

Background & Purpose

Self-assessment alone provides limited accuracy in determining competency, enhancing the need for peer feedback [1]. When best practices are used, peer feedback improves team performance in workplace settings [2]. Like other professional skills, learners need opportunities to practice giving feedback that is specific and actionable. While peer assessment is often used in interprofessional education (IPE) courses, the research isn't clear on whether learners use best practices.

Research Questions

1. Do IPE students use best practices they have been taught when giving feedback to their teammates?
2. What issues do they address in their feedback?

Educational Context



- Semester-long, one-credit asynchronous foundational IPE course
- 523 pre-licensure learners from dentistry, dental hygiene, nursing, occupational therapy, pharmacy, physical therapy, and public health (102 teams)
- Course included one unit (and video: see QR code) focused on rationale and best practices for peer assessment.
- Peer assessment: mid-semester and end of semester. Positive and constructive comments for each teammate required → over 4200 comments total.

Findings

QUANTITATIVE

- 56 peer assessment comments were evaluated with QuAL scale over 3 iterations. Despite discrepancy discussions and modifications to the tool, sufficient interrater reliability could not be reached.

QUALITATIVE

- General themes in positive and constructive feedback mirrored each other, but positive feedback was more likely to be specific and include behavioral examples.
- Constructive feedback did not always follow the best practices of giving feedback; specific actionable change/specific example and ways to improve was more likely to be “copied and pasted” for each subsequent group member or left blank.



Communication

“[Student] could communicate more using the GroupMe in between the times that we meet over zoom. We are all really busy, but it would make our meetings more effective if we talked about the gaps of time we have in our schedules.”

Teamwork

“[Student] has been very helpful in each aspect of this course. However, one way I feel she could contribute more to the group could be through the team collaboration process and helping provide more input during team discussion.”

Interprofessional Knowledge

“If there is anything that [Student] could work on, I would say that he could incorporate what he learns in class into our group discussions. I personally don't know a lot about pharmacy so I think doing that will help me to understand, as well as to have a greater appreciation for this profession.”

Mixed Methods Approach

Quantitative: Two authors independently coded comment samples using the Quality of Assessment of Learning (QuAL) scale [3]. Scale was designed to evaluate short comments given to learners by preceptors in workplace based assessments based on best practices for feedback.

Qualitative: Two different authors coded comment samples using an iterative qualitative approach to identify consensus on common themes.

Conclusions

Early learners struggle to apply best practices for giving constructive peer feedback in the pre-clinical setting, but they are more successful with positive feedback. Increasing opportunities to practice this skill and providing structured feedback choices may be helpful.

Limitation/Next Steps: Explore the factors that inhibit students from giving best practices feedback and address them in the educational setting.

References

1. Eva KW, Regehr G. “I’ll never play professional football” and other fallacies of self-assessment. *J Contin Educ Health Prof.* 2008;28(1):14-19.
2. Buljac-Samardzic M, Doekhie KD, van Wijngaarden J.D. Interventions to improve team effectiveness within health care: a systematic review of the past decade. *Hum Resour Health.* 2020;18(1):1-42.
3. Chan, TM, Sebok-Syer, SS, Sampson, C, Monteiro, S. The Quality of Assessment of Learning (Qual) score: validity evidence for a scoring system aimed at rating short, workplace-based comments on trainee performance. *Teach Learn Med.* 2020;32(3): 319-329.