Impact of Peer-Assisted Learning with Standardized Patients in an Undergraduate Nursing Course

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Disclosure Statement

- Dorie Lynn Weaver, DNP, APRN-BC, CNE: Francis Marion University, Florence, SC; no conflicts of interest
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Objectives

- Elaborate the use of peer-assisted learning (PAL) in nursing.
- Discuss the use of PAL with two levels prelicensure nursing students.
- Explain the feedback provided by the first-semester junior level students who were in the role of student learners.
- Discuss the feedback provided by the second-semester junior level students who served as standardized patients and student teachers.
Peer-assisted learning (PAL) is a growing area of research in nursing education.

Through PAL, students are involved in both the teaching and learning process (Williams & Reddy, 2016).

This collaborative educational strategy provides positive benefits for both the student learners and student teachers.

Because nurses provide patient education and engage in mentoring, teaching is an important component of their professional role (Irvine, Williams, & McKenna, 2017).
In prelicensure nursing programs, peer-assisted learning (PAL) has been incorporated with standardized patients (SPs).

Through SP encounters, students experience real-life scenarios in a nonthreatening environment.

This is an innovative and interactive way to evaluate the health assessment skills of nursing students (Sarmasoglu, Dinç, & Elçin, 2016).
Debriefing is an invaluable part of the process.

In one study, students’ communication skills were enhanced through the use of SPs (Sideras et al., 2013).

In other research, students provided positive feedback about SP experiences in which higher-level nursing students served the role of SPs for first-semester nursing students (Bryant, 2017; Owen & Ward-Smith, 2014).
The study was conducted within a Bachelorette nursing program.

Participants included:
- 62 first-semester junior students enrolled in the required Health and Physical Assessment Course
- 8 volunteer second-semester junior students

Approval was received from the University’s Institutional Review Board.
Methods (2 of 4)

- The simulated experiences were implemented in rooms resembling a realistic clinical environment.
- Students performed their Objective Structured Clinical Examinations (OSCEs) on a randomly chosen SP.
- The OSCEs were not graded and were utilized as a learning tool/resource for students to refine their assessment skills.
There were 6 different scenarios for the focused assessments:
- Chest Pain
- Cough
- Heartburn
- Palpitations
- Shortness of Breath
- Vomiting

Each first-semester junior student was randomly assigned to 1 of the 8-minute scenarios.
Methods (4 of 4)

- After each scenario, the SPs used 5 minutes to provide feedback and answer questions.
- Each student completed an anonymous online survey immediately following the experience and 6-weeks post experience.
- The survey was adapted with permission from the instrument developer Owen and Ward-Smith (2014).
- The survey consisted of 10 items rated on a 5-point Likert scale
  - (1 = strongly agree and 5 = strongly disagree).
- In addition, 4 open-ended questions were included to collect qualitative data.
Results (1 of 5)

- Of the 70 students, all completed the survey.
- The majority of participants were female (84.3%) and white/Caucasian (60.0%).
- Most of the participants were between the ages of 18 and 25 years of age (78.6%).
- The overall mean score on the ten survey questions was 2.3 out of 4.0.
- 67.5% of students whose responses were in the agree or strongly agree categories.
The mean and percent score of student’s perceptions regarding their participation in the near-peer simulation experience

<table>
<thead>
<tr>
<th>Perception Questions</th>
<th>Immediate post-test (PT1, n =70)</th>
<th>Six-week post-test (PT2, n =56)</th>
</tr>
</thead>
<tbody>
<tr>
<td>I understood the purpose and objectives of the simulation.</td>
<td>2.3</td>
<td>2.2</td>
</tr>
<tr>
<td>The scenario resembled real life.</td>
<td>2.3</td>
<td>2.3</td>
</tr>
<tr>
<td>The simulation provided a variety of ways to learn.</td>
<td>2.3</td>
<td>2.1</td>
</tr>
<tr>
<td>I worked with peers during the simulation.</td>
<td>2.5</td>
<td>2.3</td>
</tr>
<tr>
<td>The simulation helped me to prioritize my nursing care.</td>
<td>2.3</td>
<td>2.3</td>
</tr>
<tr>
<td>Debriefing was helpful as a learning activity.</td>
<td>2.3</td>
<td>2.2</td>
</tr>
<tr>
<td>I was able to participate in the debriefing.</td>
<td>2.3</td>
<td>2.2</td>
</tr>
<tr>
<td>The feedback from peers was constructive.</td>
<td>2.3</td>
<td>2.3</td>
</tr>
<tr>
<td>The simulation helped me to better care for patients.</td>
<td>2.3</td>
<td>2.2</td>
</tr>
<tr>
<td>The simulation made me feel more confident in caring for patients.</td>
<td>2.4</td>
<td>2.2</td>
</tr>
<tr>
<td><strong>SUMMARY</strong></td>
<td><strong>2.3</strong></td>
<td><strong>2.2</strong></td>
</tr>
</tbody>
</table>
“How did you feel about working with nursing students who were at a different level during this simulation experience?”

(n=66 students)
Some participants reported feeling “intimidated” and “nervous.”

Students felt it was valuable having peers as SPs because they understand the content taught in prior courses.

One of students who served as an SP commented:

- “Critiquing students made me think about what they should have done differently.”
- “It gave me the opportunity to teach some of the skills I learned in my own clinical experience.”
The most useful aspect of the experience was the feedback provided by the peer SPs (n=67):

“Talking with the students immediately after the exam and having an open dialogue contributed to [my] learning and for conducting the exam.”

The short time allowed for the scenario (8 minutes) was the least useful aspect of the project.

Students were assigned to only one scenario, so some students felt that they needed to practice with multiple scenarios (n=57).
Limitations

- Scenario time was too brief.
- Study was conducted over a single semester.
- Unknown if PAL will benefit and transfer within the actual clinical setting.
- The participants were from 1 nursing program.
- The study lacked a comparison or control group for assessment of impact.
- Group debriefing was not included.
- No grade was issued for performance.
Conclusion

Benefits of PAL:

- Opportunities to provide teaching to lower-level students.
- Students obtained peer feedback on their health assessment skills.
- Encouraged improved collaboration among different levels of nursing students.

Because the second-semester junior nursing students had experienced the first semester of the nursing program, their feedback was perceived as supportive and genuine.

PAL is an innovative teaching strategy with benefits to student learners and student teachers.

There is a need for further research on this topic.
Questions??


