# Impact of Peer-Led MOSCE and Open Practice Sessions on Student Performance and Peer Tutor Perceptions

Christy Xavier, MS, PharmD; Meredith Howard, PharmD

University of North Texas Health Science Center College of Pharmacy, Fort Worth, TX





### INTRODUCTION

- Objective structured clinical examinations (OSCE) are highly associated with student stress compared with other types of assessments.
- Peer-assisted learning programs (PAL) such as a mock OSCE (MOSCE) may:
  - Increase cognitive and psychomotor development<sup>1,4,5</sup>
  - Improve confidence<sup>1,2,4,5</sup>
  - Increase valued feedback<sup>2,4</sup>
  - Increase OSCE scores<sup>3,5</sup>
- Few studies analyze impact of such programs including a mock OSCE in pharmacy education.
- Our previous study following students in the Fall of 2022 found:
  - No impact on performance
  - Improved self-perceived confidence and preparedness
- Controversy behind value of peer-led vs. faculty feedback

### OBJECTIVE

To examine the impact of a novel peer-led MOSCE and/or faculty-led open sessions on student performance and peer grader and student perceptions

### METHODS

#### **Study Design**

- Retrospective quantitative and qualitative cohort study conducted in Fall 2022 and 2023 semesters **Study Participants**
- P1 students: enrolled in PHAR 7118 Physical Assessment Skills Lab course
- Mock participants: P1 students that attended the mock OSCE
- Non-participants: P1 students that did not attend the mock OSCE
- Peer tutors: P2-P4 students that acted as mock patients and graders during the MOSCE

#### **Mock OSCE Event**

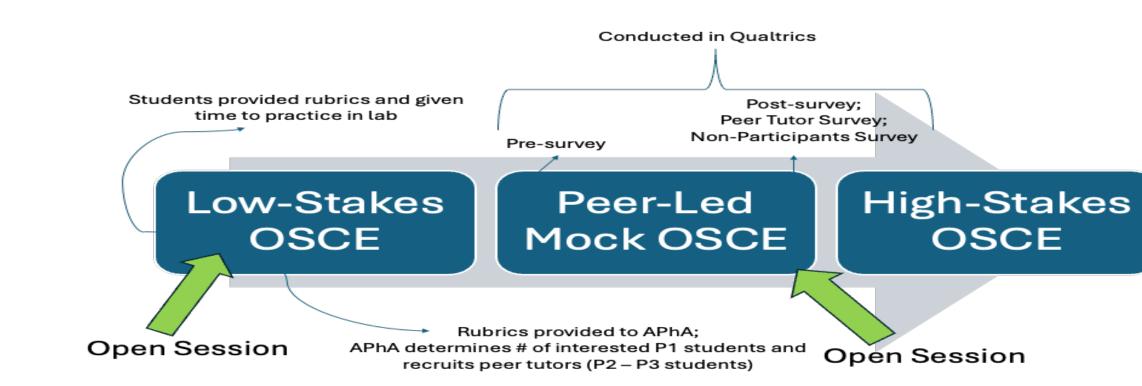
- MOSCE was conducted after the low stakes OSCE and prior to the high stakes OSCE.
- Peer tutors were provided rubrics for evaluation and conducted the mock OSCE similarly to the high stakes OSCE.
- Evaluated on blood pressure (BP) and diabetic foot exam (DFE) techniques and communication/interview skills

#### **Faculty-Led Open Sessions**

- Voluntary and conducted once before the low-stakes and once before the high-stakes OSCE **Data Collection**
- Voluntary, anonymous surveys through Qualtrics were administered pre- and post-MOSCE event to participants, after the MOSCE event to peer tutors, and after the low stakes/before the high stakes OSCE for non-participants.
- Surveys analyzed: baseline demographics, preparedness/confidence scores (for P1 students), perceptions about the event, reasons for not attending the MOSCE (for P1 non-participants)
- Low and high-stakes OSCE scores
- Open session attendance

#### **Statistical Analysis**

- Descriptive statistics and Chi square analysis for baseline demographics and
- Paired sample T-test for preparedness and confidence scores pre- and post-MOSCE
- Independent samples T-test for comparison of participants and non-participants scores



### RESULTS

	Class of 2026	Class of 2027
MOSCE	23	35
Participants	21 (91.3%)*	26 (74.3%)*
Peer Tutors	24	57
	8 (33.3%)*	26 (45.6%)*
Non-Participants	48	33
	26 (54.2%)*	23 (69.7%)*
Low-Stakes OSCE Fail Rate	39 (52%)	29 (42.6%)
High-Stakes OSCE Fail Rate	16 (22.5%)	15 (22.1%)

Peer Tutor Demographics			
		Fall 2022	Fall 2023
		n = 8	n = 26
Mean Age		23.71	26
Gende			
	Female	4 (50%)	19 (73.1%)
	Male	4 (50%)	7 (26.9%)
Race/E	thnicity		
	Caucasian Non-Hispanic	2 (25%)	5 (19.2%)
	White	2 (2070)	0 (10.270)
	Hispanic/Latino	1 (12.5%)	3 (11.5%)
	African American/Black	3 (37.5%)	4 (15.4%)
	Asian	2 (25%)	11 (42.3%)
	Multiple/Other	0 (0%)	3 (11.5%)
Pharma	acy Year		
	P2	7 (87.5%)	17 (65.4%)
	P3	1 (12.5%)	9 (34.6%)

#### PEER TUTOR PERCEPTIONS

Most Liked Aspects

73.1%: mutual learning environment 65.4%: "mimics clinical scenario" and "peer-led"

#### Strengths

- Able to give feedback based on experience as P1
- Makes students feel more confident and comfortable
  - See process from perspective of grader
  - Can never be too prepared for an OSCE
- Needed to refresh my knowledge on BP assessment and DFE

### Limitations

- Time organization
- More feedback time
- Ran long
- Finished later than would like

### Participants Participants p-value Mean Age + SD $24.46 \pm 2.64 \ 26.05 \pm 6.32 \ 0.251$ Gender-Fluid Race/Ethnicity Caucasian Non-Hispanic White Hispanic/Latino African American/Black Multiple/Other Prefer not to answer Highest Degree Earned High School or GED 22 0.365 Undergraduate Graduate **Prior Clinical or Pharmacy** Experience 18 0.475

\*Survey respondents

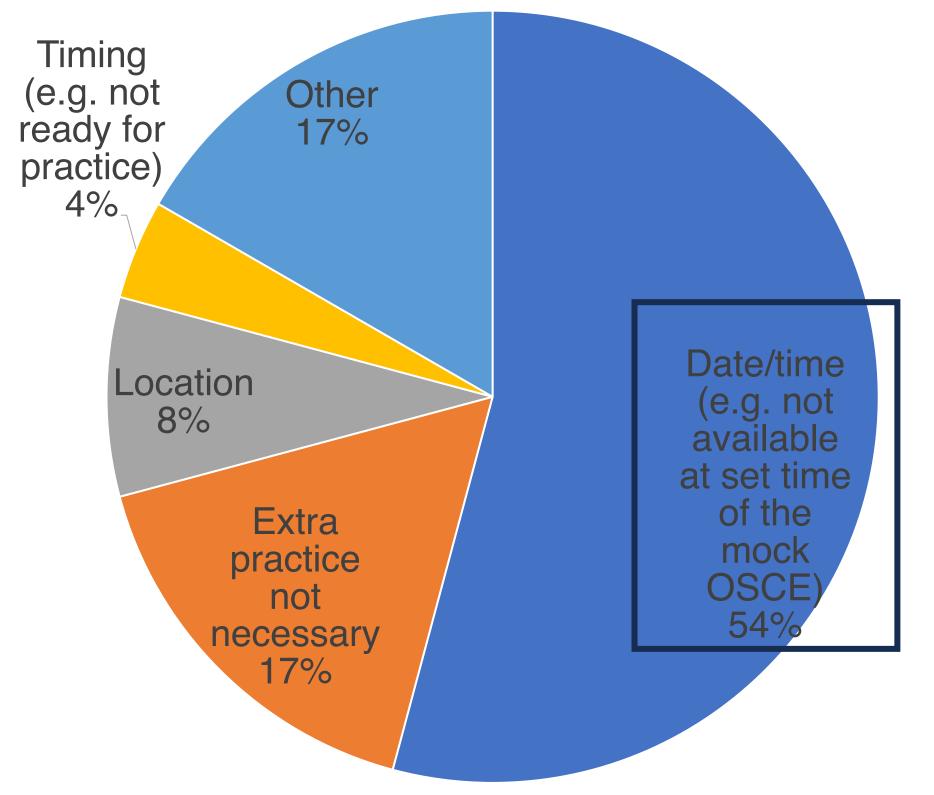
#### 100% of MOSCE participants somewhat to strongly agreed:

- MOSCE was beneficial
- Helped improve their communication skills
- Appreciated student presence in all aspects of the MOSCE
- Increased confidence in patient care activities

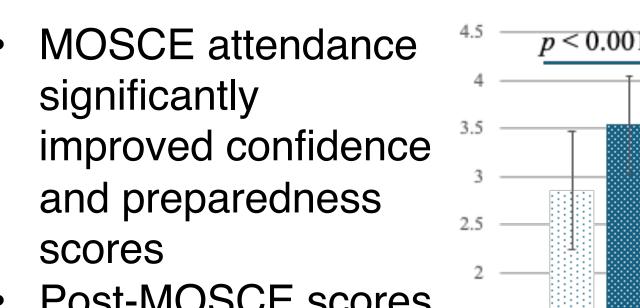
100% of MOSCE participants *strongly agreed*:

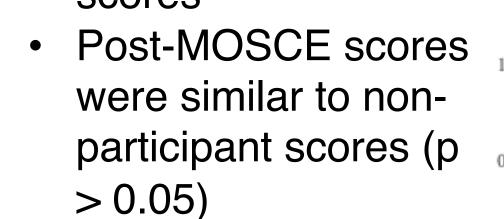
Appreciated feedback from peer tutors

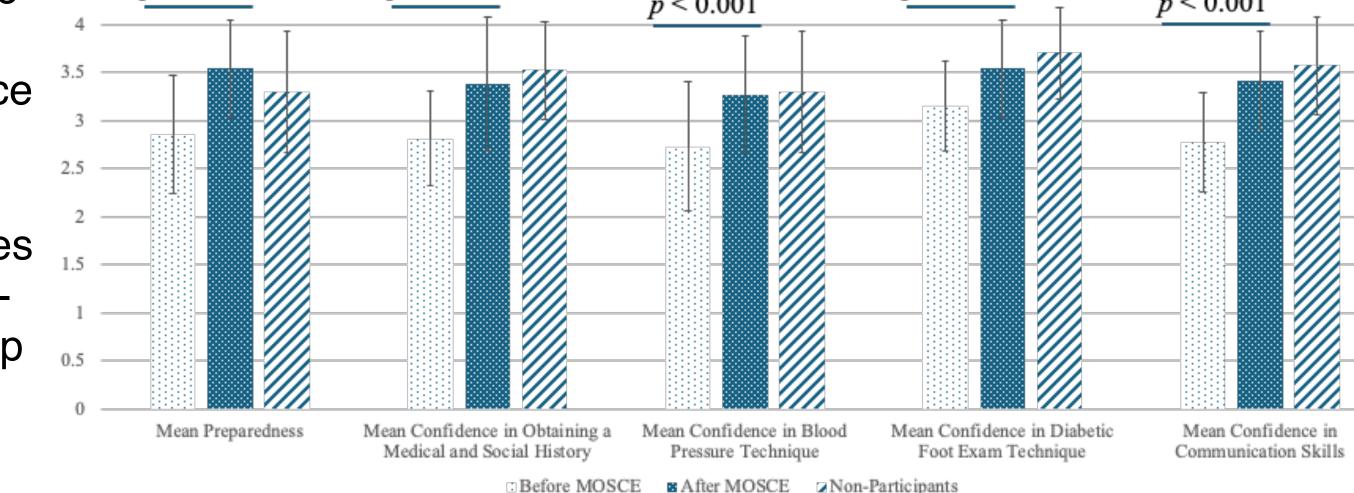
#### **REASONS FOR NON-PARTICIPATION**

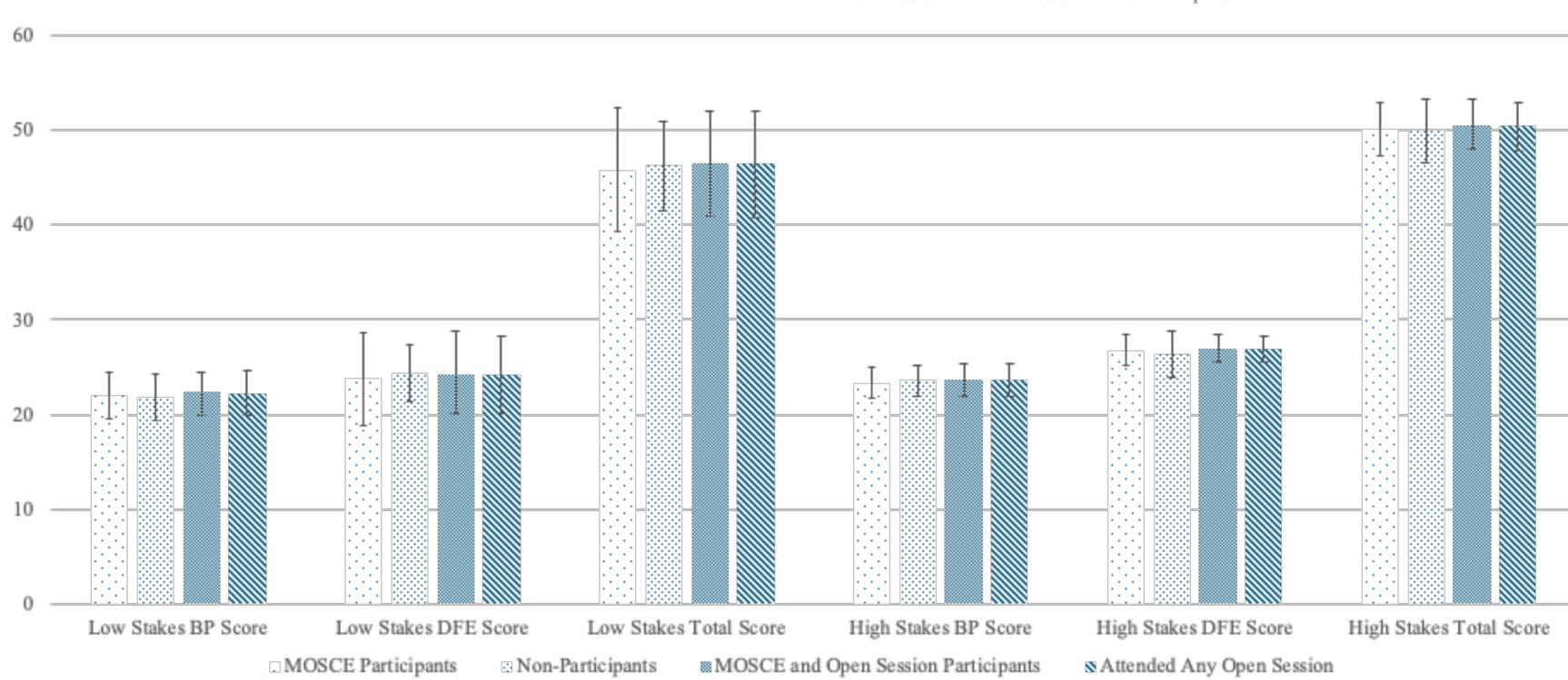


## RESULTS (CTD.)









- 52.9% of P1s attended any open practice session, 11.8% attended both practice sessions, and 32.4% attended both the MOSCE and any open practice session.
- Attendance at any practice session (p = 0.97), both practice sessions (p = 0.831), and any open practice session and MOSCE (p = 0.594) was not associated with higher passing rates or scores on the highstakes OSCE.

### CONCLUSIONS

- MOSCE participation was associated with an increase in preparedness and confidence in performing OSCE skills but was not associated with a lower failure rate on the high stakes OSCE or better OSCE performance.
- Faculty-led open sessions had no additional value, as attendance to either or both open sessions and/or mock OSCE was not correlated with better performance or failure rates.
- Most non-participants cited unavailability as a reason for not attending MOSCE.
- Peer tutors cited mutual learning environment and "paying it forward" as reasons for volunteering.

#### Future studies:

- Analyze impact of MOSCE prior to low stakes on performance and confidence
- Increase availability and accessibility of MOSCE sessions
- Collect data from multiple cohorts

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