Standardized Patients: Recruiting, Selecting and Coaching

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Introductions

- Joe Miller has no financial disclosures
- BS in Exercise Science & Wellness
- Standardized Patient (SP), UND 2006-2011
- Standardized Patient Trainer, UND 2011-2014
- SP Program Coordinator, UMN 2014-current
- Simulation Science & Practice
  - Association of Standardized Patient Educators
  - Society for Simulation in Healthcare
Introductions

- Who are you?
  - Name
  - Employer
  - Role
  - What brought you to this session/what do you hope to get out of this session?
My Experiences

○ University of North Dakota, 2011-2014
  ○ Office of Medical Education
  ○ Focused solely on Medical Students
  ○ About 70 SPs in my patient pool
  ○ 2 FTEs
  ○ Clinicians as evaluators

○ University of Minnesota, 2014-current
  ○ Academic Health Center (ISO)
  ○ IERC/AHC Simulation Center: Medicine, Nursing, Dentistry, Social Work, Pharmacy, Veterinary Medicine, Law School, Physical Therapy, Occupational Therapy, Respiratory Therapy, Physician Assistants, Interpreters, and Public Health
  ○ External Clients: Bethel, MSU-Mankato, VA, HCMC, Children’s Hospital
  ○ Satellite SP Programs in Duluth and Rochester
  ○ July 2017 – June 2018
    ○ 501 projects/events (mannequin, SP, and hybrid)
    ○ 60% of events utilized SPs
    ○ 10,523 total SP hours
    ○ 16312 learners from AHC schools participated in simulation
  ○ SP Program
    ○ 201 active SPs (about 40 new SPs on-boarding this week)
    ○ 33 Patient Educators – Head to Toe Physical Exam
    ○ 17 Patient Educators – Sensitive Exams (BP and MGR)
    ○ 3 SP Trainers
Goals and Objectives

Participants will be able to:

- Use appropriate methods to select & coach SPs
- Use SPs for simulation scenarios with and without physical findings
- Use SPs for a wide range of clinical scenarios
Topics

- Recruitment, selection, training, and development of SPs
- What can and can’t be simulated by SPs
- How to standardize SP performance
- How to use SPs in hybrid simulation*
- How to train SPs to assess learners and give feedback in simulations
- Using SPs as confederates*
History of SP methodology

- SPs have been used since the 1960s
- First SP was trained by Dr. Howard Barrows at USC 1963 (hx & px of MS patient) → McMaster University Medical School → University of Southern Illinois (Problem Based Learning and SPs)
- Dr. Paula Stillman (Univ of Arizona – SPs to play mothers of unseen children)
- SPs trained to portray patients with neurological findings
- Medical Council of Canada adopts clinical skills testing at part of licensure exam – 1993
- Educational Commission for Foreign Medical Graduates adopts same approach in 1998 (now USMLE Step 2)
History of SP methodology

- SPs most typically used in:
  - Head-to-toe exam
  - Focused exam
    - Musculoskeletal
    - Neurological
    - Abdominal
    - Cardio/Thoracic
  - Communications
    - Patient education
    - Motivational interviewing
    - Cultural competency
    - Difficult communications
      (bad news; end-of-life; error)
History of SP methodology

- Complex uses:
  - Patient educators
    - Head to toe instruction
    - Sensitive Exams (BP and MGR)
  - Feedback to students, residents, practitioners
  - Cultural Initiatives
    - LGBTQIA+, Race, Socio-economic status, other underserved populations
  - Case contributors
  - Hybrid simulations
    - Combined with task trainers (e.g. birthing with mamma Natalie, IV arm for insertion, etc.)
    - Confederates/Embedded SP Professionals
      - Family or friends
      - Other health professionals
History of SP methodology

- What SPs CAN simulate and replicate reliably
  - Normal patient
  - Communication challenges
  - Mental illness
  - Neurological disorders/findings
  - Trauma

- What SPs CAN’T simulate and replicate reliably
  - Stats
    - Blood pressure
    - Heart rate
  - Particular pathologies/structural defects
    - Arrhythmias
SP PROGRAM AT THE U OF MN

1998
- SP Program is formally established in Medical School

2003
- SP Program moves to the IERC and becomes shared resource

2008
- AHC Simulation Center opens, increasing hybrid simulation

2014
- Partnership with VANTAGE begins, increases access to adolescent patients

2015
- Partnership with pediatric faculty, increases access young children
SP PROGRAM AT THE U OF MN

- Infrastructure
  - Patients are paid according to the invasiveness and complexity of the teaching and exam
  - Direct costs are passed through to clients
SP PROGRAM AT THE U OF MN

- Tools for program development and management
  - Recruit patients for:
    - Demographic diversity
    - Ability to memorize details
    - Ability to take feedback
    - Comfort with structured improvisation
SP PROGRAM AT THE U OF MN

- Tools for program development and management
  - SPs vs. Volunteers
    - RELIABILITY
    - Consistency
    - Availability/Commitment
    - Accountability
- Terminology: SP, Actor, Medical Role player, Simulated Patient, Fake Patient
SP PROGRAM AT THE U OF MN

- Tools for program development and management
  - SP management
    - Observation, feedback
    - Ongoing development
  - Challenges
    - Managing “veteranitis” (i.e. resistance to coaching, learning new methods or practices)
    - Case Fatigue
    - Sensitive Topics
Using Best Practices

- Association of Standardized Patient Educators
  - Just released the Standards of Best Practice (first edition)

- Pre-Licensure
  - Nursing – End of Life care
  - Medicine – RPAP/MetroPAP
  - Pharmacy – Benchmark Assessment
  - Dentistry – In Situ Emergencies
  - Occupational Therapy – Allied Health

- Graduate Medical Education & Advanced Practice Nursing
  - Hematology-Oncology Fellows at Regions Simulation Center
  - Advanced Care Planning/MN Honoring Choices
  - Interprofessional Mental Health Care Teams

- Continuing Medical Education
  - Maternal and Infant Nutrition
Lets Do It!

O Handouts
  O SP Coaching Session – Agenda
  O LOCATES Coaching Tool

O SP Coaching Session:
  O Case: Third Year Internal Medicine
    O I want an antibiotic
    O 8 minute encounter (Hx; no Px)
    O 2 minutes of verbal feedback

O Video Example:
http://192.168.29.200/video/ViewVideo.aspx?token=4e7a2ef3-7797-454e-9cf5-689b5169e48c
Resources for ongoing development

- Professional associations
  - Association of Standardized Patient Educators (ASPE): [www.aspeducators.org](http://www.aspeducators.org)
  - Society for Simulation in Healthcare (SSH): [www.ssih.org](http://www.ssih.org)
  - International Nursing Association for Clinical Simulation and Learning (INACSL): [www.inacsl.org](http://www.inacsl.org)
Questions?
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