

Near Peer Teaching

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Practice Educational Profile - Sunlight Group Practice, Wirral

Extended training practice, multi-level learners

Student doctors

PA students, paramedic students, nursing students

F1 – ST3 Doctors



Introducing you

Training practice?

Hoping to get out of session.....

- To explore the concept of peer/near-peer teaching within primary care, linking educational theory to practice
- To discuss the benefits and potential challenges when utilising near peer clinical trainees to teach junior learners
- To develop practical strategies to develop trainees' identity as the clinical teacher/ NPT

Learning to teach/present

Doctors are frequently required to present information in formal and informal situations. Part of the doctor's role is to educate others, including patients.

Training in this area should include:

- basic adult learning theory,
- designing a teaching session,
- the 'teaching toolbox'
 - teaching in the clinical setting
 - lecture – including the use of slides
 - small group tutorial/PBL
 - open discussion
 - teaching a practical skill
 - creating a poster/infographic
 - online/remote teaching

FPC 10

Sharing knowledge

As a GP you have a role in sharing knowledge with others. This may include formal or informal teaching, mentoring, supervising colleagues and peers, and education in the wider community. Underpinning this is the need for better patient care. Important principles include:

- Understanding that teaching other people involves more than imparting information
- The difference between clinical and educational supervision and the different competences required in the two roles
- Being prepared, as a doctor, to act as an educator and learner within your local community
- Approaches to effectively teach and mentor others within a team
- How to engage those you are teaching in a dialogue about their values and goals
- Techniques to adjust your own teaching style to suit the individual as well the subject, being aware that not every individual will learn in the same way
- How to give and receive effective feedback from individuals or groups, following the principles described in the General Medical Council's Good Medical Practice
- Understanding of information governance, intellectual property, legal, privacy and security issues when sharing knowledge (including via online and social media channels), particularly when this involves other people's work or identifiable information about individuals.

- Evaluation from 179 ST3 course participants.
- Only 23% of ST3s agreed that teaching formed one of their roles
- 32% had discussed teaching development with their trainer
- 13% agreed their trainer provided feedback on teaching skills
- 58% felt that they have the clinical knowledge to teach (34% neutral, 8% disagree)

Trainees who had previously discussed teaching development with their trainer were more likely, than those who had not, to:

- feel teaching was one of their own key roles
- feel teaching positively impacted on their clinical work
- feel comfortable and confident in teaching
- understand what was expected re teaching skill development
- ~75% of trainees stated they would have preferred the course to have been delivered earlier in their training (many suggesting the start of ST2 being ideal)



Benefits to learners

- Value trainee delivered teaching more than professionals
- Students view trainees as more approachable than GPs - not in a position of authority
- Observe role models of professional behavior
- Gain in knowledge
- NPT better able to understand the needs of their tutees and so deliver teaching at an appropriately matched level



Benefits to near-peer tutor

- Teaching others is a strong driver of the trainee doctor's own learning and professional development
- Helps identify gaps in knowledge and thus personal learning needs
- Improve overall job satisfaction
- Encourages self-reflection via self or tutee evaluation
- Enhanced comm skills has direct patient impact

- Early engagement promoting lifelong culture of teaching
- Transferable skills in practice
- Personal development and career opportunities

Benefits to supervisor / institution

- May relieve an additional source of professional stress
- Workforce wellbeing
- Improve students' perception of a primary care through insight into training programs
- Developing a distributed teaching workforce
- Enhanced learning through having multiple learners at different career stages interacting in a 'community of education'



- Learning adversely affected by negative role modelling effects
- Managing concerns in content / conflicts and contradictions
- Focus of learning encounters on assessment vs overall outcomes
- Feeling 'short-changed', transactional education



- Lack of pedagogical expertise may impact adversely on NPT's
- teaching abilities
- Mismatch between interest in teaching vs capability
- Conflict in roles between that of learner and teacher of others
- Failure to see benefits
- Teaching seen as a distraction / burden
- Workplace stress

- Concerns about trainee's ability or capacity to take on a teaching role
- Failure to offer structured support
- No time/space to teach
- Opportunities to be observed and receive feedback
- Hidden curricular effects
- Mismatch - value and reward
- Trainees known to model behaviours of their supervisor



What do we recommend?

Foundation doctors can be involved in teaching, but it is only in rare circumstances appropriate for a student doctor to shadow a clinic led by Foundation doctors.

Home visits should not be supervised by trainees of any level.

GPST 1-2 can be involved in teaching, student doctors may shadow clinics but only after discussion with the STs.

GPST3, student doctors may shadow clinics. Time slots blocked for catch up highly recommended.

Student doctors must not be supervised by foundation or GPST doctors when seeing patients independently.



Breakout Groups

TASK

1. How can we help clinical trainees overcome these challenges and develop their role as NPTs
2. What is needed to help supervisors/ surgeries overcome perceived challenges?
3. Ideas for involving Foundation and GPSTs in undergraduate education



Ideas; Foundation and GPST

- Near peer mentors, meet and greet, induction process
- Student portfolio planning meetings
- Protected time for case-based discussion
- Curriculum development, plan, deliver, feedback
- Topic specific teaching
- Teaching outside curriculum mandatory experiences

All the previous slides and....

- Shadowing clinics, appropriate time blocked
- Leadership - 'Journal Club', educational lunchtime timetable
- Topic specific tutorials AKT aligned, general practice management, statistics
- ST3 Mandatory curriculum experience teaching, 'admin'
- QIA/P - Medical education toolkits, 'barrier' questionnaire for staff
- Simulation training - Role play practice, RCA training, OSCE examination

PPM and PDP

- Encourage trainee to establish teaching goals
- Implement trainee as teacher initiatives
- Observe others teaching
- Observe and debrief teaching encounters
- Gain feedback from students – multisource
- Foster positive teaching community, deliberate role-modelling – values, beliefs, actions



- LEO Toolkit for education
- FACE - can sign up on [LEO](#)
- Application for [Assistant Clinical Teacher \(ACT\)](#)
- GP Plus post ST2
- Teaching toolkit for trainees [Guide,for,Trainees,on,teaching,Students,22-23.pdf \(liverpool.ac.uk\)](#)



TASK

5 minutes to write an Action Plan for NPT in your practice

Consider 3 challenges personal to you and your trainees/practice and how you may overcome them

Questions?

