The Peer Assisted Learning Scheme
Providing opportunities to transition from student to tutor

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Background

One of the outcomes of Tomorrow’s Doctors 2009, the General Medical Council’s guiding document for medical schools that sets the standards required of students in order to graduate, requires the doctor as a professional to be able to reflect, learn and teach others. Outcome 21 states that a doctor is required to function effectively as a mentor and teacher. However the opportunities for an undergraduate to gain experience of teaching are limited. Peer tutoring affords the participating undergraduate medic this opportunity to transition from a tutor to a student. Concerns have also been raised within the post-graduate community that the anatomy knowledge possessed by a medical student does not sufficiently prepare them for the role of a junior doctor. Evidence suggests that peer teaching may improve students’ understanding of anatomy, but the impact of peer teaching on the peer tutor’s confidence with anatomical knowledge remains a little investigated topic.

Methods

We introduced a pilot of PALS (Peer Assisted learning Scheme) into practical anatomy classes in the MBChB course at Aberdeen University. 25 final year medical students were recruited to act as peer-tutors in classes for Year 2 and Year 3 medical students. Existing teaching staff remained in class and a maximum of two tutors per class acted as an additional resource. Peer-tutors’ confidence with anatomical knowledge was assessed through two questionnaires, completed before and after the PALS sessions.

Ethical approval for this study was obtained from the College Ethical Review Board

Results

12 peer tutors delivered 1 two-hour session, 11 delivered 2 sessions and 2 delivered more than 3 sessions. On average, they devoted between 1 – 2 hours preparing for a session and delivered 1 – 2 two-hour sessions each. The number of peer tutors feeling confident in delivering a teaching session to their junior peers rose from 15/25 (60%) before the session to 25/25 (100%) after the session. The number feeling confident in delivering an anatomy teaching session rose from 24% (6/25) before to 68% (17/25) after the session. Similarly, the number who felt that their anatomy knowledge was adequate for the Foundation Programme rose from 44% (11/25) before to 68% (17/25) after. Almost all students (212/25: 84%) felt that preparing for the PALS sessions gave them a deeper understanding of anatomical concepts.

Conclusion

Our study demonstrates that making the transition from a student to a peer tutor led to significant gains in: anatomical knowledge, concepts and confidence in delivering them following the peer-teaching sessions. The data here supports the often (mis-)quoted, view of the Roman philosopher Seneca that “by teaching we are learning”, which is the mainstay of the peer-led teaching approach. It is particularly relevant in this context, as it shows a simple way in which to redress the perceived lack of anatomical knowledge in junior doctors, by providing opportunities for peer teaching in the pre-clinical course, which they would traditionally, no longer have access to. It is clear from both our studies and those of others that there would be simultaneous gains for those being taught.

References: