

The Pyjama Sessions: Transition to Online Education During a Pandemic

A. Cassidy, E. Dunne, C. Lennon, A. Curley
The National Maternity Hospital, Holles Street.

Abstract

Aim

To gauge the successful transition to virtual learning during the Covid-19 pandemic.

Methods

Educational meetings in a tertiary neonatal intensive care unit were assessed over a two-week period in June 2020. Attending staff were sent an overall questionnaire and six meeting-specific questionnaires. 41 attendees (100%) responded to the overall questionnaire. We received 172 individual responses to the daily questionnaire (97%).

Results

164 respondents (95%) found virtual sessions useful. Attendance doubled compared to 2019 (mean 30 versus 15 attendees). 33 respondents (83%) attended when not scheduled to work. 38 attendees (97%) reported anxiety about their microphone or camera being on. 24 respondents (59%) attended online education sessions in their pyjamas.

Conclusion

Implementation of EWTD and a shift towards flexible working necessitates a creative approach to education. This pandemic has been a catalyst for moving towards virtual education, which our study showed can increase attendance whilst remaining useful to attendees.

Introduction

The COVID-19 pandemic necessitated immediate change worldwide in patterns of working, education and lifestyle¹. The requirement for social distancing meant that long-established forms of medical education had to be cancelled or moved online². In an effort to maintain continuing professional development (CPD) following public health restrictions on face-to-face meetings, we rapidly adapted to an online educational platform in April 2020. We aimed to gauge successful transition to virtual learning and identify how these changes in practice could be factored into future planning of educational programmes.

Methods

Three dedicated weekly educational meetings in our tertiary neonatal intensive care unit were assessed (Critical appraisal of literature, Peer-led teaching, Protocol development) over a two-week period in June 2020. We compared attendance with the same time period in 2019. We surveyed all medical, nursing and allied health care professionals (AHPs) participating in our educational programme. Participants were sent an overall (Lockdown) questionnaire and six additional meeting-specific questionnaires.

The questionnaires were designed to evaluate ease of attendance, educational value, participation, location at time of teaching and attendance outside of working hours. We aimed to capture changes in professional behaviour during an extraordinary time.

Results

41 staff members (100%) responded to the 'Lockdown' questionnaire (20% consultants, 58% non-consultant hospital doctors (NCHDs), 12% nurses, 10% AHPs). 177 attendances were recorded at 6 meetings. We received 172 individual responses to the daily questionnaire (97%).

164 attendees (95%) indicated the individual educational sessions were useful. 82 attendees (47%) reported the sessions were interactive and 69 respondents (40%) found them to be enjoyable.

Attendance at teaching sessions doubled compared to 2019 (mean 30 versus 15 attendees per session). 33 respondents (83%) attended sessions when not scheduled to work. During a typical session, one quarter of those attending were not scheduled to work that day. On a daily basis, 50% were in work, 16% travelling, 20% in their kitchen or living room and 14% in their bedroom/bathroom.

31 respondents (78%) reported finding it easier to attend a virtual session late. 18 attendees (44%) found it more difficult to contribute. 35 attendees (88%) felt that they were more likely to multi-task. 28 of 32 responses (88%) felt that virtual sessions were more family friendly.

Five respondents (12%) reported virtual education sessions to be more anxiety-inducing, 24 attendees (59%) reported less anxiety. Ten presenters (28%) stated that a lack of visual or audio feedback and potential technical issues caused them anxiety. 38 attendees (97%) reported having anxiety about their microphone or camera being on, a feature locally described as 'Zoom anxiety', though several different online platforms were utilised.

Prior to the pandemic, attendees typically wore scrubs or workwear. From April 2020, 59% (n=24) had attended education sessions in their pyjamas.

Discussion

The aim of this study was to explore whether the recent transition to virtual learning in the setting of the Covid-19 pandemic was successful and how lessons learned from its implementation could be used for future planning of educational programmes³.

We noted a dramatic increase in attendance with the majority reporting virtual education to be useful and more family friendly, a factor rarely assessed in teaching programmes⁴.

Notably, one quarter of staff attended teaching when not scheduled to work. Implementation of the EWTD⁵ and a cultural shift towards flexible working necessitates a creative approach to training and continuing professional development. Attendees chose a more informal approach to attending meetings, sometimes attending late, multitasking and dressing informally. Despite these potential educational drawbacks, our study showed that virtual learning increased accessibility in our cohort.

Presenters reported anxiety regarding technical issues and lack of audience feedback. Almost all attendees worried about unknowingly leaving their camera or microphone on. Over time, with continued virtual learning, we anticipate this anxiety will reduce.

Participants commented that they missed the collegiality that resulted from face-to-face teaching sessions and the requisite coffee afterwards. Due to the nature of virtual platforms, only one participant can communicate at a time and attendees often cannot see each other, leading to a sense of artificiality and a paucity of “catch-up chat”. Initiatives that support morale and team-development are essential as virtual education becomes the norm.

Our study did not quantify the educational benefit of our programme and some of our questions are clearly tongue-in-cheek, but for our team this pandemic has been the catalyst necessary to advance virtual learning. Our findings can help future planning not just in this setting but also in the provision of the best, most accessible, educational platform for our staff. ‘Zoom anxiety’ is prevalent and we suggest that healthcare workers should invest in a good pair of pyjamas.

Declaration of Conflicts of Interest:

The authors have no conflicts of interest to declare.

Corresponding Author:

Dr Aoife Cassidy
Paediatric Specialist Registrar
CHI at Tallaght,
Tallaght University Hospital,
Dublin 24.
E-mail: cassidao@tcd.ie

References:

1. Murphy JFA, Pandemic Fatigue *Ir Med J*; vol113; no6; P90
2. Chick RC, Clifton GT, Peace KM, et al. Using Technology to Maintain the Education of Residents During the COVID-19 Pandemic. *J Surg Educ.* 2020; 77(4):729-732. doi:10.1016/j.jsurg.2020.03.018
3. Nicholas JL, Bass EL, Otero HJ. Can lessons from the COVID-19 pandemic help define a strategy for global pediatric radiology education? [published online ahead of print, 2020 Sep 5]. *Pediatr Radiol.* 2020;10.1007/s00247-020-04822-x. doi:10.1007/s00247-020-04822-
4. McSparran M, Young S Does gender matter in online learning?, *ALT-J*, 2001; 9:2, 3-15, DOI: 10.1080/0968776010090202
5. Slattery DM. Impact of EWTD on teaching and training in Irish paediatric medicine: positive or negative? *Ir Med J.* 2014;107(1):19-21