

Peer Assisted Learning

When two become one

Introduction

In a healthcare environment ever conscious of growing demand and resourcing, there is increasing interest in supervision models that increase efficiency in providing student placements without compromising learning outcomes. Peer-assisted Learning (PAL) facilitates the reciprocal development of knowledge and skills between two students with a focus on collaborative decision making and shared reflection and feedback processes. PAL supports organisations to simultaneously host two students with a single supervisor within one allocated placement period.

Aims

This evaluation aimed to identify if the use of a PAL supervision model (2 students:1 supervisor) for dietetic students on their first five-week clinical placement could support equivalent learning experiences and development of competence when compared to the traditional dietetic supervision model (1 student:1 supervisor).

Methods

Implementation and evaluation of the PAL supervision model took place over four years.

- 2018**
 - Stakeholder engagement including meetings with university partners, student supervisors, and other allied health clinical educators with experience in PAL
 - Resources to support PAL identified from internal and external clinical education collaborators
 - Targeted PAL training for supervisor champions
 - Adaptation of written resources for dietetic students and supervisors
 - First PAL placement hosted
- 2019**
 - PAL placement evaluated via student survey and supervisor focus group
 - Greater involvement of the Clinical Educator (CE) in setting up PAL student partnerships in the first 2 weeks of placement incorporated into PAL model
 - Revision of the PAL role statements to suit the CHS learning environment
- 2020**
 - Revised PAL model implemented with supervisor champions
 - Placements evaluated via anonymous student and supervisor surveys
- 2021**
 - PAL fully embedded for all first clinical placement students

	PRIMARY (Attends each patient)	ASSISTANT (Attends each patient)	SUPERVISOR (Attends each patient)
Team Allocation	TEAM LEADER (Student to rotate in the role each day). Provides patient list and assigns primary and assistant roles.		Supervisor to provide list of suitable patients.
Data Collection	Progress notes: - Clinical notes (medications and communications with relevant staff (Nurses, medical team))	Responsible for: - Food diary, Weight, Oils, BGLs, Bloods, 15 Energy, fluid charts	Supervisor may be required at this point depending on level of independence.
Patient Interview	Interview self and colleague. Discuss with patient: - Medical history, diet through PICO. - Ask patient any extra questions which might help clarify patient level of understanding.	Take notes, review diet history and make calculations. Check progress at end of interview. Review if anything missed.	Supervisor may be required at this point depending on level of independence.
Plan	Communicate with supervisor. Opportunity to reflect and provide feedback.	Calculate EIRs, BMRs, calculate weights. Analyse diet vs with ready. Provides feedback for the plan. Assist with the PICO.	Supervisor may be required at this point depending on level of independence. Supervisor is not available to assist with plan once completed.
Implement plan of care	Communicate with supervisor (primary leading the conversation) to check assessment and plan are particularly aimed at addressing individual learning goals.	Communicate with supervisor. Opportunity to reflect and provide feedback.	Supervisor may be required at this point depending on level of independence.
Check Entry	Yes	No	Supervisor to approach with intervention.
Signs & Admin	Yes	No	Signatures to be required on feedback.

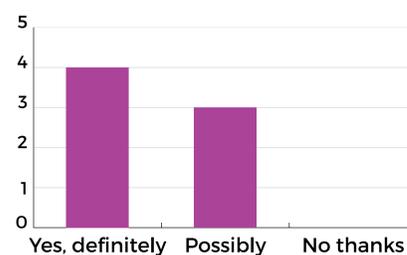
Results

An increase in PAL placements has been seen over the implementation period. All students in PAL models developed their dietetic competence over the five-week placement duration.

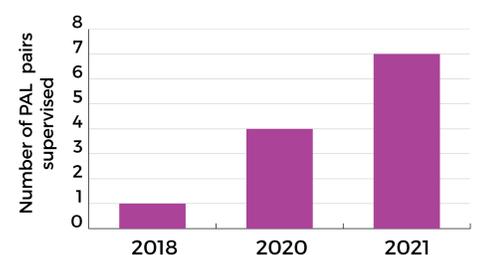
Evaluation from students, supervisors, and CE, support the benefits and improvements to the student learning experience in a PAL model compared to traditional model for first clinical placement students. Students experienced greater volume and quality of feedback and were able to demonstrate specific competency standards relating to peer mentoring and provision of feedback. Students were more likely to become autonomous/independent with tasks when actively supporting each other's learning.

Supervisors reported enhanced satisfaction with PAL model compared with the traditional model. For example, they were more comfortable encouraging greater independence, and greater efficiency of conversations as students collaborated with each other prior to approaching supervisor for patient briefing. The PAL model was most successful when clear expectations were agreed upon from the outset and when a high level of professionalism and investment was demonstrated by all parties. All PAL supervisors expressed a desire to continue using this model for subsequent placements (n=4). An additional three supervisors were open to exploring the PAL model for future student placements.

Would you provide supervision in a PAL model?



Expansion of PAL model in Nutrition Department



“When I first learnt I would be part of this type of learning model, I was uncertain and concerned that it would impact my progression. However, my experience in the PAL model was an extremely positive one. My partner and I had different strengths...and we helped one another in collaboration with our supervisors to improve and grow in areas of weakness. On reflection, I feel learnt just as much if not more...as I would have independently”.

“It was great to be in this model, especially for ICM 1. My peer and I were able to discuss things and reflect together, so the initial experiences were not so daunting. It was great that as we progressed and got more comfortable with our skills, the PAL model was flexible to adapt with our growing independence”.

Conclusion

All stakeholders found benefits in the PAL model. Some learnings were gained from setting clear expectations of the student pair, while allowing some flexibility for each pairing in the later parts of the placement.

Significance

The PAL model has been fully embedded for all first clinical placements in the 2021 student program due to its positive evaluation from supervisors and students. The PAL model is an effective way of increasing the number of dietetic student placements, while maintaining quality learning experiences for all involved.

Acknowledgements

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