Virtual peer mentoring: A partnership between two UK Medical Schools

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Abstract

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The first-year student experience in Higher Education (HE) is complex due to the multiple life changing events occurring within this period. It is therefore important that universities embed accessible welfare support for students transitioning into HE. With near-peer support receiving recent credit for its benefit to medical students, the University of Nottingham (UoN) Medical School established a peer mentoring scheme where second-year students act as mentors to their first-year peers. The establishment of the Lincoln Medical School (LMS) in 2018, formed from a partnership between UoN and University of Lincoln (UoL), led to the inception of the Virtual Peer Mentoring (VPM) scheme. With the acknowledgement that there was a lack of near-peer support for the LMS students, VPMs were recruited from a pool of students who had been peer mentors at the UoN Medical School, with the responsibility of offering support to this cohort of students virtually, given the separate locations of the two campuses. As a novel concept between two UK Medical Schools, an evaluation of the VPM scheme revealed a positive experience for the VPMs. However, challenges identified by the peer mentees included the lack of face-to-face interactions, limited insight into the geographical and local knowledge of Lincoln and the limited use of technology to aid the virtual relationship. In acknowledging these limitations, with adjustments, there is scope to refine and enhance the VPM scheme, especially within the current climate of the coronavirus pandemic and beyond.

Keywords: Peer mentoring, medical education, student transitions

The story

Within the sector, it is widely known that the impact of Higher Education (HE) is transformative, with no guarantee of a streamlined transition to university (Bradley et al., 2008). This notion emerges from the perceived challenges encountered by first-year students, when framed against their academic, social, cultural and environmental experiences (Kift, 2015). Additionally, with an increasingly diverse student population arriving into HE, the issues faced by students are unique when considering their varied entry pathways, preparedness, motivation, social network and engagement with their environment (Kift, 2015). Harvey et al. (2006) aptly defined the first-year student experience as a 'multiplicity of experiences contingent on type of institution and student characteristics'. It is therefore imperative that supportive welfare systems are in place within HE settings to combat these challenges. Moreover, in having these welfare systems in place, a positive outcome is the reduction in attrition (Kift, 2015), as well as eliminating barriers (e.g. socioeconomic, cultural, emotional and physical) that may impact upon the educational attainment of students in HE.

For medical students, the pressures of transitioning to academic study are especially acute, with numerous discipline-specific challenges to face. They face a rigorous academic programme, with a high number of teaching hours, alongside course content which is psychologically and emotionally challenging. Medical students are exposed to patient interaction in complex clinical environments, including dealing with the professional and ethical dilemmas inherent to being a doctor. It is well documented that medical students suffer high rates of burnout, stress and depression in comparison to HE students on other courses (Santen et al., 2010; Dyrbye et al., 2014), and as such the need for structured and responsive welfare support mechanisms is high.

Medical students at the University of Nottingham (UoN) have access to various levels of welfare support, which include personal tutors, senior tutors, clinical sub-deans, the student support and wellbeing team, student-led welfare support and the university counselling services (Chatterton et al., 2018). Whilst the aforementioned services are important, near-peer support has been reported to be more effective in allaying some of the stresses encountered by first-year students (Altonji et al., 2019; Yusoff et al., 2010). Indeed, medical students appear to favour near-peer support when discussing their emotional experiences (de Vries-Erich et al., 2016). Besides this, the effectiveness of near-peer support provides a 'space' where students can develop informal connections that provide social and emotional support away from the formal systems provided by the University, as demonstrated by feedback received from one mentee; '...it was so nice to have someone to talk to who knew was it was like to be in our position and to give support and advice'. It is from this notion that the near-peer mentoring scheme at the UoN Medical School was established in 2015; a unique partnership between staff and students.

Each year the scheme involves the recruitment and subsequent training of medical students to act as peer mentors. As part of the recruitment process interested firstyear medical students are invited to apply for the role through an on-line application form, with the subsequent selection process facilitated by senior tutors. This involves a review of the mentor application personal statements and verification that the applicants are not subject to disciplinary/professionalism procedures. Successful peer mentors undergo three bespoke training sessions designed to equip them with the confidence, knowledge and skills to support and signpost their mentees to seek help when required (Chatterton et al., 2018). In considering the practicalities, after the initial face-to-face introductory session between the peer mentor and mentee, regular interaction including outreach email communications is required throughout the academic year. The email communications themselves are set around preidentified 'trigger' points within the academic year, ranging from preparation for formative assessments, first visit to the anatomy dissection suite, to organising accommodation for the second year. The trigger points are collaboratively decided upon during training events, building upon the experiences of the students and staff to provide meaningful and timely contacts. The role of the peer mentor lasts one full academic year, with the annual recruitment of up to 45 students per year, and the allocation of 5 - 7 peer mentees to each peer mentor. A small number of peer mentors (8 - 10) continue within their near-peer supportive role and act as "super mentors" within the student-led Medical Society (MedSoc). The effectiveness of the scheme is monitored annually through an evaluation of the peer mentor experience at the end of the academic year, and year-on-year feedback on the scheme has been positive as quoted from one mentor in the 2018-2019 academic year: 'I think it is a wonderful scheme to have in place and we are doing a good job in supporting the students'.

The Lincoln Medical School (LMS) was established in 2018 as a partnership between UoN and University of Lincoln (UoL). As a new Medical School, it was acknowledged that the first cohort of students based at UoL would not have access to senior cohorts and therefore the associated near-peer support, and thus raising the concern of some disparity to their counterparts based at the UoN, where incoming students have four years of senior cohorts from which to seek support and guidance. The Virtual Peer Mentoring scheme (VPM) was therefore identified as a temporary resolution to bridge this gap during the first year of LMS. As a model, virtual student support has received some credence, in that apart from the initial in-person interaction between peer mentors and their mentees, face-to-face contact is deemed less essential, with access to support taking place on a 'needs' basis within a virtual environment (Smailes and Gannon-Leary, 2011).

Whilst the peer mentoring scheme at the UoN Medical School encompasses the support of first-year students by their second-year peers, the VPMs for LMS students were recruited from the outgoing peer mentors progressing into the third year of their studies. This pool of outgoing peer mentors was chosen as the platform for recruiting VPMs as they had received the full bespoke peer mentor training, as well as

experienced the academic cycle of supporting first-year medical students through their transition into HE (See Tables 1A-C). With a total of 14 VPMs recruited, the students received supplementary training that focused on understanding the nuanced requirements of the LMS first-year students. Between them, the 14 VPMs provided virtual mentorship to the cohort of 97 LMS students. The VPMs had the opportunity to meet their peer mentees in person at the start of the academic year, with subsequent contact taking place within the virtual environment via email correspondence. Due to the novelty of the scheme, the experiences of both the VPMs and the peer mentees were evaluated at the end of the academic year.

1A Standard peer mentor recruitment and training at the University of Nottingham (UoN) in the 2018- 2019 and 2019-2020 academic year						
Date	Mode of delivery	Facilitators	Training activities			
February 2019	Lecture	Senior Tutors Support and wellbeing team	First year students interested in becoming peer mentors were invited to attend an introductory session on the peer mentoring scheme, with 45 students subsequently recruited to the scheme.			
September 2019	Group event	Senior Tutors Medical society (MedSoc) coordinator	As a meet and greet event, the peer mentors (second year students) were given the opportunity to meet their allocated peer mentees (first year students) in a one hour timetabled session.			
November 2019	Carousel activity	Student academic skills team Support and wellbeing team Director of student wellbeing Senior Tutors	This interactive group session involved the peer mentors rotating around different stations, with discussions on (1) student academic skills (study tips) (2) wellbeing tips and effective signposting (3) extenuating circumstances and other policies and (4) academic support taking place with the respective facilitators.			
February 2020	Optional drop-in session	Senior Tutors	Peer mentors were invited to attend a drop-in session with senior tutors where they were given an opportunity to discuss any concerns/seek advice on supporting their mentees.			
June 2020	Interactive session	Senior Tutors Director of student wellbeing	With the award of certificates to celebrate the completion of the peer mentoring cycle, feedback was sort from the peer mentors on experiences of supporting their peer mentees.			

1B Virtual peer mentor (VPM) recruitment and additional training in the 2018-2019 and 2019-2020 academic year					
February 2019	Lecture	Senior Tutors	Following a briefing delivered to second year peer mentors at UoN Medical School on the new virtual peer mentoring scheme with Lincoln Medical School (LMS), 14 virtual peer mentors (VPM) were recruited.		
June 2019	Question and answer session	Senior Tutors	This training focussed on upskilling the VPMs on (1) the support structure at LMS (2) how to identify the relevant trigger points for LMS first year students.		
September 2019	Group event		As a meet and greet event, VPMs met their peer mentees during an in-person visit to UoN Medical School.		
February 2020	Optional drop- in session	Senior Tutors	VPMs were invited to attend a drop-in session with senior tutors where they were given an opportunity to discuss any concerns or seek advice on supporting their peer mentees at LMS.		
June 2020	Interactive session	Senior Tutors Director of student wellbeing	With the award of certificates to celebrate the completion of the VPM cycle, feedback was sort from the VPMs on experiences of supporting their peer mentees at LMS.		

1C Support activities and resources provided to standard peer mentors and VPMs				
Email prompts of trigger points	Both groups of peer mentors were sent email prompts encouraging them to contact their peer mentees at identified trigger points. The pre-identified trigger points spanning the academic year included (1) securing a house in second year (<i>November 2019</i>) (2) formative assessments (<i>October 2019</i> , <i>December 2019</i> , <i>February 2020</i> , <i>March 2020</i>) (3) first visit to the anatomy suite and learning anatomy in semester 2 (<i>December 2020</i>) (4) revising over the holiday period (<i>March 2020</i>) (5) exams and exam results (<i>June and July 2020</i>).			
Coronavirus pandemic	Due to the coronavirus pandemic and subsequent lockdown restrictions, both groups of peer mentors were encouraged to check-in with their peer mentees on a regular basis.			
Peer mentoring Moodle page	Both groups of peer mentors were provided access to the Medical School Peer Mentoring Moodle page (UoNs course management system), where they were provided with all the relevant support and training resources.			

Tables 1A-C Summary of training sessions, support activities and resources provided to the University of Nottingham, (1A) standard peer mentors, (1B) virtual peer mentors (VPMs) and (1C) both cohorts of peer mentors, as part of their role as peer mentors supporting first year students at the University of Nottingham (UoN) Medical School and Lincoln Medical School (LMS).

Surprising outcomes

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Given the ongoing success of the peer mentoring scheme within the UoN Medical School, and the experience built up by the annual training programme and oversight team, the implementation of a virtual scheme was considered a natural extension of this face to face scheme. However, from the evaluation data collected, it was evident that the experiences and expectations of the VPMs and the peer mentees was different. Whilst the VPMs reported more positive experiences as quoted within the statement 'I think it was organised very well. The Lincoln cohort received a lot of information about the VPM scheme so knew who we were and how to engage with us, which was good to see', various limitations were identified by the LMS students (the mentees). Specifically, some of the peer mentees cited the greatest hindrance to their engagement with the VPM scheme as the lack of in-person interaction. Other mentees found it difficult to form a close bond with their VPM due to the exclusively email-based communications, which meant they found it awkward to seek advice or confide in them on personal matters. Additionally, whilst the VPMs were able to address academic concerns raised by their mentees, they had limited awareness of the geographical landscape and local knowledge of Lincoln students' sense of belonging is known to be integrally linked with academic achievement and overall success at University. Ahn and Davis (2020) describe four domains that influence a sense of belonging, namely academic engagement, social engagement, personal space and surroundings. Whilst academic and social engagement was supported and nurtured through the VPMs, the other two domains were unknowingly neglected. Despite the relative proximity of the cities of Nottingham and Lincoln, the lack of local knowledge from the mentors (based in Nottingham) about the living environment, local activities, social life and cultural events, both in the city of Lincoln and on UoL campus, meant that the support experienced by mentees (based in Lincoln) for these domains, was lacking.

Thematic analysis of the free text comments on the evaluation from the mentees highlight the key areas where the scheme did not meet their needs in terms of effective peer-support. The first area was that the predominant mode of contact via email communication felt impersonal and made the relatively small distances between campuses (50 miles), feel large. Statements such as 'I feel like it's quite hard to connect with people when it's via email', 'It was difficult because with them being at Nottingham, the programme was less helpful as it was all by email' and 'it almost made us feel further excluded from Nottingham as we don't have the same relationship/meetings as Nottingham students' highlight the need to extend the virtual contact into online meetings, rather than just written communication. This was in fact highlighted by several mentees in their response: 'maybe we could have had some more scheduled face-to-face meetings instead of just emails, for example Skype or Zoom sessions'.

Another theme centred on the different experiences of the VPMs in terms of the student life and socialising opportunities within the local area, and the problems with physical separation of the two sites. This is not a factor we had anticipated being an

issue, but clearly underlines that shared experience outside of the academic setting helps give peer support relationships a stronger foundation. Statements from the analysis which highlight this area included: 'They were lovely, but due to location differences not someone I would have gone to with any issues', 'Understandably, they were not able to help with social side of things as they live in a different city' and 'I think the virtual part made it too hard because they were too far away'.

A positive aspect that came out of the feedback was that mentees consistently felt that the VPMs made a conscious effort to get in touch, and that they were responsive when asked questions or for academic advice. This ties in with the experiences of students on the traditional mentoring scheme, and so it is interesting to note that the apparent failure of effective peer support in this virtual scheme was not the result of lack of motivation or good intention on the part of the VPMs. Comments such as 'Very friendly and always helpful' and 'The peer mentor couldn't have done the role any better - the problem was the lack of face-to-face interaction' support the effort made by all parties to try and build relationships.

Lessons learned

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The VPM scheme was designed and initiated pre-coronavirus pandemic, where all teaching and learning was delivered face to face, and the majority of student welfare support was also delivered face to face. With hindsight, and given the steep learning curve of educators and students following the Covid lock-down induced transition to full virtual delivery, it is clear that specific factors could have been put in place to aid the virtual aspect of the relationship building in this scheme. Hodgson and Hagan (2020) document the specific requirements of switching to virtual student support during the pandemic, and focus on the need to use video call enabled software, and the importance of relationship building by frequent informal interactions, such as via text chat functions enabled in online platforms (Hodgson and Hagan, 2020). The design of the VPM scheme mirrored that of the face to face scheme in terms of the key contact points during the year, and followed a more formal structure of interactions between mentor and mentees. Whereas the traditional scheme often led to relationships between mentor and mentees evolving from these formal contact points, to more social and informal interactions outside of this structure, it is clear that when these contact outreaches were only occurring through email, the effectiveness of the relationship building and support offered was reduced. We feel that this could have been avoided by explicating making use of video call software (e.g. MS Teams), and by encouraging more frequent interaction to account for the lack of face to face meetings. On reflection we have now incorporated digital software training to ensure mentors are able to meet, connect and chat with their mentees within a virtual environment if a physical environment is not feasible.

Whilst these lessons may seem obvious now, since as a society we have all experienced the learning curve of virtual interaction during the pandemic, the nuances of the relationship building process of the traditional mentoring schemes had not been analysed in depth. We can now observe that the features key to

effective peer support are more than having a named mentor to approach, and actually extend into the shared experiences. Fundamental to this is meeting regularly and living in the same city to help build a meaningful and fruitful relationship for both peer mentor and mentee.

Moral of the story

As a novel concept between two UK Medical Schools initiated to bridge the gap of support for first-year students, there are lessons to be learned for the future to assure a favourable experience for our students. Whilst there is the appetite for face to face interactions by peer mentees, we believe, with refinement, the virtual environment for near-peer support could generate some success, especially within the current climate of the coronavirus pandemic. Going forward, some ideas to consider include the integration of video meeting platforms (e.g. Microsoft Teams) where the virtual face to face interaction is possible. Additionally, there is scope to explore social networking sites as alternative virtual support environments due to their popularity with students. The lessons learned from virtual interaction during the pandemic will help accelerate the success of virtual support programmes in the future.

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