

A student-led clerkship primer: a near-peer orientation to clerkship

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Published ahead of issue: Nov 14, 2023; CMEJ 2023 Available at <https://doi.org/10.36834/cmej.76866>

Edited by: Marcel D'Eon (editor-in-chief)

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Implication Statement

The transition between pre-clerkship and clerkship can be difficult for medical students. Near-peer teaching may fill knowledge gaps within curricular clerkship orientation, leveraging recent, relatable, and up-to-date experiences from near-peers. These benefits have not been formally evaluated in the context of a clerkship orientation. We therefore created the Clerkship Primer, a near-peer teaching initiative that aimed to introduce incoming clerks to clerkship through a curricular session facilitated exclusively by senior clerkship students. Sessions had high satisfaction among students. This pilot project suggests that curricular near-peer teaching is a valuable component of clerkship orientation.

Énoncé des implications de la recherche

Traduction française à venir.

Introduction

Canadian medical school curriculums are divided into pre-clerkship and clerkship which primarily consists of two different learning environments; large-group lectures and clinical workplace-based learning, respectively. The transition between pre-clerkship and clerkship is stressful for many medical students, who report feeling unprepared despite faculty-led orientation sessions.^{1,2} Near-peer teaching (NPT), defined as “a trainee one or more years senior to another trainee on the same level of medical education training,”³ has demonstrated numerous advantages including creating a comfortable learning environment³ while maintaining the curricular standard set by faculty-led teaching.³ Near-peer teachers also benefit

through the cognitive effort of planning and engaging in teaching, and receiving guidance from faculty leaders.⁴ A previous study that combined NPT with faculty-led clerkship teaching for a specific rotation was well received by students.⁵ A general clerkship orientation session for all incoming clerks at the beginning of the academic year, led exclusively by near-peer teachers, may help address student anxieties about clerkship. By leveraging collegial intra-cohort relationships with the recent knowledge and experience of near-peer teachers, students transitioning into clerkship could feel comfortable asking honest questions around self-identified knowledge deficiencies. NPT in the general clerkship orientation has not been explored in the literature; therefore, our objectives were threefold: 1) create a Clerkship Primer, a NPT initiative that

introduces incoming junior clerks to clerkship through a scheduled curricular orientation lecture session exclusively facilitated by senior clerkship students; 2) evaluate **student satisfaction with** this initiative; and 3) share with other Canadian Undergraduate Medical Education (UGME) curricula **leaders** for potential adoption.

Innovation

To facilitate the session's aims at addressing student anxiety, leveraging collegial intra-cohort relationships, and enabling students to ask honest questions, two senior clerkship students (SS & MZ) created and distributed session resources including a Microsoft PowerPoint and Word document. We used NPT as a guiding framework to develop this session since NPT creates unique knowledge translation opportunities, as previously described. The mandatory curricular session was part of the junior clerks' general clerkship orientation at the beginning of the academic year. Faculty input was limited to ensuring curricular standards. The 1-hour in-person session leveraged near-peer teachers' experience and approachability and used an interactive, discussion-based approach; students broke into small groups and actively explored clinical responsibilities (e.g., progress note write-ups, patient presentations, handover).⁶ Session topics included: 1) identifying and accomplishing clinical duties

and learning opportunities 2) navigating health records 3) helpful clinical mobile applications 4) clinical etiquette and expectations 5) rotation-specific advice for clinical tasks and exams. The session concluded with a question-and-answer period. This project was given an ethical review exemption from the University of Saskatchewan Research Ethics Board (E358, 28 September 2022).

Evaluation

All 99 clerkship students attended the session (July 2022). The online platform *SurveyMonkey* was used to host the survey and collect data. Student satisfaction was measured using a 5-point Likert Scale (1 – Strongly Disagree, 2 – Disagree, 3 – Neutral, 4 – Agree, 5 – Strongly Agree). Surveys were distributed October 2022, 3 months after the start of clerkship, to all junior clerks through the UGME evaluations email.

Sixty-eight students completed the survey (69% response rate). Students strongly felt that the Clerkship Primer introduced and prepared them for clerkship, filled a gap in their medical education, and reduced clerkship-related stress while facilitating an approachable, engaging, and transparent learning environment. Students indicated that they would want more peer-led curricular lectures. Results are presented in Table 1.

Table 1. Junior clerk 5-point Likert scores of satisfaction statements to the clerkship primer (N = 68)

Satisfaction Statement	Strongly Disagree N (%)	Disagree N (%)	Neutral N (%)	Agree N (%)	Strongly Agree N (%)	Mean Score (SD)
Overall, the peer-led Clerkship Primer lecture was effective at introducing me to and preparing me for clerkship.	0 (0)	1 (1.5)	2 (2.9)	19 (27.9)	46 (67.7)	4.62 (0.62)
Overall, the peer-led nature of the Clerkship Primer lecture facilitated an approachable, engaging, and transparent learning environment.	0 (0)	0 (0)	2 (2.9)	14 (20.6)	52 (76.5)	4.74 (0.50)
Overall, the peer-led Clerkship Primer lecture has filled a gap in my medical education.	0 (0)	1 (1.5)	2 (2.9)	13 (19.1)	52 (76.5)	4.71 (0.60)
Overall, the peer-led Clerkship Primer lecture helped reduce clerkship-related stress.	1 (1.5)	2 (2.9)	3 (4.4)	21 (30.9)	41 (60.3)	4.46 (0.83)
Overall, I would want more peer-led curricular lectures for College of Medicine teaching.	0 (0)	1 (1.5)	2 (2.9)	14 (20.6)	51 (75.0)	4.69 (0.60)

Next steps

The Clerkship Primer was a well-received curricular component to clerkship orientation, with advantages consistent with previous NPT initiatives.²⁻⁴ Given the high satisfaction and low faculty resource requirements, we encourage interested senior clerks from all medical schools to implement their own Clerkship Primer into UGME clerkship orientations if there is available curricular orientation time. Limitations of this study include high resource needs from senior clerks which may be variable across different schools and that may subsequently affect NPT execution. Additionally, the survey was self-reported and subsequently the assessment of perception was restricted to level 1 of the Kirkpatrick model. Future research should evaluate how this initiative impacts clerkship performance and describe its potential benefits for near-peer teachers.⁴

Conflicts of Interest: The authors have no conflicts of interest to declare.

Funding: The authors did not receive any funding for this research.

Authorships: Mars Yixing Zhao and Shayan Shirazi contributed equally to this work as first authors.

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Published ahead of print