





THE VALUE OF PEER OBSERVATION BETWEEN HEALTHCARE PROFESSIONALS IN SOUTH EAST ACUTE TRUST

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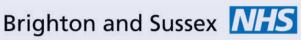
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Joint Collaboration - BSUH and School of Pharmacy University of Brighton

University Hospitals

NHS Trust







Health Education Kent, Surrey and Sussex



Project Drivers

- Ensure the Trust has a standard approach to Quality Assurance & Governance of Education
- PGCert Ed Peer Observation & Reflection mandatory
- HEE Quality Framework
- HEE Personal Development Framework
- Learning from other HCP
- Re-Validation
- Educational Appraisal





HEE Quality Framework 2016/17

HEE's Quality Strategy and associated multi-professional Quality Framework set out how HEE will measure, recognise and improve quality in the education and training environment.

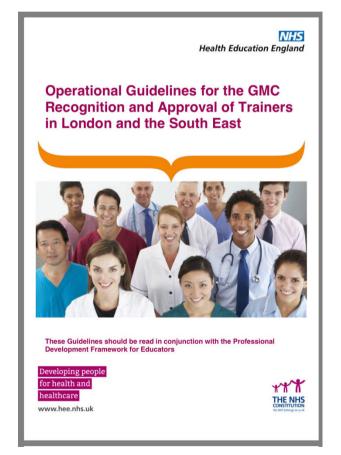


Theme 4: Supporting & Empowering Educators

- HEE -S4.3: Educator performance is assessed through appraisals or appropriate mechanisms with constructive feedback and support provided for role development and progression
- **GMC** 4.1:Educators are selected, inducted, trained and appraised to reflect their education and training responsibilities.



Professional Development Framework



Theme 7: Continuing Professional Development as an Educator

The excellent educator

 Takes action to improve own practice on the basis of feedback received, e.g. appraisal, peer reviews

Research Collaboration with University of Brighton

- Opportunities for Joint research with local HEI
- Examples within School of Pharmacy University of Brighton
- Masters in Clinical Pharmacy
- 4th year Pharmacy undergraduate students
- Consider similar opportunities within own professions
- Opportunities for Inter-professional research with Trust and HEI



Aims and Objectives

Aim

To evaluate peer observation in healthcare education and investigate how learning from others can be facilitated by peer observation

Objectives

- Explore the views of HCP educators on value of peer observation as the observer and the observed
- Investigate of how learning from other HCP can be facilitated by peer observation
- Identify areas of good practice and recommendations for future research and practice

Method

- Small group volunteers Acute Trust
- Mixed Methods Qualitative, Quantitative, use of questionnaires, focus groups
- Participants were recruited from multi-professional staff delivering education and training across a range of professions including inter-professional
- Participants could be both Observer and Observed
- Observers had to have taken part in peer observation at some point, experience and training to be an observer was noted
- Demographics on qualifications, role, experience etc.

Voluntary Participants

5 peer observers

- Patient Information
 Specialist Librarian
- Pharmacist
- Pharmacy Technician
- Nurse Educator
- AHP Strategic Lead

9 Observed Educators Nurses

- Pharmacists
- Clinical Librarian
- Transfusion Practitioner
- Senior Research Officer



Key Results – Quantitative - Observed

- Nine completed the online questionnaire
- All reported as delivering solely class room teaching
- All participants recommended being peer observed, with five suggesting yearly observation, while four suggested six-monthly
- All agreed that they could gain new teaching skills from the experience, with five responding as "strongly agreeing"



Key Results 2 – Quantitative -Observed

- Participants overwhelmingly felt that being observed improved their teaching, with three "agreeing" and six "strongly agreeing"
- All regarded verbal and written feedback as pivotal to attainment of that professional improvement
- Interestingly, nearly half of the participants (four "agreeing" and "strongly agreeing") reported preference for being observed by someone from different health profession

Key Results – Quantitative - Observer

- Five participants completed the online questionnaire
- All participants recommended being peer observed, with three suggesting yearly observation, and two suggesting six-monthly sessions



Key Results 2 – Quantitative -Observer

- Four agreed that they could gain new teaching skills from the experience, with two "agreeing", two "strongly agreeing" and one observer disagreeing with the assertion
- All said they would recommend being a peer observer to their colleagues



Key Results 3 – Quantitative -Observer

- Observers overwhelmingly felt that peer observation improved their own teaching
- All disagreed or strongly disagreed with suggestion that the process added no value to their performance as teachers
- Unsurprisingly then, all observers strongly felt that staff should be encouraged to undergo peer observation, with one "agreeing" and four "strongly agreeing" with that statement
- Interestingly, all observers (two "agreeing" and three "strongly agreeing") reported perceived benefits of observing someone from different health profession



Key Results 4 – Quantitative -Observer

- All observers regarded verbal and written feedback as vital to enhancing professional development of teachers
- Consequently, all participants felt that they would like to continue engaging in peer observation in their future careers as part of their CPD



Focus Group Themes from Both Groups

- Theme 1: Observation as a positive step in professional development with different professions
- Theme 2: increasing the frequency of observation builds up confidence of participants and encourage cross disciplinary learning
- Theme 3: Peer observation develops more tailored approach to teaching and professional practice through Theme
- Theme 4: Challenges provides to the provision of effective constructive, honest and critical feedback

Observed Educator 1

"having just peer observed the recent session, the things that I got out of it were, how easy it is to forget about some of the obvious things you need to do when you're teaching because you're just doing it all the time. [...] the tutor that I observed really appreciated me saying something as simple as, "You didn't state the learning outcomes at the beginning of the session."

Observed Educator 2

"observation programme will improve future teaching by standardization, I think about my lesson plans, revising them at different stages of the year to refresh what I am doing on these sessions"



Observed Educator 3

"When someone that wasn't same as my profession observed me, they will be looking at the way you deliver the session rather than the content of the session and I think if someone from my profession have been observing me they will look at the content and that isn't necessary what I want to get out of it"

Peer Observer 1

We take it for granted that there's so much teaching going on and actually we don't do this enough and I think we can learn so much from other people. And I think we work in silos, so we, we just stick to our professional groups and something that I've learnt [...] we can all share and, you know, it's just the culture of learning basically, isn't it?

Peer Observer 2

It's easy to be quite abstract when you're feeding back to someone and probably the most useful is when you can go into some detail and use specifics but that's not always easiest thing to do. [...] I found it quite difficult to read what people [think]. You feedback and they're like -"Hmm". How do you tease that out of them that they're taking that on board or they're not?

Summary Project

- Huge value of professional conversations between the observer and observed following the session
- Multi-professional participation ensured the focus of observation was on teaching and not the content
- Benefits both the observer and those being observed
- Logistics and time highlighted as a barrier BUT recommendation by participants to build into routine practice



Future Steps

- Next Project underway larger number of volunteers – roll out further to include other HCP and ward based sessions as well as classroom style teaching
- Involve on-line booking to be observed or observe (IRIS)
- Survey to identify staff requiring further development to deliver education
- Next Tuesday...... 😳

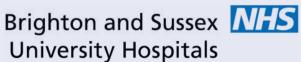


TRAINING TO BE A PEER OBSERVER – APRIL 2018

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