STANDARDIZED PATIENT OVERVIEW

Karen Thomson Hall, MA
Standardized Patient Program Manager
Stanford University School of Medicine
Center for Immersive and Simulation-based Learning
Objectives

- Describe what a standardized patient (SP) is.
- Identify different roles an SP can play and why using SPs can enhance your simulation.
- Discuss how to use SPs for different types of scenarios, where to find SPs, how to screen potential SPs, along with a few other SP topics.
What is a Standardized Patient (SP)?
Traditionally, an SP is...

- an individual trained to portray the personal history, physical symptoms, emotional characteristics and everyday concerns of an actual patient in a safe and supportive learning environment.
- a dynamic educational tool customized to meet the learning objectives of the session for a variety of settings such as interactive teaching environments, group demonstrations, clinical examinations, or instructional videos.
- a person who is trained to provide constructive written and/or verbal feedback, from the patient’s perspective, to further enrich the relationship between physician and patient.
### External SP Milestones in Medicine

**1992**: The Medical Council of Canada developed a licensing exam using SPs to assess competency before medical licensure.

**1998**: The Educational Commission for Foreign Medical Graduates introduced an SP exam for all foreign medical graduates.

**2001**: The Association of Standardized Patient Educators (ASPE) was founded as an international organization dedicated to SPs.

**2003**: The Association Council of Graduate Medical Education added SPs as a module for several of the 6 required competencies.

**2004**: The US Medical Licensing Examination began Clinical Skills testing of graduating medical students in the Step 2CS.
WHAT ROLES CAN AN SP PLAY?
Some common SP roles

- Patient
- Patient’s family member (parent, spouse, sibling, etc.)
- Other patient in the room (distraction)
- Nurse “confederate” (best if they have a medical background or some medical experience to handle whatever may come up in the scenario)
- Gynecological and Male Urological Teaching Associates (GTAs/MUTAs)
- Interpreter (must be fluent in a foreign language)
Why use an SP?

- Participants are more likely to invest in a simulation when interacting with someone they don’t see on a daily basis, like regular faculty/staff or colleagues.
- Trained SPs are able to access an emotional arc, which adds depth and impact to a simulation by forging a realistic element that might not be there otherwise. The more realistic the simulation, the more buy-in from the participants; the more buy-in, the richer the learning experience and the higher the educational impact.
- Trained SPs are highly skilled at giving feedback to the learner and are the only ones who can truly say how it felt to be the patient, family member, nurse, etc.
HOW TO USE SPs FOR DIFFERENT SCENARIOS
Structured vs. Improvised

Structured, i.e. more standardized:

- Best for an exam or assessment, when you need a standardized experience for measuring all learners.
- SPs need to be provided and trained on full patient history, any simulated physical exam responses, standardized responses to questions, and assessment tool (checklist).
- Typically takes more training time, and training in advance of the event because there’s more to learn, memorize and drill.
Structured vs. Improvised

Improvised scenario:

- Best for a learning session, practice, or a mannequin-based scenario with a family member or distraction, etc.

- SPs need an outline of the key points and the direction in which you want the scenario to go (or a basic flow chart: if/then) so that they stay on track with the learning objectives for the session and don’t “go rogue” during the scenario. (Giving the SP an ear piece to wear during the simulation so that you can give instructions to them can help, too.)

- If your objectives and scenario outline are clear, you can train/brief the SP right before your simulation, which cuts down on costs.
OTHER SP TOPICS
Where do I find SPs?

- Work with an SP Program or SP consultant (a Bay Area example is PRN Consulting: www.prnconsulting.com) to identify the right SP for your needs. Some SPs are better with improvisation, some need more structure. Some are really good with group scenarios. Think about any demographics you may need for your scenario (gender, age, body type, ethnicity, medical knowledge).

- Work with the volunteer organization at your local hospital or VA to identify people who are interested in doing this kind of work (note: volunteers may need extra training, especially on how to deal with any emotional content).

- Contact the theater department at a local college or advertise with a local theater organization (e.g. Theatre Bay Area)
How do I screen potential SPs (or real patients)?

Content to include in a phone interview:
• What do you know about SP work and/or simulation?
• What experience do you have that you feel is applicable to SP work?
• What appeals to you about the possibility of being an SP?
• Describe a good experience you had with a health care professional.
• Describe a bad/challenging experience you had with a health care professional. What was the outcome?
• Describe a situation where you had to give constructive feedback to someone. Include how you approached it and how you felt about it.
• Be sure to go over the nature of the work, expectations, confidentiality, scheduling, video recording, pay (if any), etc.

Additionally, after a successful phone interview, you may wish to conduct an in-person interview/audition to assess abilities before hiring.
Can I use children?

- Persons under the age of 18 are a protected population.
- Most institutions don’t use children because of the strict labor laws. Some are prohibited from using children altogether.
- In a school, you can sometimes use children “volunteers” if they are the children of a faculty or staff member.
- Because of the difficulty of using children, scenarios are often built around a parent, or use a child simulator voiced by an adult. Virtual reality programs are also working to fill the gap.
What about liability?

It is advisable to develop a Letter of Understanding and Consent that you have the SP sign and date. If you have an HR Department, be sure to run it by them.

This consent form should include:

- Description of the job with specific details (e.g. physical exam in a patient gown)
- Expectations (professionalism, attendance, preparation, etc.)
- Confidentiality (especially in regards to posting case or learner details on social media)
- Video recording and how it will or may be used
- Rate of pay (if applicable) and how payment is processed
- While we will do our very best to provide a safe working environment, you as the SP have the right and responsibility to protect yourself at all times and to speak up if you ever feel you are in jeopardy during an encounter or simulation.
- The faculty and learners are not your health care providers. Any information relayed to you about your personal health is not official in any way. If you have concerns about your health, you should seek care from a qualified medical provider.
QUESTIONS?
CONTACT INFORMATION
STANFORD UNIVERSITY SCHOOL OF MEDICINE
CENTER FOR IMMERSIVE AND SIMULATION-BASED LEARNING

Karen Thomson Hall, MA
kthall@stanford.edu
650-498-5039