

# Peer Led Teaching in Intensive Care: A Flexible Approach to Overcome Barriers

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## Introduction

Intensive Care and Anaesthesia are high acuity specialties with barriers to regular effective teaching including shift working, flexible working patterns, high clinical workload and resident doctor other commitments. We sought to address this with a more adaptable approach

## Methods

Qualitative survey to identify priorities for teaching

Once weekly flexible programme

Teaching trainee chooses topic and day of week

Variable format/length

Feedback collated

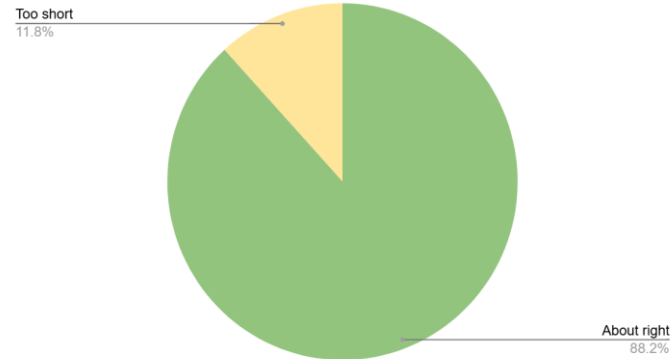
Portfolio assessments offered

## Results

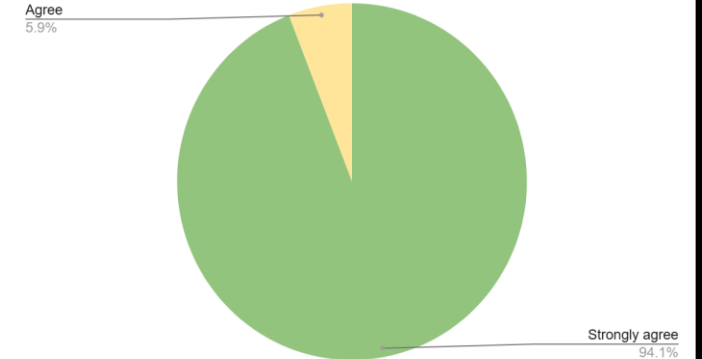
There was increased participation with only 6 weeks missed over a one year period. Resident doctors felt less pressure to prepare for sessions and feedback was extremely positive regarding quality and length of sessions.

No conflicts of interests to declare. Ethical approval not required on this project.

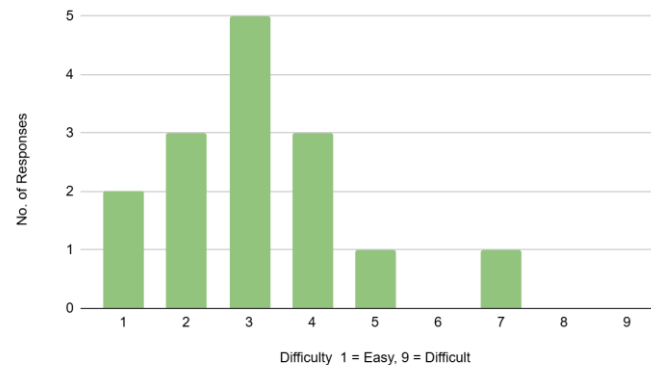
The length of the sessions are:



The topics are relevant:



I found preparing for the sessions difficult



*“The informal peer-to-peer nature of teaching is the greatest strength of these sessions as it allows all grades of doctor to question/check knowledge openly.”*  
*“Really informative sessions in a safe and comfortable environment. Always interesting and appropriate for learning and a great opportunity for those teaching to exercise skills.”*

## Conclusions

A less regimented approach to organising peer led teaching resulted in a more positive experience for resident doctors; greater accessibility in a busy intensive care environment without a drop off in quality of teaching. This approach could be implemented in other intensive care units struggling to implement regular resident doctor led teaching