



PTAS Project Report (for SMALL PROJECT GRANTS)

Project Title:

Promoting a learning community through peer feedback

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Grant recipients are expected to submit a brief report at the conclusion of their project which outlines briefly the following : nature of work completed; outcomes; benefits to student learning/student experience; dissemination activity (where relevant – actual and planned) and how the activity could inform future work or be transferred to other subject areas in the University. The brief report will be published on the IAD web pages.

Brief Report (maximum 500 words)

What did you do? We investigated the role of peer feedback in the workplace, specifically when pairs of medical students practise basic clinical skills in hospitals and clinics. While peer feedback is purported to have many benefits, there may be risks and drawbacks to its use. We used grounded theory to create a model of student interaction to help understand the benefits and barriers.

What did you find out? While students frequently take part in peer feedback in both formal and informal ways, our model identifies how students make decisions that affect the frequency and depth of this interaction. Students are constantly negotiating 3 main forces – the expected educational benefits, the social ‘risks’ of taking part (such as causing embarrassment) and the social rewards to themselves and others (building friendship and helping the group). These are in potential tension, and the way that students balance the tensions affects behaviour. Strong emphasis on social risk, for example, may lead to avoidance behaviour or just surface level critique of a peer’s performance. Conversely, a strong expectation of educational benefit from participation - or a commitment to the benefitting the group – will promote deeper engagement.

How did you disseminate your findings? This has been presented at national and international educational conferences (ASME 2017, AMEE 2017) and at the University of Edinburgh Centre for Science Education Assessment Conference in February 2018. It is being incorporated into the lead author’s thesis, and will be submitted for publication. We are also writing brief guidance for other UoE staff in the form of a one-page document summarising key messages and how they can be incorporated into course design.

What have been the benefits to student learning? The 3 factors identified above are amenable to manipulation to help promote peer feedback. Social risk – the main barrier to effective feedback – can be reduced by building longitudinal relationships between students and training them in techniques to deliver feedback sensitively. Expected educational gain can be boosted by teaching



about the published benefits of peer feedback and providing tools to make interactions more effective. Social reward can be boosted by reducing structural competition in summative assessment (as exists in the medical profession) and promoting community building projects.

As an example of how these lessons can be applied, we have implemented a programme of peer feedback called Peer Practice where students practise clinical history taking and examination in pairs in hospital settings. The Peer Practice tools (mobile app and structured forms) align to summative assessment goals so should promote expected educational gain. The project runs over a semester in groups that know each other well (linking to Social Reward) and the forms provide 'safe' methods of critique through simple checklists. This and the routine/formative nature of Peer Practice should mitigate the Social Risks of participation. Initial data from this project show it to be successful, and we have some evidence that it has increased enthusiasm for peer learning.

How could these benefits be extended to other parts of the university? These lessons could be adopted by other departments where peer feedback is a core skill, particularly where the use of feedback in the workplace is relevant e.g. other science educators, veterinary education, architecture, and business or legal attachments.

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