1993) was administered to third year students and Clinical Teaching Preference Questionnaire (Iwasiw and Goldenberg, 1993) to first years. Focus groups were conducted with third year volunteers to explore issues in greater detail.

One hundred and five (75%) third year and 112 (52%) first year students completed questionnaires. In addition, 11 third year students participated in a focus group. Overall, third year students reported increased confidence in their knowledge and teaching abilities, reflected on their own learning and found the experience rewarding, acquiring skills they considered would be helpful in graduate years. Many suggested there should be more opportunities for such types of learning and interaction. First year students reported feeling comfortable learning skills with senior peers, as well as being able to learn from their experiences. Overall, both groups recognised strongly that teaching was part of nurses' roles. Crown Copyright © 2010 Published by Elsevier Ltd. All rights reserved.

Introduction

The unit 'Education for Clinical Practice' has been developed at Monash University to assist students to develop skills and heighten their awareness of the role of nurses as teachers for students and other health professionals. Run for the first time in 2009, the compulsory, core unit is offered over one academic semester in the final year of the undergraduate course. It covers a range of teaching and learning theories, types of teaching and learning in nursing, planning, developing and evaluating teaching. As part of the assessment for the unit, students are required deliver skills-based laboratory teaching to between one and three first year students under direct supervision of lecturers. At the Peninsula campus, the chosen skills were temperature, pulse and respiration, or blood pressure measurement. These were chosen by lecturers as they were considered skills that final year students would have consolidated, and teaching of these in the first year unit coincided with the timing for teaching in the final year program. In preparation for their sessions, students were required to develop

Background

Peer teaching uses an approach where students are involved in the teaching of other students and has been intermittently described in nursing education literature over many years. The concept of peer teaching in nursing is not new but it has received little attention over recent years, appearing to have faded from the favour of academics. However, while there has been a decline in nurse education, there has been a growth in this approach in education across other disciplines such as teacher education, as well as a range of health sciences.

Peer-assisted learning

The concept of peer learning has been described by Boud (2001) as "a two-way, reciprocal learning activity" (p.3). Boud argues that this should "involve the sharing of knowledge, ideas and

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teaching plans that included learning objectives to allow them to fully appreciate, and be able to plan and deliver, effective teaching and learning processes as set in unit learning objectives. At the end of semester, final year students re-entered the clinical laboratory to undertake clinical assessments of these skills to close the education loop.

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experience" (p.3) in a manner that is of benefit to both parties. Peerassisted learning has become particularly prominent in medical education over recent years, however, it has been argued that it is under researched (Secomb, 2007) and reported (Ten Cate and Durning, 2007). Ross and Cumming (2005) broadly describe this approach as "any situation where people learn from, or with, others of a similar level of training, background or other shared characteristic." (p.113). These authors suggest many benefits exist to this approach, including reinforcement and revision of learning, provision of feedback, promotion of responsibility, increased selfconfidence, role modelling, developing teaching, communication, appraisal, organisational and team working skills (Ross and Cumming, 2005). In one example of its application, Nestel and Kidd (2005) used peer-assisted learning with third year medical students to develop first year students' communication skills in patient-centred interviews. These authors evaluated the benefits of this approach for the student tutors, finding through subjective data that students primarily developed greater awareness of their skills in facilitating learning, important for effective patient teaching. In their study with first and second year medical students, Lockspeiser et al. (2008) concluded that peer teaching opportunities were valued by junior students as they provided access to learners who had recent experience in learning the relevant material, and senior students understood issues they were dealing with.

It has been recognised that peer learning can be both formal and informal in nature (Topping, 2005). Roberts (2010) asserts that students learn from the experiences of their peers, referring to the concept of vicarious learning, whereby listening and reflecting on the experience of others leads to learning. In relation to their clinical learning, students also learn survival skills and 'unwritten rules' from their peers (Roberts, 2008) through their own community in which only other students understand issues and have the potential to help (Roberts, 2009). Senior peers can provide junior students with emotional support and reassurance in a context that allows for asking questions and expressing uncertainty (Christianson and Bell, 2010).

Peer teaching in nursing

In the late 1970s and 1980s, a number of authors described the application of peer teaching in nursing as an approach to teaching clinical skills (Burnside, 1971; Costello, 1989). Iwasiw and Goldenberg (1993) evaluated the use of peer teaching in a baccalaureate nursing course using a Clinical Teaching Preference Questionnaire (CTPQ). These authors used student peers to supervise others at the same level performing surgical dressing. The authors found a significant increase in students' skill level when they were peer taught. Students acting as peer teachers had more opportunities for modelling behaviours and were found to reinforce their own previous learning.

Recently, studies around peer teaching and learning have resurfaced in the nursing literature using different types of approaches. Loke and Chow (2007) used peer tutoring with small numbers of third and second year students in a maternity and child care unit, as an adjunct to regular, scheduled classes. The qualitative findings revealed the experience enhanced reflection and on learning, critical thinking and cooperative learning for both groups, as well as personal and social benefits. However, the authors suggested that mismatches between teachers and learners may be problematic.

Kurtz et al. (2010) used an approach requiring students to deliver a small laboratory presentation to two or three peers followed by a skills demonstration to the class. Students felt the

experience assisted to prepare them to teach, develop their roles and increased confidence in their skills.

Other studies have described the application of peer teaching and learning in clinical practice settings. In one study, Bos (1998) used junior students to provide peer leadership for a small group of students in clinical placements. Findings suggested that the opportunity allowed students to enhance their patient care prioritisation, critical thinking and clinical skills. Sprengel and Job (2004) paired senior and junior students entering their first clinical placement, settings that have been known to be anxietyproducing for new nursing students (Admi, 1997; Cooke, 1996). Their findings revealed mutual benefits such as reduced anxiety and increased self-confidence for the novice, and enhanced confidence for the senior student. Similarly, Christianson and Bell (2010) developed peer learning partnerships whereby third year students provided learning support for first years in clinical practice. Junior students reported feeling less isolated and better able to cope with challenges arising, while senior students demonstrated enhanced reflection on, and confidence in, their practice.

It has been suggested that peer teaching and learning offers a range of potential benefits for nursing and midwifery education. In the clinical laboratory, skills are often taught by one or two academic staff with a group of up to 30 students. Within class time constraints, it may be difficult to guide and supervise all students' skills practice. Utilising peer teachers in these learning situations, students learning new skills can be closely guided and supervised through their skills practice with a potential for better preparation on entering clinical placements in health care settings with live patients.

Teaching has been identified by the Australian Nursing and Midwifery Council (2008) as a core competency for registered nurses. However, few educational programs offer students opportunities to learn and develop their skills to be effective facilitators of learning. Providing students with opportunities to teach others may promote a sense of the importance of facilitating learning for more junior nurses, encouraging a professional culture that promotes the development of upcoming, future registered nurses.

The study

This study sought to evaluate the effectiveness of peer teaching experiences in the unit Education for Clinical Practice from the perspectives of both junior and senior students.

Methods

The Clinical Teaching Preference Questionnaire (CTPQ) (Iwasiw and Goldenberg, 1993) was identified as a validated and applicable tool by which to collect data for evaluating the peer learning and teaching exercise. The tool, which collects perspectives on peer teaching experiences, was used for first year students. This tool consists of ten statements with five-point Likert scale ranging from strongly agree (1) to strongly disagree (5). No suitable existing tool for evaluating the experience of the peer teachers (third year students) could be located, so it was decided to adapt Iwasiw and Goldenberg, (1993) existing tool. The adapted tool was titled the Peer Teaching Experience Questionnaire (PTEQ). One common statement was added to both questionnaires, that being: 'Teaching is an important role for nurses'. Demographic data also sought in both questionnaires included: age, gender, prior tertiary study, and experience either teaching peers or being taught by peers. Finally, an open-ended section was provided to allow students to elaborate on their peer teaching/learning experience if they chose.

Prior to collecting data, ethical approval to undertake the project was obtained from the relevant university human ethics

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