

MEDICAL SIMULATION & CLINICAL
SKILLS TRAINING CENTER

UAEU كلية الطب والعلوم الصحية
College of Medicine and Health Sciences

جامعة الإمارات العربية المتحدة
United Arab Emirates University

SIMULATED PATIENT PROGRAM

A GENERAL GUIDE



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INTRODUCTION

SP PROGRAM

The Simulated Patients (SP) Program is an integral part of the Medical Simulation & Clinical Skills Training Center at the College of Medicine & Health sciences, United Arab Emirates University. The program supports clinical skills teaching at various levels within the medical curriculum. Students engage with SPs as they learn the basics of medical interviewing; from handling an angry patient and consenting for surgical procedures, to performing organ focused physical examinations.

To deliver successful clinical skills training sessions, simulated patients work closely with clinical faculty, tutors, and clinical skills center staff. The ability of the SPs to master role playing and perfect various clinical scenarios within these encounters is extraordinary, and receives a great deal of positive feedback from clinical tutors and students alike.



We are proud of all our dedicated and experienced simulated patients and look forward to recruit more to join our program. Present numbers of students are growing which demands more meaningful SP engagement. The Medical Simulation Center continues to enhance the SP program with focused recruits of dedicated people from the community, and providing relevant training for SPs to improve their overall skills in simulation. The program aims to support SPs in providing constructive feedback and student assessments within clinical encounters they are engaged in.

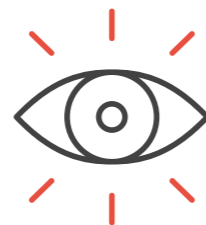
This guide provides necessary information about the Simulated Patients Program at the Medical Simulation Center. Our mission, vision and goals, definitions and important terms, policies and procedures are detailed in following sections.

SP MISSION, VISION & GOALS



MISSION

Our key mission is to provide best-evidenced based simulation experiences for undergraduate medical students and health professionals using innovative methods, that integrate cognitive, affective and psychomotor skills. Our ongoing determination for proper skills acquisition is central for graduating health professionals competent in their clinical practice, and well-prepared for future patient-centered encounters, enabling them to respond to the healthcare needs of societies they serve.



VISION

To facilitate students learning advancement and support them in attaining desired knowledge application, critical thinking skills, decision-making, and technical skills, while developing their self-confidence through constructive interaction with simulated patients.



GOALS

Our defined goals for the simulated patient program are guided by our mission and vision statements, and replicate our commitment to a larger community of practice in CMHS. These can be summarized as follows:

- Providing a conducive education & training environment where learners, faculty and SPs feel motivated & safe.
- Facilitating learning through respect, inter-professional collaboration, confidentiality, and safe work practice.
- Performing consistent and accurate SP role portrayal of medical interviewing, physical examination, and communication skills during learning and assessment activities - 'trained to be the role'.
- Training SPs to provide learners with constructive and relevant feedback to improve learning delivery.
- Coordinating the delivery of learning activities involving SPs through proper scheduling and defining their expected role through transparency and a shared learning contract.
- Maintaining an outstanding standardized patient program through recruitment and proper training according to best standard of practice of SP program guidelines using cost-effective initiatives.
- Establishing a quality assurance program to maintain best standard of practice in simulated patient methodology at the clinical skills training center.

TERMS & DEFINITIONS

Here are the most frequently used terms used in the SP program

SIMULATED PATIENT

The terms 'simulated patient', 'standardized patient' and 'simulated participant' are commonly used to define human role players who interact with learners in trial learnings and assessments, portraying common patients' roles including physical, symptomatic, emotional and/or behavioral aspects (Lewis et. al, 2017).

STANDARDIZED PATIENT

The term is used interchangeably to describe a person trained to portray in a realistic manner and repeat the same role several times in the same way.

CATEGORIES OF SPS

Simulated patients can be categorized into the following general categories:

1. Paid volunteer SP: refers to an SP recruited and paid on an hourly basis.
2. Unpaid volunteered SP: are confederates, usually simulation team members, students and faculty members who willingly accept to participate without payment. Their participation is limited to when other qualified simulated patients are not readily available especially during peer assessments and Objective Structured Clinical Examinations -OSCEs (Bradley, 2006)
3. Standardized real patients: real patients are not frequently used for teaching clinical skills at the simulation center. Real patients, however, are used in clinical clerkships at teaching hospitals all the time. Currently, standardized real patients are incorporated in structured clinical assessment activities that take place in the center. For example, standardized real patients are often used in clinical clerkship OSCEs.

CLINICAL FACULTY/CLINICAL TUTOR

The term is used interchangeably and refers to teaching staff members in charge of organizing and/or conducting clinical teachings or assessment sessions. Clinical tutors are typically faculty members or adjunct faculty members who are experienced in medical education.

MEDICAL STUDENT

A medical student is an undergraduate student (sometimes referred to as learner) in a medical school in various levels of training. The CMHS medical students learn to be competent and safe doctors by acquiring knowledge and clinical skills relevant to their level of training.

CASE SCENARIO

A case scenario is a written outline of what is to be portrayed at each encounter. It is also referred to as a 'script' or a 'scenario script' normally used to train and guide SP interaction and performance. The simulated patient program at our center aims to standardize templates used for scenarios to facilitate and optimize delivery of learning activities.

Subject experts develop scenarios and procedures, based on defined learning objectives for clinical sessions within preclinical and clinical years. Subject experts responsible for developing the scenarios are usually clinical faculty members, medical education professionals or communication skills specialists. Development of quality scenarios is ideally achieved in close collaboration with SPs. The major focus is to develop a scenario that enables proper portrayal characteristics of real patients' symptoms and signs.

FEEDBACK

Feedback is defined as giving thoughtful, supportive, and beneficial written or verbal feedback to individual medical learners about their performance following each encounter. Simulated patients recently play a key role in providing feedback to learners and educators (Wallace, 2007), with resources and trainings targeted to achieve provision of constructive feedback using ethically sound and professional approaches.



300

Completed Encounters

Between 2019 and 2020, the number of SP supported clinical encounters was 300



56

Number of Clinical Exams

Between 2019 and 2020, SPs involved in clinical exams including virtual forms were 56



109

Number of SPs

As of 2020, the number of simulated patients' involved in our program was 109

SP RECRUITMENT & RETENTION

RECRUITMENT

The simulation center strives to recruit interested and enthusiastic individuals who like to participate in educating medical students and future doctors. We value and cherish ethnic diversity of individuals interested in role playing. Processes of enlisting newly selected SPs for the program are described below:

1. Interested volunteers will follow the link to access the official website for the simulation center and follow instructions provided. This includes submitting an online application to the Simulation Center.
2. Candidates will receive appointments for an interview.
3. Successful candidates will receive a confirmation email.
4. An orientation session will be arranged for new SPs including observing simulations sessions.

DOCUMENTS REQUIRED

The following documents are required to open a file for each simulated patient in the program :

1. Copy of official ID (Emirates ID)
2. Registration form
3. Consent form
4. Financial record
5. No objection letter

REMUNERATION

The SPs working hours will be calculated and financial payments will be reimbursed as follows :

- Payments per hour will be given for virtual, onsite training, and participation in OSCE.
- Minimum payment for any session is calculated according to policies in place.
- For every session attended SP are given a payment incentive.
- Payments are normally given for sessions in cash not later than 3 weeks following sessions.
- Financial reimbursements for recorded sessions are decided on differently - please check with our program supervisor for details.



CONFIDENTIALITY

Simulated patients' data are confidential. Data is stored electronically, and a hard copy is filed in the simulation center under lock and key for a period of one year. These include but are not limited to the following documents:

- Personal data records.
- Worked hours.
- Financial records.
- Consent forms.
- Withdrawal of participation.
- Determination of agreement.
- SP scenarios.

RIGHTS & RESPONSIBILITIES

CODE OF CONDUCT

Our SP program is based and guided by core ethical principles and codes of conduct. Although these principles were established with reference to real patients, our intention is to follow them with regard to our SP program, in alignment with the Hippocratic Oath.

It is our obligation to abide by these principles which include the responsibility of doing what is in the best interest of patients. This includes avoiding imposing any harm on them, respecting their rights, holding special value to their autonomy and exercising their ability to live according to their personal motivations and capacities (Olejarczyk, & Young, 2019). Core principles administered and respect for simulated patients' preferences are visibly restated in their rights below.

SIMULATED PATIENTS' RIGHTS

- Simulated patients have the right to be treated respectfully and professionally by students, faculty, clinical tutors, and all staff at CMHS.
- Simulated patients have the right to refuse a role if they feel it is uncomfortable for them.
- They have the right to receive feedback on their performance & be instructed on how they can improve.
- Personal information of simulated patients will be treated in a highly confidential manner.
- Simulated patients' have the right to refuse sharing personal information, especially when their consent was not legally obtained.
- Simulated patients have the right to decline being recorded and/or refuse their photos being taken during a session.

SIMULATED PROGRAM RESPONSIBILITIES

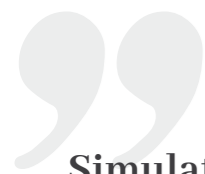
Here is the list of expected duties and responsibilities from all simulated patients. All our SPs are:

- Expected to be punctual and dependable when assigned to clinical teaching sessions.
- Shall demonstrate flexibility and display a reliable attitude when scheduled for a session.
- Shall adhere to written and verbal instructions provided.
- Shall portray scenarios in a standardized and accurate manner.
- Shall provide constructive feedback to medical students and colleagues when required.
- Shall complete checklists accurately both for formative and summative assessment(s) as required.
- Shall accept constructive feedback from facilitators and incorporate it into case portrayal.
- Shall be proficient in speaking English and/or Arabic. They should be able to read and speak clearly in either English or Arabic according to given scenarios, especially in history taking scenarios.
- Shall keep all documents used confidential. This includes respecting confidentiality of elements used within given contexts; student-related, faculty and staff members information.
- Shall refrain from sharing and dissemination of scenarios provided through social media, including WhatsApp or other social media platforms.
- Shall report any concerns or clarifications needed including emergent cancellation to the SP program training program coordinator directly.

SIMULATION CENTER RESPONSIBILITIES TOWARDS SIMULATED PATIENTS

The simulation center endeavors to provide a safe and conducive clinical learning environment for students, tutors, simulated patients, and staff. The SPs are part of the ecosystem of the center, and thus we are devoted to empowering them to perform at the highest level of competency through the following:

- Providing ongoing training sessions and orientations to scenario roleplaying, simulation methodology and simulated patients resources. See below for further details.
- Receiving scripts, clinical scenarios, and details of SP participation with abundant time for discussion and orientation.
- Respecting SPs confidentiality and privacy during simulation activities.
- Respecting autonomy and SP decisions regarding participation in simulation activities.
- Addressing raised concerns and challenges encountered during simulation activities.
- Receiving timely financial imbursements.
- Providing free access to CMHS facilities such as parking space, entrance permits, catering facilities and library.
- Providing COVID precautionary measures, adequate disinfection measures and free COVID testing as per protocol.
- Preparing adequate support services for standardized real patients including special hospitality rooms, wheelchairs, accessible toilet facilities, beds, and lounge.



Simulated Patients have the right to receive feedback on their performance & be instructed on how they can improve.



TRAINING AND DEVELOPMENT OPPORTUNITIES FOR SIMULATED PATIENTS

Regular training sessions for simulated patients are organized for the purpose of upgrading skills and simulation methods. We are currently working on enhancing our simulated patients' program with more training opportunities. Focusing on enhancing simulated patients' contributions to student assessment and provision of feedback is essential.

DISPUTE RESOLUTION OF A SIMULATED PATIENT

Simulation patient program supervisors and the rest of the team are available to listen and immediately address concerns related to the simulated patients' program. Listed below are situations where SPs could be disqualified from further participation in teaching activities:

- SP consistently fails to show up and is not able to take constructive feedback to master scenario role playing and portrayal.
- SP who is not punctual.
- SP violating confidentiality of educational materials.
- SP who do not respect the dress code and professional code of conduct at the simulation center and/or the College of Medicine.



COVID-19 PRECAUTIONS

To ensure adherence to needed preventive and precautionary measures at CMHS and the simulation center, all SPs are required to get a free COVID testing according to regularly updated UAEU policies.

The following general guidelines will apply to all SPs in clinical teaching sessions and encounters.

- Always wear protective face masks.
- SPs with fever and/or cough should call in advance and cancel their session.
- Any SP with sudden temperature readings above 37.8 Degrees Celsius is required to leave and seek medical advice.
- Everyone is expected to maintain physical distancing at least 1.5 meters apart.
- Wash hands frequently using soap and water for at least 20secs or use alcohol hand sanitizers.
- PPE (Personal Protective Equipment) are available when needed at the center.
- Isolation measures during sessions will be followed in case a SP feels sick or has flu symptoms including cough or fever. SP will be directed to the nearest healthcare facility for further evaluation.
- Bring your own food, utensils and drinking bottles, and make sure they are labelled with your name.
- Patients with positive COVID testing status or recent contacts to COVID patients, will be excluded from participating in activities according to CMHS regulations.



SP TASKS & ASSIGNMENTS

SCENARIO BASED ROLE PLAYING

Simulated patients are introduced to role-playing the case scenario. The following steps are typically followed in coordination with SP program supervisors:

1. The SP will receive a formal training session to serve as an orientation. This entails role playing scenarios, and an explanation of the learning outcomes/objectives of clinical encounters with students. In addition, the SP will be guided on how to best provide feedback to students about their performance (if required during the session outline).
2. The SP will be trained by a trainer in addition to the faculty member assigned to the clinical session. A case summary will be prepared, which places more emphasis on important behavioral and personality characteristics, relevant to portrayal. For example, a simulated patient with an anxiety related scenario may be required to show restlessness and agitation when being interviewed by students.
3. Selected SPs will observe a real time session of role play with student and patient portrayal.
4. The SP will conduct the role play according to the script provided.
5. Pre-recorded videos and audios can be utilized when needed.
6. Peer learning will be made available for newly recruited SPs, particularly in their first role. This is facilitated with the support of more experienced SPs.

MASTERING SCENARIO ROLE PLAYING

After attending the orientation session described above, the SP can ask and clarify any queries related to their role in the clinical teaching session. The clinical scenarios are pre-developed by senior faculty members. Certain scenarios require portraying characteristics that would determine the choice of the SP. For example, a family planning counseling session may require a female patient of childbearing age. Once clinical scenarios are assigned to the SP, the following process typically takes place:

1. The clinical scenarios will be shared with selected SPs at least 3 days before the clinical teaching session assigned.
2. The SP must acknowledge receipt of the scenario and confirm participation through email to the SP program supervisor.
3. The SPs receive training according to the level of complexity of the scenario. This is done by the SP trainer and/or clinical tutor.
4. Available training videos on the same case may be used to assist SPs portray the expected behavior according to the script.
5. When a hybrid simulation is arranged, a dry run of the case is usually required, for the purpose of familiarizing SPs with the content, setting and expected students' interaction during that session.
6. Additional training of physical examination techniques may be required during role portrayal for example, a script on "cerebellar ataxia" may need the patient to show signs of having tremors or uncoordinated movements.
7. On some occasions, with the SPs consent, the art of moulage could be used to enhance the simulation experience of students. For example, a patient presenting with a skin rash is portrayed using moulage on the hand.



SIMULATED PATIENTS GUIDE DURING ASSESSMENTS & LEARNING ACTIVITIES

A description of requirements and expectations from simulated patients during assessments and learning activities, is provided by SP program supervisors and trainers. The details provided can vary according to the teaching session or assessment activity. Here is a general guide of what is expected from SPs during typical sessions:

- Phones should be switched off or muted during all sessions unless instructed otherwise.
- Speak in a clear voice.
- You will need to alternate role-play with another SP partner after every two or three encounters with students, to ensure the scenario is portrayed in a standardized manner and avoid fatigue.
- Breaks between each round are provided for you to relax, use the bathroom or have tea.
- Make sure you get back to your station 3minutes before break time ends.
- You can either be replaced by your SP partner without disrupting the examination process or leave the exam room only after the student leaves the room.

During the current COVID pandemic, Online OSCE assessments were used through custom-made online platforms. The steps provided below describe the process normally used when participating in examinations:

1. Signed confidentiality and consent forms are required to be completed before embarking on examinations.
2. When participating in online examinations you will be asked to follow a specific link sent to you via email invite.
3. Pay attention to displayed instructions and prompts designed to enable you join the activity on your device.
4. You will need to switch on your camera and ensure students and examiners can see you.
5. Maintain a loud and clear voice throughout the examination. Patients with conditions that interfere with their ability to participate adequately in role play will not be considered for future portrayal, for example: SP with hearing problems avoiding the use of hearing aids.
6. Choose a quiet corner at home for example, a study room, and try to avoid distractions in your surroundings when participating.
7. Good eye contact is important during online encounters.
8. Display of verbal and nonverbal cues during portrayals should be applied as appropriate.
9. The IT team will guide, troubleshoot, and monitor assessment processes and recordings.

QUALITY REASSURANCE

The Simulation Center reviews and incorporates feedback and critiques received from learners (students), faculty members, staff, and simulated patients. Clinical sessions are evaluated routinely independently by students, faculty, and SPs. The SP program supervisors are always interested to hear from SPs, and work on incorporating their feedback to improve the content and conduct of clinical teaching sessions.

DISCLAIMER

This guide will be updated and revisited periodically. The purpose behind doing so is to encourage and ensure transparency in a continuously improving, evolving, and changing learning environment. Our simulated patient program focuses on core standards with existing basic attributes, that should be present in all programs, allowing us to enhance delivery of quality services in a sustainable manner. The content of this guide is the property of the Medical Simulation and Clinical Skills Training Center at CMHS.



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