

# A COMPARISON OF STUDENT PERCEPTIONS OF PEER TEACHING BY NICE CHAMPIONS WHEN DELIVERED ONLINE VERSUS FACE-TO-FACE

## Background

A recent review has found that peer teaching is an underutilized resource within pharmacy education despite documented benefits. These benefits include: <sup>1</sup>

- reinforcing taught material,
- enhancing student motivation ,and
- preparing students for their role as educators when they qualify as pharmacists.

Peer teaching is also in keeping with the General Pharmaceutical Council’s recommendations that students ‘support the learning and development of others.’<sup>2</sup> The School of Pharmacy at Queen’s University Belfast has been partnered with the NICE Student Champion Scheme since 2011.<sup>3</sup> Student Champions are trained by NICE on how to use the NICE Evidence Search tool and then cascade this training to other students as peer teachers. Prior to the Covid-19 pandemic the cascade training was face-to-face, however, it was delivered online in 2020 .

## Study Objectives

To compare student perceptions of being taught by their peers online versus face-to-face.

## Methods

Student Champions from both cohorts were trained on how to use the Evidence Search by NICE and then delivered onward cascade training to their peers, in small groups, using worked examples. Following ethical approval, a paper questionnaire was distributed to year-3 MPharm students (2020 cohort, n= 94) assessing their opinions of being trained via Microsoft Teams® on the NICE Evidence Search by their peers. Answers were compared to those provided in a similar questionnaire distributed the previous year, (2019 cohort, n=88), who were trained face-to-face, using the Mann-Whitney U test ( $p \leq 0.05$ ).

## Results

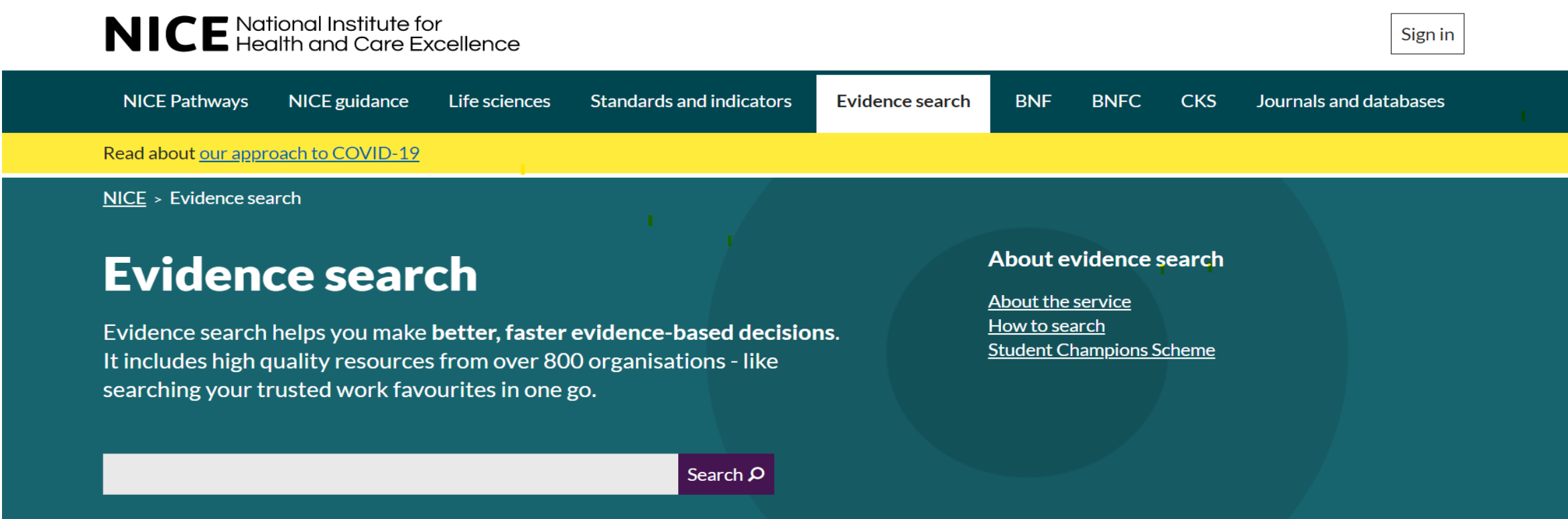
- Statistically significant differences were found between cohorts rating of workshop enjoyment and being a beneficial use of time (Table 1).
- Students were in favour of face-to-face teaching.
- The 2020 cohort were more strongly in agreement with statements suggesting the training should occur earlier in the curriculum.

**Table 1: Statements where statistically significant differences occurred in mean Likert scores between the 2020 (online teaching) versus the 2019 (face-to-face teaching) cohorts**

Statement	*Mean Likert score 2019 (±SD)	*Mean Likert score 2020 (±SD)	P value
I found the workshop enjoyable	4.03±0.73 (n=68)	3.65±0.88 (n=91)	0.01
I think that it was necessary for the workshop to be compulsory	3.96±0.93 (n=68)	3.45±1.13 (n=91)	0.008
I would have attended the workshop even if it had been optional	3.68±1.19 (n=67)	3.16±1.13 (n=91)	0.002
The workshops were timetabled for an appropriate length of time	4.37±0.62 (n=68)	4.02±0.93 (n=91)	0.041
The workshop was a beneficial use of my time	4.26±0.58 (n=68)	3.67±1.01 (n=91)	<0.001
Level 3 is the most beneficial year to receive this training	4.04±0.93 (n=68)	3.30±1.17 (n=91)	<0.001
Having knowledge of NICE Evidence Search tool in Level 1 and Level 2 would have been useful	3.43±1.05 (n=68)	3.75±1.08 (n=91)	0.047
I will use the NICE Evidence Search tool when I am qualified as a pharmacist	4.44±0.76 (n=68)	4.08±1.04 (n=90)	0.048
The peer teachers were easy to understand	4.46±0.74 (n=68)	4.18±0.85 (n=91)	0.032
The peer teachers made the workshop an interesting and enjoyable experience	4.25±0.85 (n=68)	4.01±0.82 (n=91)	0.049
I feel it would be useful to incorporate more peer teaching into the pharmacy degree programme	3.85±0.86 (n=68)	3.27±1.18 (n=91)	0.003

### KEY:

- 1 is strongly disagree with, and 5 is strongly agree with the statement.
- SD: Standard Deviation
- n = number of students who answered each question. Total number of respondents in 2019 cohort was 68 and in 2020 cohort was 91.



## Results (continued)

- Although the 2020 cohort would have preferred the peer teaching to be face-to-face, there was agreement with the following statements:

*‘I thought the peer teaching worked well in a virtual environment’*

*‘I found it easy to ask questions and to interact in a virtual environment’*

- When asked for free text comments on their views on peer teaching, in general, the 2020 cohort made suggestions around incorporating more peer teaching within the MPharm degree, alongside training to prepare for this role:

*‘Have them more often’*

*‘Tips and skills to prepare students for peer teaching’*

- When asked for comments on how the peer teaching could be improved, the 2020 cohort made suggestions around improving interactivity and having face-to-face training:

*‘More involvement would be great’*

*‘In person would be good’, ‘face-to-face workshops perhaps’*

## Conclusion

There is scope to add more peer teaching to the MPharm degree, with a preference for this to be face-to-face. Should online training be mandatory, there is potential to explore how it could be made more interesting and enjoyable for students.

## References

1. Aburahma, MH and Mohamed, HM. Peer teaching as an educational tool in Pharmacy schools; fruitful or futile. Curr Pharm Teach Learn 2017; 9: 1170-9.
2. General Pharmaceutical Council (2021). Standards for initial education and training of pharmacists. Available at: <https://www.pharmacyregulation.org/sites/default/files/document/standards-for-the-initial-education-and-training-of-pharmacists-january-2021.pdf> Accessed 02 September, 2021
3. NICE (2021). NICE Student Champions. <https://www.nice.org.uk/get-involved/student-champions> accessed 02 September 2021